

Psychopathology Class Resource List
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Bibliography
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These reference entries include sources that may be cited in class. The purpose of this bibliography is to assist students in finding a source of information if the citation is not contained in the lecture notes or presentation decks. These sources vary widely in terms of their degree of scholarly value, ranging from publications in peer-reviewed scientific and professional journals to internet blog posts describing the personal experiences of individual authors. As a general rule when writing papers, students should cite only scholarly sources and peer-reviewed research. Some reference list entries are written in APA (2010) *Publication Manual* (6th ed.) style, which provides more detail for print publications (e.g., such as location of publisher), whereas other reference list entries are written in APA (2020) *Publication Manual* (7th ed.) style, which provides more detail for digital sources (e.g., such as name of website). Sometimes the distinction between online periodical types is ambiguous (e.g., blog hosted by a newsletter). To aid the reader, long uniform resource locators rather than short ones are used. For most blog posts, magazine articles, and newspaper articles (e.g., blogs, journals, conference proceedings) that have a parent or overarching publication other than the website itself, the style in this bibliography generally follows the style of APA (2020, p. 320, Section 10.1 [Periodicals], Example 16 [Newspaper article] or Example 17 [Blog post]), in which the title of the parent publication or online periodical is italicized. For webpages on a website with a group author or an individual author, in which there is no parent or overarching publication other than the website itself, the style generally follows the style in APA (2020, p. 351, Section 10.16 [Webpages and Websites], Example 111 [Webpage on a website with a group author] or 112 [Webpage on a website with an individual author]). In general, a title is italicized for a work that stands alone (e.g., book, report, webpage on a website), and some part of the source is italicized for a work that is part of a greater whole (e.g., book chapter, journal article, newspaper article).

Disclaimer: This resource list is designed to be educational in nature and is not intended to provide clinical or professional advice. The reader is encouraged to contact a qualified professional if a mental health consultation is needed.

Abaluck, J., Kwong, L. H., Styczynski, A., Haque, A., Kabir, A. Bates-Jefferys, E., Crawford, E., Benjamin-Chung, J., Raihan, S., Mobarak, A. M. et al. (2021, December 2). Impact of community masking on COVID-19: A cluster-randomized trial in Bangladesh. *Science*. <https://doi.org/10.1126/science.abi9069>
Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care
Data from 342,183 adults in Bangladesh indicated that surgical masks were 95 percent effective at filtering out virus particles, compared with 37 percent for cloth face masks. Abaluck and colleagues cross-randomized mask type (cloth vs. surgical) and promotion

strategies at the village and household level in Bangladesh. Proper mask-wearing increased from 13.3% in the control group to 42.3% in the intervention arm. The intervention reduced symptomatic seroprevalence, especially among adults 60+ years in villages where surgical masks were distributed.

Abercrombie, W. P. (2013, April 25). *Whatever became of sin?* <https://bcinstitute.com/whatever-became-of-sin-4/>

W. P. “Ab” Abercrombie, Ph.D. has been in ministry as a Biblical Counselor for more than three decades. He holds a M.S.W. degree in Clinical Social Work and a Ph.D. in Human Services with a major in Psychology. He is licensed to practice in both Alabama and Florida as a professional counselor and family therapist. He is also an Ordained and Licensed Southern Baptist Minister, as well as Founder of the Biblical Counseling Institute (<https://bcinstitute.com/>) in Spanish Fort, Alabama. In this article, Dr. Abercrombie provides an analysis of Menninger’s (1973) book with contemporary applications. See also Menninger (1973) *Whatever Became of Sin?*.

Abraham, K., & Studaker-Cordner, M. (n.d.). *Your defiant child’s behavior: What you can—and can’t—control as a parent*. Empowering Parents.

<https://www.empoweringparents.com/article/your-defiant-childs-behavior-5-things-you-can-and-cant-control-as-a-parent/>

Kim Abraham, LMSW and Marney Studaker-Cordner, LMSW provide five practical recommendations for coping with oppositional and defiant children.

Abrams, Z. (2023, April). Boys are facing key challenges in school. Inside the effort to support their success. *Monitor on Psychology*, 54(3), 46–53.

<https://www.apa.org/monitor/2023/04/boys-school-challenges-recommendations>

Keywords: Boys, girls, learning disabilities

Zara Abrams is a staff writer for the APA *Monitor on Psychology*. In this article, Abrams reviews literature that shows how, by almost every assessment metric, boys of all ages are doing worse than girls. In comparison to girls, for example, boys are disciplined and diagnosed with learning disabilities at higher rates, their grades and test scores are lower, and they are less likely to graduate from high school. These disparities persist at the university level, where female enrollment outpaces male enrollment by 16%.

Abramson, A. (2021, November 1). Cultivating empathy. *Monitor on Psychology*, 52(8), 44.

Available: <https://www.apa.org/monitor/2021/11/feature-cultivating-empathy>

Ashley Abramson reviews several studies that offer insight into why it’s so important to practice the “right” kind of empathy, and how to empathy can be learned and improved.

Abramson, L. Y., Seligman, M. E. P., & Tealsdale, J. D. (1978). Learned helplessness in humans: Critique and reformulation. *Journal of Abnormal Psychology*, 87, 49–74.

As of announcement by the American Psychological Association on January 18, 2022, the *Journal of Abnormal Psychology* is now the *Journal of Psychopathology and Clinical Science*.

Adam, D. (2021, January 25). SARS-CoV-2 isn't going away, experts predict. *The Scientist*.
<https://www.the-scientist.com/news-opinion/sars-cov-2-isnt-going-away-experts-predict-68386>

Keywords: COVID-19, Coronavirus

David Adam describes how, as politicians try to schedule an end to the pandemic, scientists say the virus will stick around as an endemic disease similar to the common cold. Adam also refers to a *Science* article (see Lavine et al., 2021) that suggests catching the SARS-CoV-2 virus once or twice in childhood should then prevent people from getting severe disease from it later in life. Adam points out that the four coronaviruses identified as responsible for many common colds are thought to have been far more dangerous when they originally emerged as human diseases. The coronaviruses that cause common colds in modern times may have been the basis for what people at one time in history may have called flu epidemics or pandemics. For example, the so-called Russian flu that killed 1,000,000 people in 1890 may have been caused by OC43, a human coronavirus that is now endemic. As Adam concludes, "The end of the SARS-CoV-2 pandemic, he says, may only be the start of our relationship with this virus" (para 18). Also see Lavine, Bjornstad, and Antla (2021) "Immunological Characteristics Govern the Transition of COVID-19 to Endemicity."

Adams, D. R., Kern, D. W., Wroblewski, K. E., McClintock, M. K., Dale, W., & Pinto, J. M. (2018, January). Olfactory dysfunction predicts subsequent dementia in older U.S. adults. *Journal of the American Geriatrics Society*, 66(1), 140–144. [First published online September 25, 2017] <https://doi.org/10.1111/jgs.15048>.
<https://onlinelibrary.wiley.com/doi/full/10.1111/jgs.15048>

Based on a longitudinal study and home interview of a population representative of U.S. older adults (i.e., a total of 2,906 men and women aged 57 to 85), the authors investigated the relationship between olfactory dysfunction and subsequent diagnosis of dementia. Objective odor identification ability was measured at baseline using a validated five-item test using "odor pens" (Sniffing Sticks) with the scents of peppermint, orange, rose, fish, leather. Five years later, the respondent, or a proxy if the respondent was too sick to interview or had died, reported physician diagnosis of dementia. The association between baseline olfactory dysfunction and an interval dementia diagnosis was tested using multivariate logistic regression, controlling for age, sex, race and ethnicity, education, comorbidities, and cognition at baseline. Older adults with olfactory dysfunction had more than twice the odds of having developed dementia 5 years later (odds ratio = 2.13, 95% confidence interval = 1.32-3.43), controlling for the above covariates. The authors conclude that the validated five-item odor identification test is an efficient, low-cost

component of the physical examination that can provide useful information while assessing individuals' risk of dementia.

Addiction Counselor Exam Secrets Prep Team. (2014). *Addiction counselor exam study guide*. Beaumont, TX: Mometrix Test Preparation.

Addiction Counselor Exam Secrets Prep Team. (2014). *Addiction counselor practice questions & Review for the Addictions Counselor Exam*. Beaumont, TX: Mometrix Test Preparation.

Addiction Counseling Professional Organizations. (2018). What do you need to do to become a Substance Abuse Counselor? *Addiction-Counselors*. <http://www.addiction-counselors.com/articles/becoming-a-substance-abuse-counselor.html>

Adelson, S., Ahola, J., Barber, M., Casoy, F., Drescher, J., & Erickson-Schroth, L. (2021, January 6). Impact of COVID-19 crisis on LGBTQ youth. *Psychiatric Times*. <https://www.psychiatrictimes.com/view/impact-of-covid-19-crisis-on-lgbtq-youth>
Stewart Adelson, MD, Joanne Ahola, MD, Mary Barber, MD, Flavio Casoy, MD, Jack Drescher, MD, and Laura Erickson-Schroth, MD, MA discuss how the pandemic has exacerbated many existing dangers and introduced a few new ones.

Adept. (2020, August 19). *Drug misuse, abuse, and addiction: What's the difference?* Meridian. Psychiatric Partners. [Drug misuse, abuse, and addiction: What's the difference? - Meridian Psychiatric Partners, LLC](https://www.meridianpsychiatry.com/insights/2020/08/19/drug-misuse-abuse-and-addiction-what-s-the-difference/)

Adi, A., & Mathbut, M. (2018, April 1). The duty to protect: Four decades after *Tarasoff*. *The American Journal of Psychiatry Residents' Journal*, 13(4), 6–8. <https://ajp.psychiatryonline.org/doi/full/10.1176/appi.ajp-rj.2018.130402>

Adhikari, S. (2018, August 2). *7 differences between validity and reliability*. Public Health Notes. <https://www.publichealthnotes.com/17-differences-between-validity-and-reliability/>

Adler, F. (2013, February 1). Catching the cold. *The Scientist*. <https://www.the-scientist.com/features/catching-the-cold-39858>

Science writer Fred Adler notes that the simplicity that stems from the small physical size of viruses has changed how scientists think about the process of evolution. As in all organisms, a mutation in a virus changes one molecule. Evolution in an RNA virus is distinct from that of more traditionally studied organisms because of its tiny genome of single-stranded RNA. Rhinoviruses, for example, carry just 10 genes. A swarm of viruses probably explores more evolutionary space than any other evolving entity, as seen in the

rapid evolution of resistance to antiviral therapies in patients with HIV. In fact, there may well be more viruses in a single common cold infection than there have been primates in the entire history of life on Earth. Mutation rates of rhinoviruses, which are small RNA viruses, are roughly 100,000 times higher than in humans. With a global population exceeding one billion trillion people, rhinoviruses are arguably the most successful rapidly infecting viruses on Earth today.

Adler, G., & Hull, R. F. C. (Trans. & Eds.). G. (1976). *The collected works of C. G. Jung* (Vol. 18). Princeton, NJ: Princeton University Press.

Admin. (2020, September 28). *The ICD-11 transition timeline*. Medical Coding News. <https://medicalcodingnews.org/the-icd-11-transition-timeline-2/>

Aiken, C. (2017, July 20). 6 ways to reduce no-shows (and save lives). *Psychiatric Times*. http://www.psychiatrictimes.com/news/six-ways-reduce-no-shows-save-lives?rememberme=1&elq_mid=1831&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Aiken, C. (2018, September). How to diagnose mixed features without over-diagnosing bipolar. *Psychiatric Times*, 35(9), 1, 6–7.

Aiken, C. (2019, April 16). Antidepressants in bipolar II disorder. *Psychiatric Times*. <https://www.psychiatrictimes.com/bipolar-disorder/antidepressants-bipolar-ii-disorder>
Although antidepressants are increasingly discouraged in the treatment of bipolar I disorder, psychiatrists have different opinions regarding their use in the treatment of bipolar II disorder. In reviewing a study by psychiatrist Gordon Parker (2019), in which 18 international experts were surveyed regarding their treatment of bipolar II disorder, psychiatrist Chris Aiken summarizes the survey results by concluding that antidepressants were preferred by physicians if the patient responded to them in the past or got worse after stopping them. Antidepressants were also seen as a viable option when depression was long-standing and hypomanias were mild and restricted to the distant past. Psychiatrists avoided prescribing antidepressants when there was (1) a history of manic symptoms, mixed states, or rapid cycling within a few months of starting an antidepressant, (2) rapid cycling, or (3) recent hypomanic or mixed symptoms within the past 6 months.

Aiken, C. (2019, May 16). Separated at birth: Bipolar and borderline personality disorders. *Psychiatric Times*. https://www.psychiatrictimes.com/bipolar-disorder/separated-birth-bipolar-and-borderline-personality-disorders?rememberme=1&elq_mid=6887&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Chris Aiken, M.D., Bipolar Disorder Section C-Editor for *Psychiatric Times*, discusses similarities between borderline personality disorder and cyclothymic disorder, a misunderstood variant of bipolar disorder. This disorder was known as *cycloid personality disorder* in early drafts of the DSM-III. Cyclothymic personality may be a risk factor that may contribute to the development of borderline personality disorder.

Aiken, C. (2019, September 5). Dark chocolate for depression. *Psychiatric Times*.

https://www.psychiatrictimes.com/depression/dark-chocolate-depression?rememberme=1&elq_mid=8519&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Psychiatrist Chris Aiken, M.D. provides a brief discussion of a cross-sectional survey (see Jackson et al., 2019) of over 13,000 adults in which self-reported chocolate consumption was compared with self-reported depressive symptoms as measured by the Patient Health Questionnaire—9 (PHQ-9). People who ate dark chocolate in the past 24 hours were 70% less likely to report depression. The same effects were not seen with milk chocolate, suggesting that the benefits were not simply due to the pleasures of the food. In consideration of possible confounding variables, the researchers controlled for other lifestyle factors such as total sugar and caloric intake, physical activity, smoking, alcohol, as well as age, sex, marital status, education, income, weight, and presence of chronic medical problems. In the end, the association remained. Those who consumed dark chocolate reported lower levels of depression, and those who ate the largest quantities of chocolate had the lowest rates of depression. On average, the consumers of dark chocolate ate only 12 grams a day—a little less than half an ounce. The cut-off for “dark” chocolate was $\geq 45\%$ cocoa. In contrast, the optimal dose for physical health is 1 to 2 ounces a day of $\geq 70\%$ cocoa. According to Aiken, keeping the percentage high and the ounces low maximizes the healthy ingredients while minimizing the calories and sugar.

Aiken, C. (2020, April 15). Can good sleep prevent a virus? *Psychiatric Times*.

<https://www.psychiatrictimes.com/slideshows/can-good-sleep-prevent-virus>

Psychiatrist Chris Aiken, M.D. provides a concise summary of a review in *Nature Immunology* that concludes that it’s “chronic sleep loss that is detrimental rather than acute sleep loss, which instead might enhance the immune system.” Cognitive Behavioral Therapy for Insomnia (CBT-i) is an approved method for treating insomnia without the use of sleeping pills. CBT-i improves immune function: CBT-i raised levels of interferons, neutrophils; lymphocytes, and interleukins in a randomized controlled trial of women with compromised immune function due to breast cancer. CBT-i is antiinflammatory and antidepressive: CBT-i treated depression in over a dozen randomized controlled trials, and reduced inflammatory markers like CRP and inflammatory cytokines in two randomized trials.

Aiken, C. (2021, January 11). 7 questions that separate ADHD from bipolar disorder. *Psychiatric Times*. <https://www.psychiatrictimes.com/view/7-questions-that-separate-adhd-from-bipolar-disorder?/>

Psychiatrist Chris Aiken, M.D. provides practical questions for psychiatrists faced with differentiating between diagnoses of ADHD and bipolar disorder: (1) Do they have ADHD symptoms? In contrast to ADHD, manic episodes may be characterized by three differential diagnostic criteria that are unique to mania: expansive mood, grandiosity, and decreased need for sleep. (2) How to their ADHD symptoms change over time? In bipolar disorder, cognitive symptoms more typically worsen with age, whereas in individuals with ADHD these symptoms may improve or resolve between the ages of 18 and 25 years. (3) Are their cognitive symptoms stable or cyclical? Although some research suggests that cognitive problems may persist independently from mood episodes, traditional wisdom is that bipolar symptoms have onsets and offsets whereas ADHD is persistent. (4) What type of cognitive problems do they have? Although both disorders share impairment in executive functioning, individuals with ADHD often have more impairment in working memory. (5) How frequent and intense are their depressive symptoms? Although depressive episodes are common in both disorders, they tend to have more intensity and frequency in bipolar disorder. (6) Do they have a family history of ADHD or bipolar disorder? Although validated only in adults, the Bipolarity Index may assist the clinician in identifying some non-symptomatic markers that differentiate bipolar from ADHD. (7) How do they respond to a stimulant? Typically, psychostimulants having a calming effect in ADHD. In contrast, if stimulants enhance energy, mood, or motivation, then it is possible that the diagnosis may not be ADHD.

Aiken, C. (2021, February 3). How to screen for bipolar disorder in 2 minutes. *Psychiatric Times*. <https://www.psychiatrictimes.com/view/how-screen-bipolar-disorder-two-minutes>

Aiken, C. (2021, February 24). Can food treat depression? *Psychiatric Times*. <https://www.psychiatrictimes.com/view/can-diet-treat-depression>

Aiken, C. (2021, March 11). Adult-Onset ADHD raises questions. *Psychiatric Times*, 38(3), 24. <https://www.psychiatrictimes.com/view/adult-onset-adhd-raises-questions?>

In 3 of the 4 papers suggesting adult-onset ADHD, the symptoms actually began in the teenage years, and many of the teenaged-onset cases (29% to 75%) had symptoms of in their childhood that were either below diagnostic threshold or were classified as part of a related disorder such as conduct disorder or oppositional-defiant disorder. In the fourth study, most of the children with ADHD no longer had the full disorder as adults, and most of the adults who met criteria for ADHD in middle age did not have the full disorder in childhood. However, the research design problem was that the researchers did not ask the participants to identify when their ADHD symptoms began. Therefore, it is possible that some of these cases may have been teenaged-onset cases, as suggested in

the other 3 studies. Most cases of adult-onset ADHD seem to be better explained as true ADHD that was partially expressed during childhood, false positives in individuals whose symptoms were due to another disorder (e.g., sleep disorders, substance use disorders, or another psychiatric disorder), or false positives in healthy people who overendorsed their symptoms during the diagnostic interview. If adult-onset ADHD does exist, it may not be the same disorder as childhood-onset ADHD.

Aitken, M., Steensma, T. D., Blanchard, R., VanderLaan, D. P., Wood, H., Fuentes, A., Spegg, C., Wasserman, L., Ames, M., Fitzsimmons, C. L., Leef, J. H., Lishak, V., Reim, E., Takagi, A., Vinik, J., Wreford, J., Cohen-Kettenis, P. T., de Vries, A. L. C., Kreukels, B. P. C., & Zucker, K. J. (2015). Evidence for an altered sex ratio in clinic-referred adolescents with gender dysphoria. *Journal of Sexual Medicine, 12*(3), 756–763.

Alcoholics Anonymous (1939). *Alcoholics Anonymous: The story of how more than one hundred men have recovered from alcoholism*. New York, NY: Works Publishing Company.

On April 10, 1939, 4,730 copies of the first edition of *Alcoholics Anonymous* were published by Works Publishing Company at \$3.50 per copy. The printer, Edward Blackwell of the Cornwall Press, was told to use the thickest paper in his shop. The large, bulky volume became known as the “Big Book” and the name has stuck ever since. On page 170 of *AA Comes of Age* Bill W. wrote that the idea behind the thick, large paper was to convince the alcoholic he was getting his money’s worth. The second edition was published in 1955, third edition in 1976, and the fourth edition in 2001.

Alcoholics Anonymous World Services. (1955). *Alcoholics Anonymous* (2nd ed.). New York, NY: Author.

Alcoholics Anonymous World Services. (1953/2010). *Twelve steps and twelve traditions*. New York, NY: Author.

Copyrighted in 1952 by The AA Grapevine, Inc. and Alcoholics Anonymous Publishing (now known as Alcoholics Anonymous World Services, Inc.), the first printing of the book was in April 1953. There is a general consensus among scholars and historians that Bill W. wrote the book.

Alcoholics Anonymous World Services. (1976). *Alcoholics Anonymous* (3rd ed.). New York, NY: Author.

Alcoholics Anonymous World Services. (2001). *Alcoholics Anonymous* (4th ed.). New York, NY: Author.

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Alcoholics Anonymous World Services. (1939/2001). *Alcoholics anonymous* (The Big Book). New York, NY: Author.

Alcoholics Anonymous (2010). *The book that started it all: The original working manuscript of Alcoholics Anonymous*. Center City, MN: Hazelden.

Alcoholics Anonymous World Services. (1953/2010). *Twelve steps and twelve traditions*. New York, NY: Author.

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Alcoholics Anonymous World Services. (2014). *Alcoholics Anonymous 2014 membership survey* [P-48]. New York, NY: Alcoholics Anonymous World Services.

https://www.aa.org/assets/en_US/p-48_membershipsurvey.pdf

More than 6,000 members of Alcoholics Anonymous (AA) from the U.S. and Canada participated in a random survey. Similar studies have been conducted every three years since 1968 by the AA General Service Office. Before coming to AA, 59% of the members received some type of treatment or counseling (such as medical, psychological, spiritual, etc.) related to their drinking. Of those who received some type of treatment or counseling before coming into AA, 74% of those members who received treatment or counseling said it played an important part in directing them to AA. After coming to AA, 58% of the members received some type of treatment or counseling (such as medical, psychological, spiritual, etc.) related to their drinking. Of those who received some type of treatment or counseling after coming into AA, 84% of those members who received treatment or counseling said it played an important part in their recovery from alcoholism.

Alcoholics Anonymous (1939). *Alcoholics Anonymous: The story of how more than one hundred men have recovered from alcoholism*. New York, NY: Works Publishing Company.

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“Twelve Suggested Points for AA Tradition.” Bill W. published more than 150 articles in the Grapevine between 1945 and 1970. These articles were collected in the anthology known as *The Language of the Heart* (1988).

Alcoholics Anonymous World Services. (2014). *Alcoholics Anonymous 2014 membership survey* [P-48]. New York, NY: Alcoholics Anonymous World Services. https://www.aa.org/assets/en_US/p-48_membershipsurvey.pdf

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Alcoholics Anonymous World Services. (2021). *Protecting online anonymity*. <https://aa-district18.org/protecting-online-anonymity-with-zoom-meetings/>

With the rush to shift to online meetings in 2020, many people did not take time to investigate what this shift meant to the spiritual foundation of our recovery – namely, anonymity. This article, which originated in the AA Central Office in New York City, was posted on the website of Alcoholics Anonymous District 18 Southern Illinois. The article explains some Zoom default settings and ways to provide greater protection of anonymity in meetings.

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Alexander, M. J., Haugland, G., Ashenden, P., Knight, E., & Brown, I. (2009, September). Coping with thoughts of suicide: Techniques used by consumers of mental health services. *Psychiatric Services, 60*(9), 1214–1221. doi: 10.1176/ps.2009.60.9.1214

Mary Jane Alexander, Gary Haugland, Peter Ashenden, Ed Knight, and Isaac Brown studied participants in 14 regional consumer-run Hope Dialogues in New York State (N=198). The participants wrote up to five strategies they use to deal with suicidal thoughts. First responses included spirituality, talking to someone, positive thinking, using the mental health system, considering consequences of suicide to family and friends, using peer supports, and doing something pleasurable. Although a majority reported that more formal therapeutic supports were available, only 12% indicated that they considered the mental health system a frontline strategy. Instead, respondents more frequently relied on family, friends, peers, and faith as sources of hope and support. When (when values tie for the same rank, the next rank is skipped): (1) Spirituality and religious practices (18%), (2) Talking to someone and companionship (14%), (3) Positive thinking (13%), **(4) Using the mental health system (12%)**, (5) Considering consequences to people close to me (9%), (6) Using peer supports (8%), (6) Doing something pleasurable (8%), (8) Protecting myself from means of harm (5%), (9) Doing grounding activities (4%), (10), Considering consequences to self, (11) Doing tasks to keep busy (2%), (12) Maintaining sobriety (2%), (13) Finding a safe place (1%), (14) Helping others (1%), (14) Seeking emotional outlets (1%).

Allen, R. C. (1973). The Brawner Rule: New lyrics for an old tune. *Washington University Law Review*, 1973(1), 1–21. https://openscholarship.wustl.edu/law_lawreview/vol1973/iss1/6
Richard Allen is Professor of Law and Director, Institute of Law, Psychiatry and Criminology, The George Washington University School of Law, Washington, D.C. In this article, he compares the Brawner Rule with the Durham Rule.

Allport, G. W. & Odbert, H. S. (1936). Trait names: A psycho-lexical study. *Psychological Monographs*, 47(211).

Altson, R. (2004). *Stumbling toward faith: My longing to heal from the evil that God allowed*. Grand Rapids, MI: Zondervan.

Amaresha, A. C., & Venkatasubramanian, G. (2012, January 1). Expressed emotion in schizophrenia: An overview. *Indian Journal of Psychological Medicine*, 34(1), 12–20. doi:10.4103/0253-7176.96149

Keywords: Expressed emotion (EE), schizophrenia, relapse, risk factor

Anekal C. Amaresha (Departments of Psychiatry and Psychiatric Social Work, National Institute of Mental Health and Neurosciences, Bangalore, Karnataka, India) and Ganesan Venkatasubramanian (Department of Psychiatric Social Work, National Institute of Mental Health and Neurosciences, Bangalore, Karnataka, India) describe how expressed emotion (EE) is considered to be an adverse family environment that is “one of the most robust predictors of relapse in schizophrenia” (p. 12).

American Association of Sexuality Educators, Counselors and Therapists. (2016). *AASECT position on sex addiction*. <https://www.aasect.org/>

American Counseling Association. (2014). *2014 ACA code of ethics*. <https://www.counseling.org/knowledge-center>

As shown in reference example #55 in APA (2020, p. 330), the reference entry above is written in 7th edition style.

American Foundation for Suicide Prevention. (AFSP). (2019). *Suicide statistics*. American Foundation for Suicide Prevention. <https://afsp.org/about-suicide/suicide-statistics/>
In 2017, the highest U.S. age-adjusted suicide rate was among Whites (15.85) and the second highest rate was among American Indians and Alaska Natives (13.42). Much lower and roughly similar rates were found among Black or African Americans (6.61) and Asians and Pacific Islanders (6.59). The age-adjusted suicide rate in 2017 was 14.0 per 100,000 individuals. The rate of suicide is highest in middle-age white men in particular. In 2017, men died by suicide 3.54 times more often than women. On average, there are 129 suicides per day. White males accounted for 69.67% of suicide deaths in 2017. In 2017, firearms were the most common method of death by suicide, accounting for a little more than half (50.57%) of all suicide deaths. The next most common methods were suffocation (including hangings) at 27.72% and poisoning at 13.89%. In 2017, firearms accounted for 50.57% of all suicide deaths: Firearm (50.6%), Suffocation (27.7%), Poisoning (13.9), and Other (7.8%). The data are based on age-adjusted rates. According to AFSP, the data were derived from Centers for Disease Control and Prevention (CDC) Data & Statistics Fatal Injury Report for 2017.

American Psychiatric Association. (1952). *Diagnostic and statistical manual of mental disorders*. Washington, DC: Author.

American Psychiatric Association. (1968). *Diagnostic and statistical manual of mental disorders* (2nd ed.). Washington, DC: Author.

American Psychiatric Association. (1978). *Diagnostic and statistical manual of mental disorders – Draft* (3rd ed., Draft). Washington, DC: Author.
This draft edition of the DSM-III was published on January 15, 1978.

American Psychiatric Association. (1980). *Diagnostic and statistical manual of mental disorders* (3rd ed.). Washington, DC: Author.

American Psychiatric Association. (1987). *Diagnostic and statistical manual of mental disorders* (3rd ed., revised.). Washington, DC: Author.

American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision). Washington, DC: Author.

American Psychiatric Association. (2004). Practice guidelines for the treatment of patients with schizophrenia, second edition. *American Journal of Psychiatry*, 161 (suppl 2), 1–56.

American Psychiatric Association (2013). *The principles of medical ethics with annotations especially applicable to psychiatry*. Arlington, VA: Author.

Keywords: Goldwater Rule, Narcissistic Personality, Paranoid Personality

The so-called Goldwater Rule refers to Section 7, Paragraph 3: “On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement” (APA, 2013, p. 9).

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>
On March 1, 2022, this edition of the DSM-5 was replaced by DSM-5-TR (APA, 2022).

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: Author.

This reference entry is written in the old APA (2010) 6th edition style, which was replaced by APA (2020) 7th edition style on October 1, 2019. On March 1, 2022, this edition of the DSM-5 was replaced by DSM-5-TR (APA, 2022).

American Psychiatric Association. (2013, May 17). *Highlights of changes from DSM-IV-TR to DSM-5*. Arlington, VA: Author.

American Psychiatric Association (2013). *Attention deficit/hyperactivity disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Autism spectrum disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Conduct disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Disruptive mood dysregulation disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Eating disorders* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Gender dysphoria* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Intellectual disability* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Internet gaming disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Major depressive disorder and the bereavement exclusion* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Mild neurocognitive disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Obsessive-compulsive and related disorders* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Paraphilic disorders* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Personality disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Posttraumatic stress disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Schizophrenia* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Sleep wake disorders* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Specific learning disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Social communication disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Somatic symptom disorder* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association (2013). *Substance-related and addictive disorders* [Fact sheet]. Arlington, VA: Author. <http://dsm5.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

American Psychiatric Association. (2015, August). *DSM-5 update: Supplement to diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: Author.

American Psychiatric Association. (2016, September). *Supplement to diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Association Publishing. This supplement is located at this link: <http://dsm.psychiatryonline.org>
Available at <http://dsm.psychiatryonline.org/pb-assets/dsm/update/DSM5Update2016.pdf>
This supplement reflects updates to diagnostic criteria and related text; coding updates, changes, or corrections; and any other information necessary for compensation in mental

health practice. This supplement contains ICD-10-CM updates that became effective October 1, 2016. It also includes content from prior updates that remain relevant to compensation and current clinical practice.

American Psychiatric Association. (2017, October). *DSM-5 update: Supplement to diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: Author.

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425787>

Key words: DSM-5-TR (APA, 2022), text revision

This reference entry (above) illustrates the correct citation style as shown in APA (2020, p. iv) 7th edition style. For historical archives purposes, the same reference entry written in APA (2010) 6th edition style is elsewhere in this bibliography.

The *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition, Text Revision (DSM-5-TR) includes the fully revised text and references, updated diagnostic criteria and ICD-10-CM codes since DSM-5 was published in 2013. It features a new disorder, Prolonged Grief Disorder, as well as codes for suicidal behavior available to all clinicians of any discipline without the requirement of any other diagnosis. The 2022 text revision includes over 70 modified criteria sets with clarifications since publication of DSM-5, over 50 coding updates new to DSM-5-TR for substance intoxication and withdrawal and other disorders, new codes to identify and monitor suicidal behavior (i.e., without the requirement of any other diagnosis), as well as updated ICD-10-CM codes that have been introduced since 2013.

With contributions from more than 200 subject matter experts, this updated text revision of DSM-5 includes some significant changes such as refinement of criteria, symptom codes for suicidal behavior and nonsuicidal self-injury, restoration of the DSM-IV category of “Unspecified Mood Disorder,” whose omission from DSM-5 was a byproduct of the decision to eliminate the mood disorders diagnostic chapter in favor of having separate top-level diagnostic classes for bipolar disorders and depressive disorders. Diagnostic criteria have also been revised, primarily for clarification, for several disorders including Autism spectrum disorder, Manic episode, Bipolar I and bipolar II disorder, Cyclothymic disorder, Major depressive disorder, Persistent depressive disorder, PTSD in children, Avoidant-restrictive food intake disorder, Delirium, Substance/medication-induced mental disorders, and Attenuated psychosis syndrome (in the chapter “Conditions for Further Study”). In DSM-5-TR, there is the addition of a new category of Prolonged Grief Disorder (F43.8), which in earlier versions of ICD-10 was identified as “Other reactions to severe stress” and which in earlier versions of ICD-11 had already been identified as “Prolonged Grief disorder.” Depending on the year of publication, ICD-11 “Prolonged Grief Disorder” has been variously coded as 7B22 in the Beta Draft of ICD-11 (World Health Organization [WHO], 2014) and it is

currently coded as 6B42 in the ICD-11 (WHO, 2022). It is estimated that following the nonviolent loss of a loved one, approximately one in 10 bereaved adults is at risk for developing prolonged grief disorder, which involves a pervasive inability to move past grief consisting of symptoms severe enough to affect day-to-day functioning.

The reference entry (above) illustrates the correct citation style as shown in APA (2020, p. iv) 7th edition style. For historical archives purposes, the same reference entry written in APA (2010) 6th edition style is shown below:

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text revision).

Key words: DSM-5-TR (APA, 2022), text revision

American Psychological Association. (2001). *Publication manual of the American Psychological Association* (5th ed.). Washington, DC: Author.

American Psychological Association. (2002). Ethical principles of psychologists and code of conduct. *American Psychologist*, 57(12), 1060–1073.

American Psychological Association. (2006). Evidence-based practice in psychology. *American Psychologist*, 61(4), 271–285. <https://doi.org/10.1037/0003-066X.61.4.271>

American Psychological Association. (2010). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: Author.

American Psychological Association. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, 67, 10–42.
<http://dx.doi.org/10.1037/a0024659>

American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *American Psychologist*, 70(9), 832–864.
doi: 10.1037/a0039906

American Psychological Association. (2017, February 24). *Clinical practice guideline for the treatment of PTSD*. <https://www.apa.org/ptsd-guideline/ptsd.pdf>
This document was adopted as APA Policy February 24, 2017.

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.). <https://doi/10.1037/0000165-000>

This reference entry (above) illustrates the correct 7th edition of APA (2020) style as shown on the copyright page (p. iv) of the entry. APA (2010) 6th edition style was replaced by APA (2020) 7th edition style on October 1, 2019. The same reference entry is shown below using the APA (2010) 6th edition style, which was replaced by APA (2020) 7th edition style on October 1, 2019:

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.). Washington, DC: Author.

American Psychological Association Practice and Science Directorates (2000, August). Report of the Task Force on test user qualifications.

<https://www.apa.org/science/programs/testing/qualifications.pdf>

American Psychological Association Practice Organization, Legal and Regulatory Affairs. (2018, April 5). Airlines update their policies on emotional support animals, *Practice Update*. <https://www.apaservices.org/practice/update/2018/04-05/airlines-support-animals>

Keywords: Service animal, support animal, service dog, emotional support animal (ESA)
See also Ensminger and Thomas (2013) and Traveling by Air With Service Animals (14 CFR Part 382 (Dec. 10, 2020).

American Psychological Association Services. (2018, November). *Psychotherapy codes for psychologists*. American Psychological Association Services.

<https://www.apaservices.org/practice/reimbursement/health-codes/psychotherapy>

All mental health professionals including psychologists, psychiatrists, nurses and social workers delivering psychotherapy services use the same applicable CPT® codes when billing clients and filing health insurance claims with third-party payers, including Medicare, Medicaid and private health insurance carriers. This family of codes was last revised in 2013 in order to simplify the coding framework and allows all codes to be used in all settings, instead of describing site-specific services.

American Psychological Association Services. (2020, April 24). *Telehealth guidance by state during COVID-19: State emergency orders relevant to licensed psychologists during the COVID-19 public health crisis*. American Psychological Association Services.

<https://www.apaservices.org/practice/clinic/covid-19-telehealth-state-summary>

Keywords: COVID-19, Coronavirus

This article provides state-specific information related to emergency orders relevant to licensed psychologists during the COVID-19 public health crisis. This resource is updated regularly for the duration of the COVID-19 public health emergency.

Government and payer policies in response to the coronavirus crisis are changing rapidly, so it is recommended that psychologists check the APA Practice Information Hub

frequently. It is important to note that the state-specific information below does not apply to Medicare, including information about trainees' services. The Centers for Medicare and Medicaid Services does not cover services provided by supervised trainees to Medicare beneficiaries. With regard to Medicaid, Georgia Medicaid is temporarily waiving any restrictions on originating sites (where the patient is located) and distant sites (where the provider is located) during the public health emergency. Qualified providers should continue to follow all applicable licensure rules specific to their profession. Services delivered from distant sites will be billed using the provider billing address associated with the enrolled Medicaid practice or facility. Claims must be billed using the associated procedure code, GT modifier and place of service code 02 to indicate telehealth delivery. With regard to Supervised Trainee Telehealth Services – Telesupervision and Medicaid Reimbursement, Georgia Emergency Rule amending Board Rule 510-2-.05 allows for supervision of practicum students, interns, or post-doctorate fellows to be conducted by telephone and/or videoconferencing for the duration of the COVID-19 state of emergency, and for a period of not more than 120 days thereafter.

American Society of Addiction Medicine (1996). *Patient placement criteria for the treatment of substance-related disorders* (2nd ed.). Washington, DC: Author.

Keywords: American Society of Addiction Medicine (ASAM)

American Society of Addiction Medicine. (2001). *ASAM patient placement criteria for the treatment of substance-related disorders* (2nd ed., rev.). Chevy Chase, MD: Author.

Keywords: American Society of Addiction Medicine (ASAM)

American Society of Addiction Medicine. (2013, October 24). *The ASAM criteria: Treatment criteria for addictive, substance-related, and co-occurring conditions*. Carson City, NV: The Change Companies.

Keywords: American Society of Addiction Medicine (ASAM)

The placement criteria are on pages 43–54.

American Society of Addiction Medicine. (2013). *Advancing access to addiction medicine: Implications for opioid addiction treatment*. Rockville, MD: Author.

Keywords: American Society of Addiction Medicine (ASAM)

Anchin, J. C., & Kiesler, D. J. (Eds.) (1982). *Handbook of interpersonal psychotherapy*. Elmsford, NY: Pergamon.

Ancis, J. R., & Jongsma, A. E. (2007). *The complete women's psychotherapy treatment planner*. New York, NY: John Wiley & Sons.

- Anderson, Kenneth. (2021). *Struchnine & gold: One of the untold history of addiction treatment in the United States* [Part 1]. Philadelphia, PA. Author.
- Andrade, C. (2016). Cannabis and neuropsychiatry: The longitudinal risk of psychosis as an adverse outcome. *Journal of Clinical Psychiatry*, 77, e739-e742.
THC appears to accelerate the onset of a first psychotic episode by 2 to 3 years in individuals who are at risk. An exposure-dependent effect has also been demonstrated. Frequent cannabis use and more potent THC levels increase the risk of psychosis. Ongoing cannabis use after a first psychotic episode is correlated with an increased risk of relapse, as well as a higher severity of positive symptoms and a greater decline in overall functioning. Abstinence reduces the relapse risk.
- APA Office of Health Care Financing Staff. (2018, May 3). *Up-to-code: Testing code changes on the horizon: Preparing psychologists for upcoming billing code changes taking effect Jan 1, 2019*. Practice Update. <https://www.apapracticecentral.org/update/2018/05-03/testing-code-changes.aspx>
- Appleby, D. (1987). Producing a déjà vu experience. In V. P. Makosky, L. G. Whittemore, & A. M. Rogers (Eds.), *Activities handbook for the teaching of psychology, vol. 2* (pp. 78–79). Washington, DC: American Psychological Association.
- Arenson, M., & Cohen, B. (2017, March). Posttraumatic stress disorder and cardiovascular disease. *PTSD Research Quarterly*, 28(1), 1.
<http://www.ptsd.va.gov/professional/newsletters/research-quarterly/V28N1.pdf>
- Armstrong, C. (2019). *Rethinking trauma treatment: Attachment, memory consolidation, and resilience*. New York, NY: W. W. Norton.
- Aron, A., Melinat, E., Aron, E. N., Vallone, R. D., & Bator, R. J. (1997). The experimental generation of interpersonal closeness: A procedure and some preliminary findings. *Personality and Social Psychology Bulletin*, 23(4), 363–377.
Arthur Aron and colleagues describe the original research that 20 years later led to the popularized social media list of 36 questions that may help people fall in love with their partners again.
- Asch, S. E. (1951). Effects of group pressure upon the modification and distortion of judgment. In H. Guetzkow (Ed.), *Groups, leadership and men*. Pittsburgh, PA: Carnegie Press.
In a class study published in 1951, social psychologist Solomon Asch, Ph.D. devised an experiment to examine the extent to which pressure from other people could affect one's

perceptions. In total, about one third (1/3) of the subjects who were placed in this situation went along with the clearly erroneous majority. There were various factors that were found to influence levels of conformity: (1) Three “stooges” produced maximum levels of conformity. With very large numbers, conformity levels drop dramatically (perhaps the game is then too obvious!). (2) Just one stooge not going along with the majority is enough to dramatically reduce conformity levels. (3) Difficult tasks tend to lead to more conformity. (4) Ambiguous tasks tend to lead to more conformity as people may feel less certain of their own ideas.

Ash, P. (Ed.) (2019). *From courtroom to clinic: Legal cases that changed mental health treatment*. New York, NY: Cambridge University Press.

Ashman, G. (2018). *The truth about teaching: An evidence-informed guide for new teachers*. Melbourne, Victoria, Australia: SAGE Publications.

Greg Ashman teaches physics and mathematics at an independent school in Ballarat, Australia and. Drawing on his years of experience teaching in a diverse range of schools and informed by his understanding of educational research, Ashman presents the most practical ideas that teachers need to know in order to succeed in teaching. Ashman describes how to avoid common mistakes and challenge some of the myths about what good teaching really is.

Ashman, G. (2018, September 15). *Concept creep*.

<https://gregashman.wordpress.com/2018/09/15/concept-creep/>

Greg Ashman discusses Haslam’s (2016) ideas about horizontal and vertical expansion as these dimensions relate to Haslam’s concept of “concept creep.” According to Ashman (2018, para. 3), “A horizontal expansion is when the term comes to apply to new, qualitatively different examples and a vertical expansion is when it comes to apply to milder, less severe examples than was originally the case. For instance, trauma initially involved physical injury before the term expanded to encompass a distressing event outside the range of usual human experience such as being tortured or participating in a war. This definition explicitly excluded events that are distressing but within normal human experience such as suffering bereavement. Later understandings of trauma have now come to encompass these events. So we see a horizontal shift from physical wounding to psychological wounding and then a vertical shift to encompass more classes of psychological distress.” See also Haslam’s (2016) article on “Concept Creep.”

Association of American Physicians and Surgeons (AAPS). (2018, October 1). *Opting out of Medicare: A guide for physicians*. Association of American Physicians and Surgeons.

<https://aapsonline.org/opting-out-of-medicare-a-guide-for-physicians/>

In the Medicare Access and CHIP Reauthorization Act of 2015, there is a provision that repeals the requirement of having to renew an opt-out status every two years. Physicians

opting out of Medicare after June 16, 2015 need to file an affidavit to opt out of Medicare only once, and it will have permanent effect. The physician will no longer need to renew his opt-out every two years thereafter. However patients will still need to sign a private contract every two-years.

A list of Medicare carriers by state is listed at this link:

https://www.cms.hhs.gov/MedicareProviderSupEnroll/downloads/contact_list.pdf

A sample contract recommended by a Medicare Administrative Contractor, Noridian, is available at this link: <https://med.noridianmedicare.com/documents/10525/2052366/Opt-Out+Private+Contract>

Association for Addiction Professionals. National Certified Addictions Counselor, Level I (NCAC I). (2018). <https://www.naadac.org/ncac-i>

Association for Addiction Professionals. National Certified Addictions Counselor, Level II (NCAC II). (2018). <https://www.naadac.org/ncac-ii>

Axelson, D., Findling, R. L., Fristad, M. A., Kowatch, R. A., Youngstrom, E. A., McCue Horwitz, S., Arnold, L. E., Frazier, T. W., Ryan, N., Demeter, C., Gill, M. K., Hauser-Harrington, J. C., Depew, J., Kennedy, S. M., Gron, B.A., Rowles, B. M., & Birmaher, B. (2012). Examining the proposed disruptive mood dysregulation disorder diagnosis in children in the Longitudinal Assessment of Manic Symptoms study. *Journal of Clinical Psychiatry*, 73, 1342–1350.

Axelson, D., Goldstein, B., Goldstein, T., Monk, K., Yu, H., Hickey, M. B., Sakolsky, D., Diler, R., Hafeman, D., Merranko, J., Iyengar, S., Brent, D., Kupfer, D., & Birmaher, B. (2015). Diagnostic precursors to bipolar disorder in offspring of parents with bipolar disorder: A longitudinal study. *American Journal of Psychiatry*, 172, 638–646.

Axelson et al. sought to identify diagnostic risk factors of manic, mixed, or hypomanic episodes in the offspring of parents with bipolar disorder (“high-risk offspring”). The authors concluded that subthreshold manic or hypomanic episodes were a diagnostic risk factor for the development of manic, mixed, or hypomanic episodes in the offspring of parents with bipolar disorder and should be a target for clinical assessment and treatment research. Major depressive episodes and disruptive behavior disorders are also indications for close clinical monitoring of emergent bipolarity in high-risk offspring.

Baker, D. B., & Benjamin, L. T., Jr. (2000). The affirmation of the scientist-practitioner: A look back at Boulder. *American Psychologist*, 55(2), 241–247. <https://doi.org/10.1037/0003-066X.55.2.241>

David Baker, Ph.D. and Ludy Benjamin, Ph.D. discuss the professionalization of psychology after World War II with the synthesis of the Boulder Conference on Graduate

Education in Clinical Psychology in 1949. The major outcome of the Boulder conference was the endorsement of the scientist-practitioner model of training in professional psychology. According to Baker and Benjamin's (2000) review, David Shakow, Ph.D. (1901–1981) was largely responsible for the ideas and developments of the Boulder Model. On May 3, 1941, while he was chief psychologist at Worcester State Hospital in Massachusetts, Shakow drafted his first training plan to educate clinical psychology graduate students during a Conference at The New York Psychiatric Institute, now referred to as Shakow's 1941 American Association for Applied Psychology Report. As an aside, it is interesting to note that Worcester State Hospital was originally known as the Worcester Lunatic Asylum, which dated back to the 1830s. Shakow's 1941 report outlined a 4-year education track that became the first model for training clinical psychologists: Year 1 (establish a strong foundation in psychology and other applied sciences), Year 2 (learn therapeutic principles and practices needed to treat patients), Year 3 (internship, gain supervised field experience), and Year 4 (complete research dissertation). For a review of the contemporary scientist-practitioner model (i.e., the current Boulder model), see Shapiro (2002).

Baglio, M. (2009). *The Rite: The making of a modern exorcist*. New York, NY: Doubleday.

Baily, K. (2018, September 26). *Understanding research for clinical simulation, Part 2: Validity and reliability*. Healthy Simulation.
<https://www.healthysimulation.com/16389/understanding-research-for-clinical-simulation-part-2-validity-and-reliability/>

Bain, J. A. (1928). *Thought control in everyday life*. New York, NY: Funk & Wagnalls.
Keywords: Automatic thoughts, Thought stopping, thought-stopping
According to Joseph Wolpe (1969), a South African psychiatrist who was one of the most influential figures in the development and clinical application of behavior therapy, thought stopping was introduced by Bain. Essentially the same procedure was later described by others (e.g., see Bakker, 2008, p. 373).

Bakker, G. (2008). *Practical CBT: Using functional analysis and standardized homework in every day therapy*. Brisbane, Queensland, AU: Australian Academic Press.
Keywords: Automatic thoughts, Thought stopping, thought-stopping
Bakker (2008, p. 373) describes an automatic thought stopping technique similar to the one described 80 years earlier by Bain (1928) and also by Wolpe (1969), who cites Bain. Reference entry note: There are two common abbreviations of Australia: Au. and AU. Because Australia is a singular, proper noun, it cannot be pluralized.

- Baldwin, D. S., Anderson, I. M., Nutt, D. J., Bandelow, B., Bond, A., Davidson, J. R., de Boer, J. A., Fineberg, N. A., Knapp, M., Scott, J., Wittchen, H. U., & British Association for Psychopharmacology. (2005, November). Evidence-based guidelines for the pharmacological treatment of anxiety disorders: recommendations from the British Association for Psychopharmacology. *Journal of Psychopharmacology*, *19*(6), 567–596.
- Balkin, R. S., Cavazos, J. J., Hernandez, A. E., Garcia, R., Dominguez, D. L., & Valarezo, A. (2013). Assessing at-risk youth using the Reynolds Adolescent Adjustment Screening Inventory with a Latino population. *Journal of Addictions and Offender Counseling*, *34*(1), 30-39.
- Bandler, R., & Grinder, J. (1975, January 1). *The structure of magic: A book about language and therapy* (Vol. 1). Palo Alto, CA: Science & Behavior Books.
- Bandler, R., & Grinder, J. (1982). *Reframing: Neuro-linguistic programmingTM and the transformation of meaning*. Moab, UT: Real People Press.
- Bandura, A. (1973). *Aggression: A social learning analysis*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1977). *Social learning theory*. New York, NY: General Learning Press.
- Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice Hall.
- Barlow, D. H., & Hersen, M. (1973). Single-case experimental designs: Uses in applied clinical research. *Archives of General Psychiatry*, *29*(3), 319–325.
[doi:10.1001/archpsyc.1973.04200030017003](https://doi.org/10.1001/archpsyc.1973.04200030017003)
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- Barlow, D. H. (2002). *Anxiety and its disorders: The nature and treatment of anxiety and panic*. New York, NY: Guilford Press.
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The reference entry above is written in APA (2010) 6th edition style, whereas the entry below is written in APA (2020) 7th edition style:

Barlow, D. H., Durand, V. M., & Hofmann, S. G. (2018). *Abnormal psychology: An integrative approach* (8th ed.). Cengage Learning.

Barlow, D. H., Farchione, T.J., Fairholme, C. P., Ellard, K. K., Boisseau, C. L., Allen, L. B., & Ehrenreich-May, J. (2011). *The unified protocol for transdiagnostic treatment of emotional disorders: Client workbook*. New York, NY: Oxford University Press.

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Marcella Biro Barton, Assistant Professor of History in Rio Grande College, Ohio, addresses the possibility that Saint Teresa of Ávila may have had a form of epilepsy known as temporal lobe seizures that were integrated by a holistic view of the world into a description of her understanding of mystical life.

Bateson, G. (1971). The cybernetics of “self”: A theory of alcoholism. *Psychiatry: Journal for the Study of Interpersonal Processes*, 34(1), 1–18.

Copyright 1971 by the William Alanson White Psychiatric Foundation.

Bateson, G. (1971). The cybernetics of “self”: A theory of alcoholism. In G. Bateson (1972), *Steps to an ecology of mind* (pp. 315–344). Northvale, NJ: Aronson.

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Bateson, G. (1972). *Steps to an ecology of mind*. New York, NY: Ballantine Books.

Bateson, G. (1972, 1987). Form, substance, and difference. In *Steps to an ecology of mind: A revolutionary approach to man's understanding of himself* (pp. 455–471). Northvale, NJ: Aronson. <https://ejc.orfaleacenter.ucsb.edu/wp-content/uploads/2017/06/1972.-Gregory-Bateson-Steps-to-an-Ecology-of-Mind.pdf>

Bateson, G. (2000) [First published 1972]. *Steps to an ecology of mind: Collected essays in anthropology, psychiatry, evolution, and epistemology*. Chicago, IL: University of Chicago Press.

Bean, A. M., Nielsen, R. K. L., van Rooij, A. J., & Ferguson, C. J. (2017, October). Video game addiction: The push to pathologize video games. *Professional Psychology: Research and Practice*, 48(5), 378–389.

Keywords: Gaming disorder

Beauchaine, T. P. (2013). Taxometrics. In T. D. Little (Ed.), *Oxford handbook of quantitative methods* (pp. 612–634). New York, NY: Oxford University Press.

Beauchaine, T. P., & McNulty, T. (2013). Comorbidities and continuities as ontogenic processes: Toward developmental spectrum model of externalizing behavior. *Development and Psychopathology*, 25, 1505–1528.

Beauchaine, T. P., Klein, D. N., Crowell, S. E., Derbidge, C., & Gatzke-Kopp, L. M. (2009). Multifinality in the development of personality disorders: A biology x sex x environment interaction model of antisocial and borderline traits. *Development and Psychopathology*, 21, 735–770. <https://pubmed.ncbi.nlm.nih.gov/19583882/>

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- Beck, A. T., & Steer, R. A. (1988). *Manual for the Beck Hopelessness Scale*. San Antonio, TX: Psychological Corporation.
- Beck, J. (2019, January 8). The personality trait that makes people feel comfortable around you: People with positive “affective presence” are easy to be around and oil the gears of social interactions. <https://www.theatlantic.com/family/archive/2019/01/affective-presence-how-you-make-other-people-feel/579643/>
Keywords: Affective presence
Although it is not a scholarly article, Julie Beck provides a basic summary of the importance of positive affective presence, based on research by Noah Eisenkraft and Hillary Anger Elfenbein (2010).
- Becker, J. T., Mestre, L. T., Ziolkowski, S., & Lopez, O. L. (2007). Gene–environment interactions with cognition in late life and compression of morbidity. *American Journal of Psychiatry, 164*, 849–852.
- Begley, S. (2020, March 16). *The new coronavirus can likely remain airborne for some time. That doesn't mean we're doomed.* Stat. <https://www.statnews.com/2020/03/16/coronavirus-can-become-aerosol-doesnt-mean-doomed/>

Keywords: COVID-19, Coronavirus

Sharon Begley discusses *aerosolization*, which is the process in which some physical substance can be converted into the form of particles small and light enough to be carried on the air (i.e., into an aerosol) in the absence of an air filtration system.

Beins, B. C. (1987). Psychological testing and interpretation. In V. P. Makosky, L. G. Whittemore, & A. M. Rogers (Eds.), *Activities handbook for the teaching of psychology* (Vol. 2.), pp. 266–274). Washington, DC: American Psychological Association.

Beins, B. C. (1991). Using the Barnum effect to teach ethics in research [Unpublished manuscript]. Ithaca, NY: Ithaca College.

The Barnum Effect was generated to teach students about the ethics of deception in research and the feelings of subjects who are deceived. The Barnum Effect occurs when individuals are duped into believing invalid results of psychological tests. People are most accepting when given favorable feedback about themselves. They interpret evaluations as being uniquely descriptive even when the feedback is so general that it applies to virtually everybody. Twenty-eight female and 11 male students in research methods classes received feedback based on a bogus personality inventory. Subjects then rated the perceived validity of the interpretations. Students accepted the feedback, although seniors were more skeptical than were juniors or sophomores. A discussion was conducted of the ethics of deception based on students, own reactions to the knowledge that they were deceived. Students agreed that the approach was effective in helping them learn firsthand about the costs and benefits of deception in research. Men and women reacted in the same ways. The demonstration seems useful for a wide range of students. Appendices contain the test items from the inventory and the evaluation questions. A seven-item list of references is included.

Beins, B. C. (1993, February 1). Using the Barnum effect to teach ethics and deception in research. *Teaching of Psychology*, 20(1), 33–35.

https://doi.org/10.1207%2Fs15328023top2001_6

The Barnum effect was generated to teach students about the ethics of deception in research and the feelings of subjects who are lied to. Students in research methods classes received feedback based on a bogus personality inventory and rated the perceived validity of the interpretations. Students accepted the feedback, although seniors were more skeptical than juniors or sophomores. The class discussed the ethics of deception based on their own reactions to the knowledge that they were deceived. Students agreed that the approach was effective in helping them learn firsthand about the costs and benefits of deception in research.

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Fabrizio Benedetti, Helen S. Mayberg, Tor D. Wager, Christian S. Stohler, and Jon-Kar Zubieta provide a detailed analysis of the placebo effect, including behavioral and pharmacological considerations such as the presence of endogenous opioids in placebo analgesia and neuroimaging studies.
- Ben-Porath, Y. (2020, June 10). *MMPI-3 administration, scoring, and reporting options* [Video]. YouTube. <https://www.youtube.com/watch?v=7aZTtlANkrg>
MMPI-3 co-author Yossef Ben-Porath, PhD, outlines a variety of features for the upcoming release.
- Ben-Porath, Y. S., & Tellegan, A. (2020). *Minnesota Multiphasic Personality Inventory-3*. San Antonio, TX: Pearson Assessment.
The MMPI®-3 builds on the history and strengths of the MMPI instruments to provide an empirically validated, psychometrically up-to-date standard for psychological assessment.
- Benton, S. A., Robertson, J. M., Tseng, W. C., Newton, F. B., & Benton, S. L. (2003). Changes in counseling center client problems across 13 years. *Professional Psychology: Research and Practice*, 34(1), 66–72.
- Berg, K. C., Peterson, C. B., & Frazier, P. (2012). Assessment and diagnosis of eating disorders: A guide for professional counselors. *Journal of Counseling and Development*, 90(3), 262–269.
- Berkowitz, L. (1968, September). Impulse, aggression, and the gun. *Psychology Today*, 2, 19–22.
Keywords: Trigger effect, Weapons effect
Leonard Berkowitz, Ph.D. is often attributed to have coined the term “weapons effect” to refer to the phenomena, observed in several experimental studies conducted in the laboratory and in the field, in which the presence of a weapon may instigate the expression of aggression even if the weapon is not actually used to express aggression. In the words of Professor Berkowitz, “Guns not only permit violence, they can stimulate it as well. The finger pulls the trigger, but the trigger may also be pulling the finger” (p. 22).
- Berkowitz, L. (1974). Some determinants of impulsive aggression: Role of mediated associations with reinforcements for aggression. *Psychological Review*, 81, 165–176.

Berkowitz, L., & LePage, A. (1967). Weapons as aggression-eliciting stimuli. *Journal of Personality and Social Psychology*, 7, 202–207.

Keywords: Trigger effect, Weapons effect

Leonard Berkowitz and Anthony Page conducted an experiment designed to investigate whether external stimuli could affect aggression. The study consisted of 100 Midwestern male undergraduates who participated in a task in which they were given the opportunity to aggress against a confederate by administering an electric shock. Half of the participants were angered beforehand (shocked repeatedly by the confederate) and half were not. In the experimental group, angry participants were seated at a table that had a shotgun and a revolver on it. In the control group, participants were seated at a table that had badminton racquets and shuttlecocks. In both conditions, the items able were described as part of another experiment that the researchers had supposedly forgotten to put away. The research participants were to decide what level of electric shock to deliver to a confederate, and the electric shocks were used to measure aggression. The participants were told to ignore the items on the table, but the results suggested that did not. Instead, the participants who saw the guns were more aggressive than were the participants who saw the sports items. Berkowitz and LePage concluded that “many hostile acts which supposedly stem from unconscious motivation really arise because of the operation of aggressive cues” (p. 206).

Bernstein, D. (2020, April 7). *Grocery store workers and Covid-19*. Reason.

<https://reason.com/volokh/2020/04/07/grocery-store-workers-and-covid-19/>

Keywords: COVID-19, Coronavirus

David Bernstein’s article explains how an understanding of basic statistics eludes mainstream journalism.

Benjamin, A. J., Jr., & Bushman, B. J. (2016). The weapons priming effect. *Current Opinion in Psychology*, 12, 45–48.

The authors describe how the primary theoretical explanation for the weapons is that weapons activate or “prime” aggressive thoughts in memory.

Benjamin, A. J., Jr., Kepes, S., & Bushman, B. J. (2018). Effects of weapons on aggressive thoughts, angry feelings, hostile appraisals, and aggressive behavior: A meta-analytic review of the weapons effect literature. *Personality and Social Psychology Review*, 22(4), 347–377. 0.1177/1088868317725419. Epub 2017 Sep 17

Keywords: Weapons effect

Associate Professor of Psychology (University of Arkansas—Fort Smith) Arlin James Benjamin, Jr., Ph.D. and colleagues performed a meta-analysis that integrates the findings of weapons effect studies conducted from 1967 to 2017 and uses the General Aggression Model (GAM) to explain the weapons effect. The study includes 151 effect-size estimates from 78 independent studies involving 7,668 participants. As predicted by

the GAM, our naïve meta-analytic results indicate that the mere presence of weapons increased aggressive thoughts, hostile appraisals, and aggression, suggesting a cognitive route from weapons to aggression. Weapons did not significantly increase angry feelings. Nevertheless, a comprehensive sensitivity analysis indicated that not all naïve mean estimates were robust to the presence of publication bias. In general, these results suggest that the published literature tends to overestimate the weapons effect for some outcomes and moderators.

Berghuis, D. J., Jongsman A. E., Jr. (2008). *The severe and persistent mental illness progress notes planner* (2nd ed.). Hoboken, NJ: John Wiley & Sons.

Bernardy, N., & Montañó, M. (2019). Opioid use among individuals with posttraumatic stress disorder. *PTSD Research Quarterly*, 30(1), 1–2. <https://links.govdelivery.com/>

Bertolote, J. M., & Fleischmann, A. (2002, October). Suicide and psychiatric diagnosis: A worldwide perspective. *World Psychiatry*, 1(3), 181–185.

Bibring, G. L., Dwyer, T. F., Huntington, D. S., & Valenstein, A. F. (1961). A study of the psychological process in pregnancy and of the earliest mother-child relationship: Methodological considerations. *The Psychoanalytic Study of the Child*, 16(25), 25–44. DOI: 10.1080/00797308.1961.11823198
Keywords: Defensive Functioning Scale (DFS)

Biel, J., & Harper, F. G. (2020, May 12). *The autism partner handbook: How to love someone on the spectrum*. Portland, OR: Microcosm Publishing.
Joel Biel and Faith G. Harper, Ph.D. provide some tips for managing a “neuro-mixed relationship.” The authors argue that autistic-allistic relationships, as well as relationships between two neurodiverse people, can work out with success. At the same time, there are some consistent and predictable areas where they can go wrong.

Bilder, R. M., Postal, K. S., Barisa, M., Aase, D. M., Cullum, C. M., Gillaspay, S. R., Harder, L., Kanter, G., Lanca, M., Lechuga, D. M., Morgan, J. M., Most, R., Puente, A. E., Salinas, C. M., & Woodhouse, J. (2020). Inter Organizational Practice Committee recommendations/guidance for teleneuropsychology in response to the COVID-19 pandemic. *Archives of Clinical Neuropsychology*, 35(6), 647–659. <https://doi.org/10.1093/arclin/aaa046>

Bisaga, A., & Chernyaev, K. (2019). *Overcoming opioid addiction: The authoritative medical guide for patients, families, doctors, and therapists*. New York, NY: Experiment Publishing.

Bjornsson, A. S., Sibrava, N. J., Beard, C., Moitra, E., Weisberg, R. B., Perez- Benitez, C. I., & Keller, M. B. (2014). Two-year course of generalized anxiety disorder, social anxiety disorder, and panic disorder with agoraphobia in a sample of Latino adults. *Journal of Consulting and Clinical Psychology, 82*(6), 1186–1192.

Blackless, M. et al. (2000). How sexually dimorphic are we? Review and synthesis. *American Journal of Human Biology, 12*, 151–166.

Blanchard, M., & Farber, B. A. (2016) Lying in psychotherapy: Why and what clients don't tell their therapist about therapy and their relationship. *Counselling Psychology Quarterly, 29*(1), 90–112.

Using the results of a study involving 547 psychotherapy clients, Matt Blanchard, Ph.D. and Barry A. Farber, Ph.D. found that 93% of clients said they had consciously lied at least once to their therapist. In a second survey, 84% of clients said this dishonesty continued on a regular basis. In addition, 73% of clients reported that “the truth about their lies had never been acknowledged in therapy. Only 3.5% of clients owned up to the lies voluntarily. In only 9%” of cases had therapists uncovered the truth, which seems to suggest that therapists aren't particularly good at detecting lies.

Blom, J. D. (2013). Klinische zoantropie [Clinical zoanthropy]. *Tijdschr Psychiatr, 55*(5), 359–368. [Article in Dutch]

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

Jan Dirk Blom, M.D., Ph.D. is Clinical Professor of Psychopathology, Leiden University, Parnassia Psychiatric Hospital, University of Groningen, Netherlands. The focus of his research is on hallucinations and other perceptual disorders. According to Blom's review, only 56 cases of clinical zoanthropy could be found in the international scientific literature. Since specific studies have yielded a relatively large numbers of cases in the past, it can be concluded that the disorder is probably more prevalent than is suggested in the literature. These cases may well be not only primary types, based on mental or unclear causes, but also secondary types, mediated by aberrant somatosensory sensations. Treatment of the underlying condition (in most cases a psychotic or mood disorder) has proved to be increasingly successful over time.

Blom, J. D. (2014, March 4). When doctors cry wolf: A systematic review of the literature on clinical lycanthropy. *History of Psychiatry, 25*(1), 87–102. <https://doi.org/10.1177/0957154X13512192>

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

According to Blom, his interest in these disorders stems from his dissatisfaction with the term schizophrenia, which in his opinion is little more than an umbrella term for numerous neurobiological and neuropsychological conditions that are currently hardly on the radar of healthcare professionals, but which, when diagnosed correctly, allow for

more specific treatments than does a diagnosis of “schizophrenia.” An example of such disorders is Alice in Wonderland syndrome, which may be mistaken for schizophrenia, but warrants a proper psychiatric as well as neurological work-up in search of underlying causes and treatment possibilities. Examples of other unusual conditions are catatonia, musical hallucinosis, sexual hallucinations, and—in this article—clinical lycanthropy.

In his 2014 article, Blom provides an overview and critical reassessment of the cases of clinical *lycanthropy* reported in the medical literature from 1850 onwards. Lycanthropy is the delusion of being an animal, usually a wolf, with correspondingly altered behavior. According to Blom, out of 56 original case descriptions of metamorphosis into an animal, only 13 fulfilled the criteria of clinical lycanthropy proper. Of the 56 cases of delusional metamorphosis into animal, Blom found that 25% of the patients were diagnosed with schizophrenia, 23% with psychotic depression, and about 20% with bipolar disorder. The remaining cases constituted variants of the overarching class of clinical *zoanthropy* (a monomania in which a person believes himself changed into an animal and acts like one), including cases of patients having delusional convictions about being a dog, a boa snake, a bee, or a frog. Among the patients, 34 were men and 22 were women, and their symptoms lasted anywhere from a single hour to decades. Forty-seven cases involved primary delusions, and nine secondary delusions on the basis of somatic and/or visual hallucinations which may well have affected the patients’ sense of physical existence, also known as *coenaesthesia*. Coenaesthesia (aka, coenesthesia, cenesthesia, or cenesthesia) is the body awareness of one’s own body as a sum of all sensations, as opposed to individual sensations. It is the feeling or sense of being alive and feeling vital. In contrast, cases of clinical lycanthropy involve secondary delusions in particular warrant proper somatic and auxiliary investigations to rule out any underlying organic pathology, notably in somatosensory areas and those representing the body scheme. A similar condition is *boanthropy*, which is a psychological disorder in which a human believes himself or herself to be a bovine. The most famous sufferer of boanthropy may have been Nebuchadnezzar II, who in the Book of Daniel “was driven from men, and did eat grass as oxen.” An even more rare condition is *ophidianthropy*, which refers to the delusion that one has been transformed into a snake.

Bloom, J. D. (2010). The incarceration revolution: The abandonment of the seriously mentally ill to our jails and prisons. *The Journal of Law, Medicine, and Ethics*, 38(4), 727–734. <https://doi.org/10.1111/j.1748-720X.2010.00526.x>

Blum, D. (1986). *Bad Karma: A true story of obsession and murder*. New York, NY: Atheneum.

This book probably contains more details than any single source regarding the life and death of Tatiana “Tanya” Tarasoff. Deborah Blum, the author of *Bad Karma*, was a sophomore at the University of California at Berkeley in 1969 when 20 year old Tanya

Tarasoff was murdered that same year (October 27, 1969). After returning to Los Angeles to work as a documentary writer/director and producer of major Hollywood feature films, Blum became fascinated by the *Tarasoff* case and began an investigation that was to last seven years and take her twice to India. Seven years after the murder occurred, an article on the front page of the *Los Angeles Times* reported that the California Supreme Court had made a landmark ruling that doctors or psychotherapists have a legal duty to warn intended victims of patients believed to be dangerous to them. This legal precedent had its origins from the death of Tanya Tarasoff, who died on the front lawn of her parents' home. She had eight brutal stab wounds in her chest, abdomen, and back. Tanya had met her killer, Prosenjit Poddar, a 24-year-old graduate student from Bengal (India), a year earlier at a folk dancing class. Blum's account of the story provides a fascinating history of culture clashes with a tragic ending that was followed by a California Supreme Court decision in 1976 that forever changed nature of the psychotherapist-patient relationship.

Bogenschutz, M. P. (2018, December 13). 5 classic hallucinogens studied in the treatment of addictions. *Psychiatric Times*. http://www.psychiatrictimes.com/addiction/5-classic-hallucinogens-studied-treatment-addictions?rememberme=1&elq_mid=4735&elq_cid=860775

Bonasio, A. (2019, May 21). Immersive training for retention. *Medium*. <https://medium.com/edtech-trends/immersive-training-for-retention-78955dbac0c1>
Technical writer Alice Bonasio provides a brief discussion of how virtual reality training can help healthcare professionals retain crucial information. She not only cites the well-known “forgetting curve” that originated with the German psychologist Hermann Ebbinghaus in 1885, but she also explains some of the neuroscience behind Albert Einstein’s famous quote: “Learning is an experience. Everything else is just information.” Bonasio provides an insightful answer to her own question: “What is it about *experience* that is so rich that it is fundamental to learning, and why is *information* so much less effective?”

Bottema-Beutel, K., Kapp, S. K., Lester, J. N., Sasson, N. J., & Hand, B. N. (2021). Avoiding ableist language: Suggestions for autism researchers. *Autism in Adulthood*, 3(1), 18–29. <https://doi.org/10.1089/aut.2020.0014>

Keywords: Ableism, autism, neurodiversity

Kristen Bottema-Beutel, Steven K. Kapp, Jessica Nina Lester, Noah J. Sasson, and Brittany N. Hand describe how language used to communicate about autism within much of autism research can reflect and perpetuate ableist ideologies (i.e., beliefs and practices that discriminate against people with disabilities). The authors provide a historical overview of ableist language used to describe autism and define ableism in linguistic practices.

Bouman, W. P., Schwend, A. S., Motmans, J., Smiley, A., Safer, J. D., Deutsch, M. B., Adams, N. J., & Winter, S. (2017). Language and trans health. *International Journal of Transgenderism*, 18(1), 1–6. <https://doi.org/10.1080/15532739.2016.1262127>

Bourbon, M. (2011, July 26). *High expressed emotion and psychosis*. [Rev. 07-27-2014]. Oxford Health. www.oxfordhealth.nhs.uk

Keywords: Expressed emotion (EE), schizophrenia, relapse, risk factor

According to Maria Bourbon (2011, p. 1), “‘Expressed emotion’ is a term used in mental health to denote the intensity of expression of a range of emotions within the family context. Levels of expressed emotion may be high or low. This emotion may be considered ‘negative’ (for example hostility, anger) or ‘positive’ (for example caring concern).”

Bourouiba, L. (2020, March 26). Turbulent gas clouds and respiratory pathogen emissions: Potential implications for reducing transmission of COVID-19. *JAMA*. [doi:10.1001/jama.2020.4756](https://doi.org/10.1001/jama.2020.4756)

Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care

Lydia Bourouiba, PhD is a researcher at the Institute for Medical Engineering and Science at the Massachusetts Institute of Technology. She is a physical applied mathematician concentrating on geophysical problems of hydrodynamic turbulence and on the mathematical modeling of population dynamics and disease transmission. She explains her research that demonstrates how peak exhalation speeds can reach up to 33 to 100 feet per second can create a cloud that can span approximately 23 to 27 feet. Protective and source control masks, as well as other protective equipment, should have the ability to repeatedly withstand the kind of high-momentum multiphase turbulent gas cloud that may be ejected during a sneeze or a cough and the exposure from them. Dr. Bourouiba points out that currently used surgical and N95 masks are not tested for these potential characteristics of respiratory emissions.

Bradberry, T. (2018, April 7). *10 habits of mentally strong people*. The Ladders. <https://www.theladders.com/career-advice/10-habits-of-mentally-strong-people>

Bradberry, T., & Greaves, J. (2009). *Emotional Intelligence 2.0*. San Diego, CA: TalentSmart.

Brady, J. V. (1958). Ulcers in executive monkeys. *Scientific American*, 199(4), 95–100.

Brand, M., & Blycker, G. R., Potenza, M. N. (2019, December 13). When pornography becomes a problem: Clinical insights. *Psychiatric Times*, 36(12), n.p. <https://www.psychiatristimes.com/view/when-pornography-becomes-problem-clinical-insights>

Matthias Brand, Ph.D., Gretchen R. Blycker, LMHC, & Marc N. Potenza, M.D., discuss problematic pornography use and how it relates to Compulsive Sexual Behavior Disorder (CSBD). The article includes three useful tables, including Table 1 (Comparison of ICD-11 criteria for CSBD, gaming disorder, and the criteria for gaming disorder adopted to pornography-use disorder), Table 2 (Potential risk factors for developing problematic pornography use), and Table 3 (Links between ICD-11 criteria for CSBD and case vignette).

Braun, S. A., & Cox, J. A. (2005, Fall). Managed mental health care: Intentional misdiagnosis of mental disorders. *Journal of Counseling and Development*, 83(4), 425–433.

<https://doi.org/10.1002/j.1556-6678.2005.tb00364.x>

Sharon Braun and Jane Cox examine violations of codes of ethics and legal statutes and the consequences related to intentional misdiagnosis of mental disorders for reimbursement. Intentional misdiagnosis, otherwise known as a form of insurance fraud, can occur in two types: *Upcoding* (overpathologizing) a diagnosis ensures that the services will be covered by insurance. *Downcoding* (normalizing or minimizing) a diagnosis keeps a pejorative diagnosis out of client's record.

Bray, B. (2021, November). Women and alcohol: Drinking to cope. *Counseling Today*, 64(5), 34–39.

Bethany Bray, a senior writer and social media coordinator for *Counseling Today* magazine, provides a summary of an interview with Holly Wilson, LPC, who founded a program that she named Women's Recovery.

Bremner, J. D. (2002, February). Structural changes in the brain in depression and relationship to symptom recurrence. *CNS Spectrums*, 7(2), 129–130, 135–139.

Brennan, J., & Nguyen, V. (2014). Service animals and emotional support animals: Where are they allowed and under what conditions? *ADA National Network*.

<https://adata.org/publication/service-animals-booklet>

The ADA National Network consists of 10 regional ADA Centers and an ADA Knowledge Translation Center. The regional ADA Centers are distributed throughout the United States to provide local assistance and foster implementation of the ADA (<https://adata.org/find-your-region>). Region 4 includes Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee.

Breuer, J., & Freud, S. (1895). *Studien über Hysterie (Studies on Hysteria)*.

This original book contains Joseph Breuer's treatment of Anna O., who was later posthumously identified as Bertha Pappenheim (1859–1936), who was the founder of many institutions, including kindergartens, community homes, educational institutions, and the Jewish Women's Association.

- Bribiescas, R. G. (2017, March). *Why men don't live as long as women*. Nautilus.
<http://aging.nautil.us/feature/189/why-men-dont-live-as-long-as-women>
Richard Bribiescas, Ph.D., Yale University Professor of Anthropology, Ecology & Evolutionary Biology, discusses the double-edged sword of testosterone. Although conferring many positive effects (e.g., increased metabolism, increased muscle-building, increased libido, improved mood), the anabolic hormone testosterone is also associated with higher risk of mortality.
- Briere, J. N. (1992). *Child abuse: Trauma theory and treatment of the lasting effects*. Thousand Oaks, CA: Sage Publications.
- Briere, J. (2002). Treating adult survivors of severe childhood abuse and neglect: Further development of an integrative model. In J. E. B. Myers, L. Berliner, J. Briere, C. T. Hendrix, T. Reid, & C. Jenny (Eds.). *The APSAC handbook on child maltreatment, 2nd Edition*. (pp. 175–202). Newbury Park, CA: Sage Publications.
- Briere, J. (2003, January 22). *Assessment and treatment of psychological trauma in adults* (Part 1). Continuing education workshop Midwinter Conference of the Georgia Psychological Association, Brasstown Valley Resort, Georgia.
- Briere, John (2005, January 22). *Treating complex psychological trauma*. Continuing education workshop at the GPA Midwinter Conference, Asheville Renaissance, Asheville, NC.
- Briere, J., Hodges, M., & Godbout, N. (2010). Traumatic stress, affect dysregulation, and dysfunctional avoidance: A structural equation model. *Journal of Traumatic Stress, 23*, 767–774.
- Briere, J. N., & Scott, C. (2006, May). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment*. Thousand Oaks, CA: Sage Publications.
- Bright, M. (2006). *Beasts of the field: The revealing natural history of animals in the Bible*. London, UK: Robson Books.
Keywords: Boanthropy, cow, lycanthropy, wolf, zoanthropy
Michael Bright points out that the Bible contains 13 references to wolves, usually as metaphors for greed and destructiveness. The wolf is seen as an enemy of flocks and a metaphor for evil men with a lust for power and dishonest gain. In the New Testament, Jesus is quoted to have used wolves as illustrations to the dangers His followers would have faced should they follow him (Matthew 10:16; Acts 20:29; Matthew 7:15).
- Brill, S., & Kenney, L. (2016). *The transgender teen*. CleisPress.

Brin, D. (1996, January). Neotony and the two-way sexual selection in human evolution. *Journal of Social and Evolutionary Systems*, 18(3), 257–276. Article available at this site:

<https://www.davidbrin.com/nonfiction/neoteny1.html>

David Brin, Ph.D. provides a paleo-anthropological speculation on the origins of secondary sexual traits, male nurturing, and the child as a sexual image. Brin's Ph.D in Physics from the University of California at San Diego (the lab of nobelist Hannes Alfvén) followed a masters in optics and an undergraduate degree in astrophysics from Caltech. Every science show that depicts a comet now portrays the model developed in Brin's Ph.D. research.

Broderick, R. C. (Editor). (1986). *The Catholic encyclopedia: Revised and updated edition*. New York, NY: Thomas Nelson Publishers.

Broadway, J. M., & Sandoval, B. (2016, July 1). Why does time seem to speed up with age? *Scientific American Mind*, 27(4), 73. doi:10.1038/scientificamericanmind0716-73

An answer to this question is provided by James M. Broadway, a postdoctoral researcher in the Department of Psychological and Brain Sciences at the University of California, Santa Barbara, and Brittainy Sandoval, a graduate of the same institution.

Brooks, J. T., Beezhold, D. H., Noti, J. D., Coyle, J. P., Derk, R. C., Blachere, F. M., Lindsley, W. G. (2021, February 19). Maximizing fit for cloth and medical procedure masks to improve performance and reduce SARS-CoV-2 transmission and exposure, 2021. *Morbidity and Mortality Weekly Report*, 70(7), 254–257. ePub: 10 February 2021. DOI: [http://dx.doi.org/10.15585/mmwr.mm7007e1external icon](http://dx.doi.org/10.15585/mmwr.mm7007e1external%20icon)

Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care

Summary was obtained from website (<https://www.cdc.gov/>): What is already known about this topic? Universal masking is recommended to slow the spread of COVID-19. Cloth masks and medical procedure masks substantially reduce exposure from infected wearers (source control) and reduce exposure of uninfected wearers (wearer exposure). What is added by this report? CDC conducted experiments to assess two ways of improving the fit of medical procedure masks: fitting a cloth mask over a medical procedure mask, and knotting the ear loops of a medical procedure mask and then tucking in and flattening the extra material close to the face. Each modification substantially improved source control and reduced wearer exposure. What are the implications for public health? These experiments highlight the importance of good fit to maximize mask performance. There are multiple simple ways to achieve better fit of masks to more effectively slow the spread of COVID-19.

Results from the first Brooks et al. (2021) experiment demonstrated that the unknotted medical procedure mask alone blocked 56.1% of the particles from a simulated cough ([SD] = 5.8), and the cloth mask alone blocked 51.4% (SD = 7.1). The combination of the

cloth mask covering the medical procedure mask (double mask) blocked 85.4% of the cough particles ($SD = 2.4$), and the knotted and tucked medical procedure mask blocked 77.0% ($SD = 3.1$). In the second experiment by Brooks et al. (2021), adding a cloth mask over the source headform's medical procedure mask or knotting and tucking the medical procedure mask reduced the cumulative exposure of the unmasked receiver by 82.2% ($SD = 0.16$) and 62.9% ($SD = 0.08$), respectively. When the source was unmasked and the receiver was fitted with the double mask or the knotted and tucked medical procedure mask, the receiver's cumulative exposure was reduced by 83.0% ($SD = 0.15$) and 64.5% ($SD = 0.03$), respectively. When the source and receiver were both fitted with double masks or knotted and tucked masks, the cumulative exposure of the receiver was reduced 96.4% ($SD = 0.02$) and 95.9% ($SD = 0.02$), respectively. Whereas the authors point out that the findings in their report are subject to at least four limitations, they also conclude that these laboratory-based experiments highlight the importance of good fit to maximize overall mask performance. In addition, their laboratory-based experiments also demonstrate that there are multiple simple ways to improve fit of masks to increase their effectiveness.

The authors of these experiments include John T. Brooks, M.D., Donald H. Beezhold, Ph.D., John D. Noti, Ph.D., Jayme P. Coyle, Ph.D., Raymond C. Derk, M.S., Francoise M. Blachere, M.S., and William G. Lindsley, Ph.D.

Brotman, M. A., Kassem, K., Reising, M. M., Guyer, A. E., Dickstein, D. P., Rich, B. A., Towbin, K. E., Pine, D. S., McMahon, F. J., & Leibenluft, E. (2007). Parental diagnoses in youth with narrow phenotype bipolar disorder or severe mood dysregulation. *American Journal of Psychiatry*, *164*, 1238–1241.

Brotman, M. A., Rich, B. A., Guyer, A. E., Lunsford, J. R., Horsey, S. E., Reising, M. M., Thomas, L. A., Fromm, S. J., Towbin, K., Pine, D. S., & Leibenluft, E. (2010). Amygdala activation during emotion processing of neutral faces in children with severe mood dysregulation versus ADHD or bipolar disorder. *American Journal of Psychiatry*, *167*, 61–69.

Brown, B. (2007). *Thought it was just me (but it isn't): Making the journey from "What will people think?" to "I am enough."* New York, NY: Gotham.

Brown, B. (2012, September 11). *Daring greatly: How the courage to be vulnerable transforms the way we live, love, parent, and lead.* New York, NY: Gotham.

- Brown, L. (n.d.). *Identity-first language*. Autistic Self Advocacy Network.
<https://autisticadvocacy.org/home/about-asan/identity-first-language> (Original work published 2011).
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- Brown, A. S., & Derkits, E. J. (2010). Prenatal infection and schizophrenia: A review of epidemiologic and translational studies. *American Journal of Psychiatry*, 167, 261–280. The authors review evidence that maternal viral infection during pregnancy is a risk factor for schizophrenia.
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Brené Brown, Ph.D., LCSW is a research professor at the University of Houston where she holds the Huffington Foundation – Brené Brown Endowed Chair at The Graduate College of Social Work.
- Brown, Brené. (2013, December 10). *Brené Brown on empathy* [Video]. YouTube.
<https://www.youtube.com/watch?v=1Evwgu369Jw>
Brené Brown, Ph.D., LCSW explains how we can only create a genuine empathic connection if we are aware of our own feelings. See also cross-reference to RSA Short (2013).
- Brown, B. (2012, September 11). *Daring greatly: How the courage to be vulnerable transforms the way we live, love, parent, and lead*. New York, NY: Gotham Books. [Hard cover]
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- Brown, G., Birley, J., & Wing, J. (1972). Influence of family life on the course of schizophrenic disorder: A replication. *British Journal of Psychiatry*, 121(562), 241–258.
doi:10.1192/bjp.121.3.241
Keywords: Expressed emotion (EE), schizophrenia, relapse, risk factor
The concept of EE seems to date back to a 1956 study of readmissions of schizophrenia patients in London by George Brown, who found that patients discharged to live with their parents or wives were more frequently readmitted than those discharged to live with siblings or non-family in lodging houses. Brown also found that those that lived with their mothers were more likely to be readmitted if the mothers did not work outside the

home, suggesting that the duration of exposure to certain family members was related to relapse (Amaresha & Venkatasubramanian, 2012).

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Brugha, T. S. (2018). *The psychiatry of adult autism and Asperger syndrome*. New York, NY: Oxford University Press; 2018.

Professor Traolach Brugha is Professor of Psychiatry, University of Leicester, and Consultant, Leicestershire Partnership NHS Trust, Leicester, UK.

Brugha, T. L. (2019, February 19). Autism in adulthood: Widespread, invisible, neglected, misunderstood—not our problem? *Psychiatric Times*, 36(2).

<https://www.psychiatristimes.com/cme/autism-adulthood-widespread-invisible-neglected-misunderstood-not-our-problem/page/0/1>

Brugha, T. S., Cooper, S. A., Gullon-Scott, F. et al. (2014). Autism spectrum disorder. In T. S. Brugha, F. Tyrer, F. M. Scott, J. Bankart, S. A. Cooper, & S. McManus. (2014). *Adult Psychiatric Morbidity Survey 2014*, Chapter 6. Health and Social Care Information Centre, Leeds. <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/adult-psychiatric-morbidity-survey-survey-of-mental-health-and-wellbeing-england-2014>

Brumback, K. (2022, September 07). Jury awards \$77M in suit against addiction treatment center. *The Washington Post*. <https://www.washingtonpost.com/national/jury-awards->

[77m-in-suit-against-addiction-treatment-center/2022/09/07/dc44e32c-2eca-11ed-bcc6-0874b26ae296_story.html](https://www.dekalbcountyga.gov/news/77m-in-suit-against-addiction-treatment-center/2022/09/07/dc44e32c-2eca-11ed-bcc6-0874b26ae296_story.html)

Kate Brumback is a reporter for the Associated Press. On September 07, 2022, DeKalb County State Court jury awarded a total of about \$77 million for the death of Nick Carusillo, including \$10 million for pain and suffering, \$55 million for the value of his life, \$1 million in punitive damages, and the remainder for attorneys' fees and expenses. See also *Carusillo v. Metro Atlanta Recovery Residences* (2022).

Buchanan, L. P. (2019, January 25). *A clinician's guide to pathological ambivalence: How to be on your client's side without taking a side*. Camp Hill, PA: The Practice Institute.

Psychologist Linda Paulk Buchanan, Ph.D. provides an alternative interpretation of clients' apparent resistance, termed pathological ambivalence, which is rooted in early experience, biological functioning, and psychological narrative. The concept of pathological ambivalence draws from several established theoretical perspectives in explaining why some people seem to sabotage their progress in psychotherapy and how some therapists become unintentional enablers.

Bugelski, B. R., & Alampay, D. A. (1961). The role of frequency in developing perceptual sets. *Canadian Journal of Psychology*, 15, 205–211.

Burchette, C. (2020, January 17). *Frontotemporal dementia...What is it?* NJ Memory Center. <https://www.njmemorycenter.com/post/frontotemporal-dementia-what-is-it>

Corey Burchette, Psy.D. (<https://www.njmemorycenter.com/>) provides a description of frontotemporal dementia (FTD), described as an umbrella term that includes a behavioral variant (bvFTD), a semantic variant (changes in the ability to speak and understand language (primary progressive aphasia), and a variant involving impairment in movement (corticobasal syndrome, progressive supranuclear palsy). Three variants can be identified according to the symptoms that appear first and most prominently: (1) Behavioral variant (bvFTD), and (2) Primary Progressive Aphasia (progressive disorder of language), which is which is subdivided into (a) Semantic dementia (SD), which involves impairment in object naming, word comprehension, and the ability to speak language (primary progressive aphasia) and (b) Progressive nonfluent aphasia (PNFA), which involves apraxia and effortful speech associated with nonfluent aphasia in which word comprehension is spared.

Bushman, B. J. (2013). The weapons effect. *JAMA Pediatrics*, 167(12), 1094–1095. *JAMA*. 10.1001/jamapediatrics.2013.3824

Keywords: Weapons effect

This article is briefly summarized in a popular form in Bushman, B. J. (2013, January 18). The “weapons effect.”

Bushman, B. J. (2013, January 18). The “weapons effect.” *Psychology Today*.

<https://www.psychologytoday.com/us/blog/get-psyched/201301/the-weapons-effect?amp>

Keywords: Weapons effect

Brad Bushman, Ph.D. is a Professor of Communication and Psychology at Ohio State University and a Professor of Communication Science at the VU University Amsterdam. This blog is based on the following article: Bushman, B. J. (2013). The weapons effect. *JAMA Pediatrics*, 167(12), 1094–1095.

Bushman, B. J., Jamieson, P. E., Weitz, I., & Romer, D. (2013, December). Gun violence trends in movies. *Pediatrics*, 132(6), 1014–1018. doi: 10.1542/peds.2013-1600. Epub 2013 Nov 11.

Keywords: Weapons effect

Brad Bushman, Ph.D. and colleagues used trained coders to identify the presence of violence in each 5-minute film segment for one-half of the top 30 films since 1950 and the presence of guns in violent segments since 1985, the first full year the PG-13 rating (age 13+) was used. The researchers found that violence in films has more than doubled since 1950, and gun violence in PG-13-rated films has more than tripled since 1985. When the PG-13 rating was introduced, these films contained about as much gun violence as G (general audiences) and PG (parental guidance suggested for young children) films. Since 2009, PG-13-rated films have contained as much or more violence as R-rated films (age 17+) films. The authors conclude that, even if youth do not use guns, they may be exposed to increasing gun violence in top-selling films. The authors speculate that, by including guns in violent scenes, film producers may be strengthening the weapons effect and providing youth with scripts for using guns. These findings are concerning because many scientific studies have shown that violent films can increase aggression. The authors point out that violent films are easily accessible to youth (e.g., on the Internet and cable).

Bushman, B. J., Kerwin, T., Whitlock, T., & Weisenberger, J. M. (2017). The weapons effect on wheels: Motorists drive more aggressively when there is a gun in the vehicle. *Journal of Experimental Social Psychology*, 73, 82–85. DOI: 10.1016/j.jesp.2017.06.007

Keywords: Weapons effect

Brad Bushman, Ph.D. and colleagues studied a nationally representative sample of over 2,000 U.S. drivers and found that those who had a gun in the car were significantly more likely to make obscene gestures at other motorists (23% vs. 16%), aggressively follow another vehicle too closely (14% vs. 8%), or both (6.3% vs. 2.8%), even after controlling for many other factors related to aggressive driving (e.g., age, gender, urbanization, census region, driving frequency).

Cabane, O. F. (2012). *The charisma myth: How anyone can master the art and science of personal magnetism*. New York, NY: Portfolio/Penguin.

Keywords: Charm, charisma, body language, affective presence

Olivia Fox Cabane defines charm as likability and “how delightful it is to interact with someone.” She argues against the charisma myth (i.e., the idea that charisma is a fundamental, inborn quality that a person either has or does not have). Cabane emphasizes that charismatic behaviors can be learned and perfected by anyone. Drawing on techniques she originally developed for Harvard and MIT, Cabane deconstructs charisma into its components. Becoming more charismatic doesn’t mean transforming one’s basic personality. Instead, it’s about adopting a series of specific practices that fit in with the personality one already has.

Cannon, T. D., Cadenhead, K., Cornblatt, B., Woods, S. W., Addington, J., Walker, E., Seidman, L. J., Seidman, L. J., Perkins, D., Tsuang, M., McGlashan, T., & Heinseen, R. (2008). Prediction of psychosis in youth at high clinical risk: A multisite longitudinal study in North America. *Archives of General Psychiatry*, 65(1), 28–37.

Caprara, G. V., & Cervone, D. (2000). *Personality: Determinants, dynamics, and potentials*. New York, NY: Cambridge University Press.

Carlozzi, A. (2017, August). Counseling transgender persons and their families. *Counseling Today*, 60(2), 44–49.

Carreon, D. & Gold, J. A. (2018, February 21). *The mind-gut connection: What is it and how did it evolve? Interview with David Carreon, M.D., and Jessica A. Gold, M.D., M.S., by Emeran Mayer, M.D.* [Audio Podcast]
<http://www.psychiatrytimes.com/neuropsychiatry/mind-gut-connection-what-it-and-how-did-it-evolve>

Carlson, M., Marcus-Newhall, A., & Miller, N. (1990). Effects of situational aggression cues: A quantitative review. *Journal of Personality and Social Psychology*, 58, 622–633.
A review of 56 published studies confirmed that the mere sight of weapons increases aggression in both angry and non-angry individuals.

Carnegie, D. (1936, 1981). *How to win friends and influence people* [Revised edition]. New York, NY: Pocket Books.

Carnegie, D. (1944, 1985, May). *How to stop worrying and start living: Time-tested methods for conquering worrying* [Revised edition]. New York, NY: Pocket Books.
Written by Dale Carnegie, the author of the famous *How to Win Friends and Influence People* (Carnegie, 1936), this book is also published by Pocket Books, which is a division of Simon and Schuster. Pocket Books first printing was May 1985. Copyright 1944,

1945, 1946, 1947, 1948 by Dale Carnegie. Copyright © 1984 by Donna Dale Carnegie and Dorothy Carnegie.

Carter, G. L., Clover, K., Whyte, I. M., Dawson, A. H., & D'Este, C. (2005). Postcards from the Edge project: Randomized controlled trial of an intervention using postcards to reduce repetition of hospital treated deliberate self-poisoning. *British Medical Journal*, *331*(7520), 805–809.

Carusillo v. Metro Atlanta Recovery Residences, No. 19A73528, 2022 (DeKalb County State Court).

DeKalb County State Court Case #19A73528 The Estate of Nicholas Carusillo, by and through Michael Carusillo, III vs. Metro Atlanta Recovery Residences, Inc., Et Al. Natalie S. Woodward, plff.; Heather Saum Ware, H. Durance Lowendick, John E. Hall, Jr., Thomas E. Lavender, III, dft.

This citation is a September 07, 2022 trial court verdict by a DeKalb County State Court jury, based on a civil suit filed in 2019. The citation is not a legal precedent because it is not an appellate decision. It is a trial court decision that is being appealed by the defendants.

Cashdan, S. (1973). *Interactional psychotherapy: Stages and strategies in behavioral change*. New York, NY: Grune and Stratton.

Cashin-Garbutt, A. (2017, May 17). *History of sleep: what was normal? Interview with Roger Ekirch, Ph.D. by April Cashin-Garbutt, M.A.* <https://www.news-medical.net/news/20170517/History-of-sleep-what-was-normal.aspx>

Caspi, A., Sugden, K., Moffitt, T. E., Taylor, A., Craig, I. W., Harrington, H., et al. (2003). Influence of life stress on depression: Moderation by a polymorphism in the 5-HTT gene. *Science*, *301*, 386–389.

Castelbaum, L., Sylvester, C. M., Zhang, Y., Yu, Q., & Constantino, J. N. (2019). On the nature of monozygotic twin concordance and discordance for autistic trait severity: A quantitative analysis. *Behavior Genetics*. <https://doi.org/10.1007/s10519-019-09987-2>
The authors conducted a quantitative analysis of twin–twin similarity for autistic trait severity in three existing data sets involving 366 pairs of uniformly-phenotyped monozygotic (MZ) twins with and without ASD. Probandwise concordance for ASD was 96%; however, MZ trait correlations differed markedly for pairs with ASD trait burden below versus above the threshold for clinical diagnosis. The authors provide new evidence that although ASD itself is highly heritable, variation-in-severity of symptomatology above the diagnostic threshold is substantially influenced, in contrast,

by non-shared environmental factors which may identify novel targets of early ASD amelioration.

Castonguay, L. G., & Hill, C. E. (2017). *How and why are some therapists better than others? Understanding therapist effects*. Washington, DC: American Psychological Association.

Cattell, R. B. (1943). The description of personality: Basic traits resolved into clusters. *Journal of Abnormal and Social Psychology*, 38, 476–506.

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Center on the Developing Child, Harvard University, National Scientific Council on the Development Child (2013, October 31). InBrief: The science of neglect. [Video]. YouTube. <https://developingchild.harvard.edu/resources/inbrief-the-science-of-neglect-video/>
This 6-minute video (05:58) provides an overview of The Science of Neglect: The Persistent Absence of Responsive Care Disrupts the Developing Brain, a Working Paper from the National Scientific Council on the Developing Child.

Centers for Disease Control. (2015). National Health and Nutrition Examination Survey (NHANES). <http://www.nimh.nih.gov/health/statistics/prevalence/any-disorder-among-children.shtml>

Centers for Disease Control and Prevention. National Center for Health Statistics. ICD-10 Coordination and Maintenance Committee (2018, September 12). *Update on ICD-11: The WHO launch and implications for U.S. implementation*. Atlanta, GA: Author. <https://www.cdc.gov/nchs/data/icd/ICD-11-WHOV-CM-2018-V3.pdf>

Centers for Disease Control and Prevention. (2020, October 31). Contact tracing for COVID-19. *Centers for Disease Control and Prevention*. <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>
Close contact is defined by the CDC as follows: “Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period* starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to

test specimen collection) until the time the patient is isolated.” Updated language for the close contact definition was revised by the CDC on October 21, 2020 as follows (italics are original): ** Individual exposures added together over a 24-hour period (e.g., three 5-minute exposures for a total of 15 minutes). Data are limited, making it difficult to precisely define “close contact;” however, 15 cumulative minutes of exposure at a distance of 6 feet or less can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity (closer distance likely increases exposure risk), the duration of exposure (longer exposure time likely increases exposure risk), whether the infected individual has symptoms (the period around onset of symptoms is associated with the highest levels of viral shedding), if the infected person was likely to generate respiratory aerosols (e.g., was coughing, singing, shouting), and other environmental factors (crowding, adequacy of ventilation, whether exposure was indoors or outdoors). Because the general public has not received training on proper selection and use of respiratory PPE, such as an N95, the determination of close contact should generally be made irrespective of whether the contact was wearing respiratory PPE. At this time, differential determination of close contact for those using fabric face coverings is not recommended.*”

Centers for Disease Control and Prevention. (2020, December 17). *Overdose deaths accelerating during COVID-10: Expanded prevention efforts needed* [Press Release].

<https://www.cdc.gov/media/releases/2020/p1218-overdose-deaths-covid-19.html>

Keywords: COVID-19, Coronavirus

Over 81,000 drug overdose deaths occurred in the United States in the 12 months ending in May 2020, the highest number of overdose deaths ever recorded in a 12-month period, according to recent provisional data from the Centers for Disease Control and Prevention (CDC). While overdose deaths were already increasing in the months preceding the 2019 novel coronavirus disease (COVID-19) pandemic, the latest numbers suggest an acceleration of overdose deaths during the pandemic.

Centers for Disease Control and Prevention. (2021, January 28). *Guidance for SARS-CoV-2 point-of-care testing*. <https://www.cdc.gov/coronavirus/2019-ncov/lab/point-of-care-testing.html>

Keywords: COVID-19, Coronavirus

Centers for Disease Control and Prevention. (2021). *International classification of diseases, tenth revision, clinical modification (ICD-10-CM)*.

<https://www.cdc.gov/nchs/icd/icd10cm.htm#icd2021>

Centers for Disease Control and Prevention (2021). *CDC Wonder*. <https://wonder.cdc.gov/>

Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). (2016). *ICD-10-CM Official Guidelines for Coding and Reporting FY 2017*. Pages 37–38. <https://www.cms.gov/Medicare/Coding/ICD10/Downloads/2017-ICD-10-CM-Guidelines.pdf>

Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). National Center for Health Statistics, Centers for Disease Control and Prevention. (2018). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>

Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics, Centers for Disease Control and Prevention. (2019). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <https://www.cdc.gov/nchs/icd/icd10cm.htm#icd2019>
Coding Note: The 2019 ICD-10-CM codes are to be used from October 1, 2018 through September 30, 2019.

Centers for Medicare and Medicaid Services. (2017). 2017 ICD-10-CM and GEMs: 2017 ICD-10-CM Conversion Table [Zip, 53 KB]. <https://www.cms.gov/Medicare/Coding/ICD10/2017-ICD-10-CM-and-GEMs.html>

Centers for Medicare & Medicaid Services. (2021). *Standard Notice and Consent Documents Under the No Surprises Act (For use by nonparticipating providers and nonparticipating emergency facilities beginning January 1, 2022)*. Centers for Medicare and Medicaid Services. <https://www.cms.gov/files/document/standard-notice-consent-forms-nonparticipating-providers-emergency-facilities-regarding-consumer.pdf>
Key words: No Surprise Act, No Surprises Act, Good Faith Estimate

Centers for Medicare & Medicaid Services. (2021). *Model disclosure notice regarding patient protections against surprise billing*. Centers for Medicare and Medicaid Services. <https://www.cms.gov/files/document/model-disclosure-notice-patient-protections-against-surprise-billing-providers-facilities-health.pdf>
Key words: No Surprise Act, No Surprises Act, Good Faith Estimate

Centers for Medicare and Medicaid Services. (2021, September 30). *What you need to know about eh Biden-Harris administration's actions to prevent surprise billing (Semteperber 2021)* [Fact sheet]. <https://www.cms.gov/newsroom/fact-sheets/what-you-need-know-about-biden-harris-administrations-actions-prevent-surprise-billing-september>

Centers for Medicare & Medicaid Services. (2022). *Providers opting out of Medicare: Private contracting*. Palmetto GBA.

<https://palmettogba.com/palmetto/jmb.nsf/DIDC/8EELWC0686~Provider%20Enrollment~Opting%20Out%20of%20Medicare>

Key words: Medicare, Private Patient Contract, Opt Out

Section 1802 of the Social Security Act (the Act), as amended by §4507 of the BBA of 1997, permits certain physicians and practitioners to opt out of Medicare if certain conditions were met, and to provide services through private contracts that would otherwise be covered by Medicare. Under these private contracts, the mandatory claims submission and limiting charge rules of Section 1848(g) of the Act would not apply. When a physician or practitioner opts out of Medicare, Medicare covers no services provided by that individual and no Medicare payment can be made to that physician or practitioner directly or on a capitated basis. Additionally, no Medicare payment may be made to a beneficiary for items or services provided directly by a physician or practitioner who has opted out of the program. There is an exception for an emergency or urgent care situation, in which case a physician or practitioner who opts out may treat a Medicare beneficiary with whom he or she does not have a private contract and bill for such treatment. In such a situation, the physician or practitioner may not charge the beneficiary more than what a nonparticipating physician or practitioner would be permitted to charge and must submit a claim to Medicare on the beneficiary's behalf.

Chang, E. C., Yu, E. A., & Lin, E. Y. (2014). An examination of ethnic variations in perfectionism and interpersonal influences as predictors of eating disturbances: A look at Asian and European American females. *Asian American Journal of Psychology, 5*(3), 243–251.

Chapman, A. L., & Gratz, K. L. (2013). *Borderline personality disorder: A guide for the newly diagnosed*. Oakland, CA: New Harbinger Publications.

Chartrand, T. L., & Bargh, J. A. (1999, June). The chameleon effect: the perception-behavior link and social interaction. *Journal of Personality and Social Psychology, 76*(6), 893–910.

Keywords: Charm, charisma, body language

The author's describe the *chameleon effect*, which refers to nonconscious mimicry of the postures, mannerisms, facial expressions, and other behaviors of one's interaction partners, such that one's behavior passively and unintentionally changes to match that of others in one's current social environment. In Experiment 1, the authors showed that the motor behavior of participants unintentionally matched that of strangers with whom they worked on a task. In Experiment 2, the authors had confederates mimic the posture and movements of participants and showed that mimicry facilitates the smoothness of

interactions and increases liking between interaction partners. Experiment 3 showed that dispositionally empathic individuals exhibit the chameleon effect to a greater extent than do other people.

Chiang, C.-C., Shivacharan, R.S., Wei, X., Gonzalez, R., & Durand, D. M. (2019, January 1). Slow periodic activity in the longitudinal hippocampal slice can self-propagate non-synaptically by a mechanism consistent with ephaptic coupling. *The Journal of Physiology*, 597(1), 249–269. First published online: October 2018.

Chiang et al. found that that slow periodic activity in the longitudinal hippocampal slice can propagate without chemical synaptic transmission or gap junctions, but can generate electric fields which in turn activate neighboring cells. These results support the hypothesis that endogenous electric fields, previously thought to be too small to trigger neural activity, play a significant role in the self-propagation of slow periodic activity in the hippocampus.

Chinese Center for Disease Control and Prevention. (2020, February 17). *The Epidemiological Characteristics of an Outbreak of 2019 Novel Coronavirus Diseases (COVID-19)*. Beijing, China: Author. <http://weekly.chinacdc.cn/en/article/id/e53946e2-c6c4-41e9-9a9b-fea8db1a8f51>

Keywords: COVID-19, Coronavirus

See also report of the World Health Organization (2020).

Cikara, M. (2016, January 2). Concept expansion as a source of empowerment. *Psychological Inquiry*, 27(1), 29–33. doi:10.1080/1047840x.2016.1111830

Published in the same issue as the article by Nick Haslam (2016), Mina Cikara challenges one of Haslam's suggestions: "A possible adverse looping effect of concept creep is therefore a tendency for more and more people to see themselves as victims who are defined by their suffering, vulnerability, and innocence, and who have diminished agency to overcome their plight. (Haslam, 2016, p. 14). According to Cikara there are three mechanisms by which conceptual expansion may actually serve to empower "victims," interaction partners, and third-party allies.

Clance, P. R. (1985). *The Impostor phenomenon: When success makes you feel like a fake*. Toronto: Bantam Books.

Clark, L. A., Cuthbert, B., Lewis-Fernández, R., Narrow, W. E., & Reed, G. M. (2017). Three approaches to understanding and classifying mental disorder: ICD-11, DSM-5, and the National Institute of Mental Health's Research Domain Criteria (RDoC). *Psychological Science in the Public Interest*, 18, 72–145. <https://doi.org/10.1177/1529100617727266>

- Clay, R. A. (2020, November/December). How to talk to your patients about firearm safety. *Monitor on Psychology, 51*(8), 82–83.
APA staff writer Rebecca A. Clay describes how making guns less accessible is a key step in suicide prevention. Citing a 2019 study reported in the *Annals of Internal Medicine*, Clay (2020, p. 82) states, “Less than 9% of suicidal acts result in death, but that percentage jumps to 90% when firearms are involved.” See also Conner, Azrael, and Miller (2019).
- Cleckley, H. M. (1941). *The mask of sanity: An attempt to reinterpret the so-called psychopathic personality*. St. Louis, MO: C.V. Mosby.
Augusta, Georgia Psychiatrist Hervey Cleckley, M.D. (1903–1984) published the landmark classic book, which was revised in new editions until the 1980s, provided the most influential clinical description of psychopathy in the twentieth century. Dr. Cleckley and his associate, psychiatrist Corbett H. Thigpen, M.D. (1919–1999), were co-authors of the classic *The Three Faces of Eve* (1975).
- Clements, S. E. (1966). *Minimal brain dysfunction in children*. Public Health Service Publication No. 1415 Washington, D.C.: U. S. Government Printing Office.
- Cleveland Clinic. (2021). Six pillars of brain health. *Healthy Brains*.
<https://healthybrains.org/pillars/>
The Cleveland Clinic Six Pillars of Brain Health include physical exercise, food and nutrition, medical health, sleep and relaxation, mental fitness, and social interaction.
- Climo, L. H. (2019, October). What do mass murderers have in common? It's not mental illness. *Psychiatric Times, 36*(10), 12. <https://www.psychiatrytimes.com/trauma-and-violence/what-do-mass-murderers-have-common>
Psychiatrist Lawrence H. Climo, M.D. describes pre-violence frustrations and credible tipping points for the perpetrators in five mass shootings including the 1995 Oklahoma City bomber, the 2012 Sandy Hook shooter, the 2016 Orlando shooter, the 2017 Las Vegas shooter, and the 2018 Marjory Stoneman Douglas shooter.
- Cloitre, M., Courtois, C. A., Ford, J. D., Green, B. L., Alexander, P., Briere, J., Herman, J. L., Lanius, R., Stolbach, B. C., Spinazzola, J., Van der Kolk, B. A., Van der Hart, O. (2012, November). *The ISTSS Expert Consensus Treatment Guidelines for Complex PTSD in Adults*. Deerfield, IL: International Society for Traumatic Stress Studies.
<http://www.istss.org/AM/>
The International Society for Traumatic Stress Studies (ITSTCC) guides are available from the organization's website: <http://www.istss.org/AM/>.

Cobb, K. F. (2014). *Understanding scrupulosity: Psychopathological and Catholic perspectives* [Master's thesis, University of Iowa]. <https://doi.org/10.17077/etd.8xo08099>

Cohen J. (1960). A coefficient of agreement for nominal scales. *Educational and Psychological Measurement, 20*, 37–46.

Jacob Cohen critiqued use of percent agreement due to its inability to account for chance agreement. He introduced what became known as Cohen's kappa, developed to account for the possibility that raters actually guess on at least some variables due to uncertainty. Like most correlation statistics, the kappa can range from -1.0 to $+1.0$. Although Cohen's kappa is one of the most commonly used statistics to test interrater reliability, it has limitations such as the level that should be acceptable in health research. McHugh (2012) has suggested that Cohen's interpretation may be too lenient for health related studies because it implies that a score as low as 0.41 might be acceptable. For this reason, McHugh has recommended that both kappa and percent agreement should be used in studies of healthcare.

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Cohen, S., Doyle, W. J., Skoner, D. P., Fireman, P., Gwaltney, J. M., Jr., & Newsome, J. T. (1995). State and trait negative affect as predictors of objective and subjective symptoms of respiratory viral infections. *Journal of Personality and Social Psychology, 68*, 159–169.

Cohen, S., Doyle, W. J., & Skoner, D. P. (1999). Psychological stress, cytokine production, and severity of upper respiratory illness. *Psychosomatic Medicine, 61*, 175–180.

Cohen, S., Doyle, W. J., Turner, R., Alper, C. M., & Skoner, D. P. (2003). Sociability and susceptibility to the common cold. *Journal of the American Medical Association, 277*, 1940–1944.

Coleman, E., Bockting, W., Botzer, M., Cohen-Kettenis, P., DeCuypere, G., Feldman, J., Fraser, L., Green, J. Knudson, G., Meyer, W. J., Monstrey, S., Adler, R. K., Brown, G. R., Devor, A. H., Ehrbar, R., Ettner, R., Eyler, E., Garofalo, R., Karasic, D. H., Lev, A. I., Mayer, G., Meyer-Bahlburg, H., Hall, B. P., Pfäfflin, F., Rachlin, K., Robinson, B., Schechter, L. S., Tangpricha, V., van Trotsenburg, M., Vitale, A., Winter, S., Whittle, S., Wylier, K. R., Zucker, K. (2012). Standards of care for the health of transsexual, transgender, and gender-nonconforming people, Version 7. *International Journal of Transgenderism, 13*(4), 165–232. doi: 10.1080/155327

Coleman, E., Radix, A. E., Bouman, W.P., Brown, G.R., de Vries, A. L. C., Deutsch, M. B., Ettner, R., Fraser, L., Goodman, M., Green, J., Hancock, A. B., Johnson, T. W., Karasic, D. H., Knudson, G. A., Leibowitz, S. F., Meyer-Bahlburg, H. F.L., Monstrey, S. J., Motmans, J., Nahata, L., ... Arcelus, J. (2022). Standards of care for the health of transgender and gender diverse people (8th ver.). *International Journal of Transgender Health, 23*(S1), S1-S260. <https://doi.org/10.1080/26895269.2022.2100644>

This document is the eighth version of the Standards of Care (SOC). The original SOC were published in 1979. Previous revisions were in 1980, 1981, 1990, 1998, 2001, and 2011.

The eighth version of the Standards of Care for the World Professional Association for Transgender Health can be accessed at this link: <https://www.wpath.org/publications/soc>

College students' mental health is a growing concern, survey finds. (2013, June). *Monitor on Psychology, 44*(6), 13. <http://www.apamonitor-digital.org/apamonitor/201306?pg=15#pg15>

Ninety-five percent of college counseling center directors surveyed said the number of students with significant psychological problems is a growing concern in their center or on campus, according to the latest Association for University and College Counseling Center Directors (AUCCCD; 2013) survey of counseling center directors. Seventy percent of directors believe that the number of students with severe psychological problems on their campus has increased in the past year. Anxiety continues to be the most predominant presenting concern among college students (41.6%), followed by depression (36.4%), and relationship problems (35.8%). Other common concerns are suicidal ideation (16.1%), alcohol abuse (9.9%), sexual assault (9.2), ADHD (8.9%), and self-injury (8.7%). On average, 24.5 percent of clients were taking psychotropic medications. However, 19 percent of directors report the availability of psychiatric services on their campus is inadequate. Directors report that 21 percent of counseling center students present with severe mental health concerns, while another 40 percent present with mild mental health concerns. Less than one percent (.3%) of directors reported that their center offered online counseling. (See Mistler, Reetz, Krylowicz, & Barr, 2013).

Collin, L., Reisner, S. L., Tangpricha, V., & Goodman, M. (2016, April), Prevalence of transgender depends on the “case” definition: A systematic review. *The Journal of Sexual Medicine, 13*(4), 613–626.

Committee on Statistics of the American Medico-Psychological Association in Collaboration with the Bureau on Statistics of the National Committee of Mental Hygiene. (1918). *Statistical manual for the use of institutions for the insane*. New York, NY: Author.

Conner, A., Azrael, D., & Miller, M. (2019, December). Suicide case-fatality rates in the United States, 2007 to 2014: A nationwide population-based study. *Annals of Internal Medicine*, *171*(12), 885–895. <https://doi.org/10.7326/M19-1324>

Andrew Conner, B.S., Deborah Azrael, Ph.D., and Matthew Miller, M.D., M.P.H., Sc.D. discuss how the U.S. suicide case-fatality rate (CFR), which is defined as the proportion of suicidal acts that are fatal, depends on the distribution of methods used in the act and the probability of death given a particular method. In this cross-sectional study, the authors use data from 3 large databases for 2007 to 2014 to evaluate rates of suicide deaths and nonfatal suicide attempts, overall and method-specific CFRs, and distributions of methods used among persons aged 5 years or older. Participants included suicide deaths ($n= 309,377$ records from the National Vital Statistics System) and nonfatal suicide attempts requiring treatment in an emergency department (ED) ($n= 1,791,638$ records from the Nationwide Emergency Department Sample) or hospitalization ($n= 1,556,871$ records from the National [Nationwide] Inpatient Sample) among persons aged 5 years or older. Overall, 8.5% of suicidal acts were fatal (14.7% for males vs. 3.3% for females; 3.4% for persons aged 15 to 24 years vs. 35.4% for those aged ≥ 65 years). Drug poisoning accounted for 59.4% of acts but only 13.5% of deaths; firearms and hanging accounted for only 8.8% of acts but 75.3% of deaths. Firearms were the most lethal method (89.6% of suicidal acts with a firearm resulted in death), followed by drowning (56.4%) and hanging (52.7%). Method-specific CFRs were higher for males and older persons. The distribution of methods varied across demographic groups. With respect to limitations of the study, the authors noted that the results are based on suicidal acts resulting in an ED visit, a hospitalization, or death. Consequently, the reported CFRs are larger than they would have been had the data included nonfatal attempts that did not result in an ED visit. Less than 9% of suicidal acts result in death, but that percentage increases to 90% when firearms are involved.

Connors, G., DiClemente, C., Velasquez, M., & Donovan, D. (2013). *Substance abuse treatment and the stages of change* (2nd ed.). New York, NY: Guilford Press.

Conrad, R., Rayala, H., Diamond, R., Busch, B., & Kramer, N. (2020, April 7). Expanding telemental health in response to the COVID-19 pandemic. *Psychiatric Times*. <https://www.psychiatrytimes.com/coronavirus/expanding-telemental-health-response-covid-19-pandemic>

Keywords: COVID-19, Coronavirus

Rachel Conrad, MD, Harika Rayala, Rebekah Diamond, JD, Bianca Busch, MD, and Nicole Kramer, MA discuss how the use of social distancing to “flatten the curve” and prevent the spread of COVID-19 has catapulted the use of telehealth.

Consumer's Union. (1994, November). Annual questionnaire. *Consumer Reports*. Yonkers, NY: Author.

Consumer's Union. (1995, November). Mental health: Does therapy help? *Consumer Reports*, *60*, 734-739.

Cooper, J., Heron, T., & Heward, W. (2007). *Applied behavior analysis* (2nd ed.). Upper Saddle River, NJ: Pearson Education.

Copeland, W. E., Angold, A., Costello, E. J., & Egger, H. (2013). Prevalence, comorbidity, and correlates of DSM-5 proposed disruptive mood dysregulation disorder. *American Journal of Psychiatry*, *170*, 173–179.

Corcoran, C., Cadenhead, K., & Vinogradov, S. (Contributors). (n.d.). Preventing schizophrenia: Risk reduction approaches. (n.d.). <http://www.schizophrenia.com/prevention.htm>
Cheryl Corcoran, M.D. (New York Schizophrenia Evaluation & Prevention Center, New York), Kristin Cadenhead, M.D. (UCSD schizophrenia CARE Center, San Diego, and Sophia Vinogradov, M.D. (UCSF Schizophrenia PART Program, San Francisco) are acknowledged contributors to a resource that discusses biological and environmental risk factors and strategies to reduce risk.

Corey, G., Corey, M. S., & Corey, C. (2018). *Issues and ethics in the helping professions* (10th ed.). Cengage Learning.

This reference entry is written in APA (2020) 7th edition style, which omits the city and state of publisher. For historical reference purposes, the same reference entry written in the old APA (2010) 6th edition style is shown below:

Corey, G., Corey, M. S., & Corey, C. (2018). *Issues and ethics in the helping professions* (10th ed.). Boston, MA: Cengage Learning.

Correll, C. U., Davis, R. E., Weingart, M., Saillard, J., O’Gorman, C., Kane, J. M., Lieberman, J. A., Tamminga, C. A., Mates, S., & Vanover, K. E. (2020, January 8). Efficacy and safety of Lumateperone for treatment of schizophrenia: A randomized clinical trial. *JAMA Psychiatry*, *77*(4), 349–358. doi:10.1001/jamapsychiatry.2019.4379

Lumateperone is a serotonin, dopamine, and glutamate modulator. In this randomized clinical trial of 450 patients with acute exacerbation of schizophrenia, 42 mg of lumateperone demonstrated statistically significant differences in reducing symptoms of schizophrenia without treatment-emergent motor, cardiometabolic, or endocrine adverse effects compared with placebo. In its first Phase 3 clinical test, lumateperone has shown evidence of being effective and safe. Similar to other antipsychotics, it interacts with the dopamine-2 receptor, although in ways that distinguish it from existing agents. It also

acts as a serotonin reuptake inhibitor (the mechanism that characterizes SSRI antidepressants). More importantly in terms of compliance and fewer side effects, lumateperone does not interact with “off-target” receptors that are considered to contribute to the adverse effects seen in other antipsychotic. A total of 359 participants completed this study and follow-up. As measured the intensity of positive and negative schizophrenia symptoms, research participants receiving lumateperone at the 42mg dose showed improvements compared with those who received placebo. Improvement was noticeable by the 8th day of the trial and continued through the 28th day. Four major side effects were seen more with lumateperone than with placebo—sedation (17.3% vs 4.0%), somnolence (12.7% vs 5.4%), fatigue (5.3% vs 1.3%) and constipation (6.7% vs 2.7%) but none was severe. There was no indication that lumateperone was associated with motor abnormalities, weight gain, metabolic, or cardiac side effects. With regard to incremental validity, the trial did not answer the question of whether lumateperone’s mechanism of action is in fact novel, or whether it provides clear clinical advantages greater than the effects of currently approved antipsychotics.

Cosgrave, G. (2018). *Schedules of reinforcement*. Educate Autism.

<http://www.educateautism.com/applied-behaviour-analysis/schedules-of-reinforcement.html>

Costa, P. T., Jr., Widiger, T. A. (Eds) (2002). *Personality disorders and the five-factor model of personality* (2nd ed). Washington, D.C.: American Psychological Association.

Coste, J. K. (2004). *Learning to speak Alzheimer’s: A groundbreaking approach for everyone dealing with the disease*. New York, NY: First Mariner Books.

Costandi, M. (2016, August 19). *Neuroplasticity*. Cambridge, MA: The MIT Press Essential Knowledge Series.

Costandi, M., & Warburton, N. (Ed.). (2019, September 12). *Against neurodiversity*. Aeon.

<https://aeon.co/essays/why-the-neurodiversity-movement-has-become-harmful>

Moheb Costandi is a molecular and developmental neurobiologist and freelance science writer. Among his many opinions in this essay, he makes the point that the neurodiversity movement has good intentions but that it has been biased in favoring high-functioning people while overlooking those who struggle with severe autism. He points out that it is ironic how neurodiversity advocates cannot grasp the fact that many autistic people think differently about autism. He also emphasizes the point that many people with autism are profoundly disabled by their condition.

- Coupland, C. A. C., Hill, T., Denning, T., Morriss, R., Moore, M., & Hippisley-Cox, J. (2019). Anticholinergic drug Exposure and the risk of dementia: A nested case-control study. *JAMA Intern Medicine, 179*(8), 1084–1093. doi:10.1001/jamainternmed.2019.0677
In this nested case-control study of 58,769 patients with a diagnosis of dementia and 225,574 matched controls, there were statistically significant associations of dementia risk with exposure to anticholinergic antidepressants, antiparkinson drugs, antipsychotic drugs, bladder antimuscarinics, and antiepileptic drugs after adjusting for confounding variables. Because of the associations observed for specific types of anticholinergic medication, the authors suggest that these drugs should be prescribed with caution in middle-aged and older adults.
- Crabb, A. C., & Linton, J. M. (2007). A qualitative study of recovering and nonrecovering substance abuse counselors' belief systems. *Journal of Addictions and Offender Counseling, 28*(1), 4–20.
- Cranford v. Peter G. Cranford*, 120 Ga. App. 470, 170 S.E.2d 844 (1969)
Dr. Cranford also helped establish case law in Georgia related to privileged communication in *Cranford v. Cranford* (1969), which involved Peter G. Cranford versus Helen T. Cranford (09-30-1969):
“...If the appellant's contention that the fact of employment is protected is to be determined by reference to the law applicable to the attorney-client relationship, as the statute directs, then it is without merit. The mere fact of employment is not protected from disclosure....”
- Cranford, P. C. (1981). *But for the grace of God: The inside story of the world's largest insane asylum*. Augusta, GA: Great Pyramid Press.
This excellent and detailed perspective of the history of Georgia famous Central State Hospital was written by the late Peter Cranford, Ph.D., who became a licensed psychologist only two years after Georgia's Psychology Practice Act (Title 43, Section 39) became effective. Dr. Cranford had license #PSY00052, issued on 04-09-1953, last renewed on 03-28-1986, with an expiration date of 03-31-1987. Legislation created the Georgia Lunatic, Idiot, and Epileptic Asylum (1837) and the first patient admitted several years later (1898). The hospital has had several subsequent names: Georgia State Sanitarium (1898), Milledgeville State Hospital (1929), and Central State Hospital (1967) until its closure (2010).
- Currier, J. M., McCormick, W., & Drescher, K. D. (2015). How do morally injurious events occur? A qualitative analysis of perspectives of veterans with PTSD. *Traumatology, 21*(2), 106–116.

- D'Andrea, W., Ford, J., Stolbach, B., Spinazzola, J., & van der Kolk, B. A. (2012). Understanding interpersonal trauma in children: Why we need a developmentally appropriate trauma diagnosis. *American Journal of Orthopsychiatry*, 82(2), 187–200. <https://doi.org/10.1111/j.1939-0025.2012.01154.x>
- Dahl, J. C., & Lundgren, T. L. (2006). *Living beyond your pain: Using Acceptance and Commitment Therapy to ease chronic pain*. Oakland, CA: New Harbinger Publications.
- Dailey, S. F., Gill, C. S., Karl, S. L., & Barrio Minton, C. A. (2014). *DSM-5 learning companion for counselors*. Alexandria, VA: American Counseling Association.
- Dalenberg, C. J. (2000). *Countertransference and the treatment of trauma*. Washington, DC: American Psychological Association.
Keywords: Dissociative
Constance Dalenberg, Ph.D., a clinical psychologist and Distinguished Professor of Psychology in the California School of Professional Psychology, provides evidence-based guidance for clinicians who manage countertransference reactions to trauma and for researchers who wish to conduct more sophisticated and clinically valid investigations of countertransference. Dr. Dalenberg integrates several sources of information (i.e., clinical data from anecdotal reports of her own work, transcript studies analyzing countertransference responses of therapists in actual clinical settings, and experimental studies conducted at the Trauma Research Institute) to establish a set of countertransference responses common across clinicians responding to various types of trauma. Chapters focus on various types of traumatic experiences including child physical, sexual, and emotional abuse; violent assault, such as rape, mugging, torture, and the Holocaust; chronic disillusionment, such as community violence and racism; and traumatic loss, such as career loss or physical injury, and debilitation. The author's findings are useful for therapists working with people with histories of abuse, severe trauma, and dissociative disorders.
- Darwin, C. (1872). *The expression of the emotions in man and animals*. England.
- Das, P (2012). The story of GBD 2010: A “super human” effort. *Lancet*, 380(9859), 2067–2070. doi:10.1016/s0140-6736(12)62174-6
Keywords: Global Burden of Disease Study
- Data & statistics on autism spectrum disorder. (n.d.). Centers for Disease Control and Prevention. Accessed July 15, 2022, at <https://www.cdc.gov/ncbddd/autism/data.html>
Keywords: Autism, CDC

Daviet, R., Aydogan, G., Jagannathan, K., Spilka, N., Koellinger, P. D., Kranzler, H. R., Nave, G., & Wetherill, R. R. (2022, March 04). Associations between alcohol consumption and gray and white matter volumes in the UK Biobank. *Nature Communications*, *13*(1), 1175. <https://doi.org/10.1038/s41467-022-28735-5>

Remi Daviet et al. (2022) used multimodal imaging data from 36,678 generally healthy middle-aged and older adults from the United Kingdom (UK) Biobank to examine the association of alcohol intake with measures of gray matter and white matter microstructure in the brain in a large population sample. The UK Biobank is the largest collection of MRI scans, based on evaluations of 36,678 men and women aged between 40 and 69 years, living in the UK. The authors assessed associations between alcohol intake (i.e., mean daily alcohol units; one unit = 10 milliliters or 8 grams of ethanol) and imaging derived phenotypes (IDPs) of brain structure (total gray matter volume, total white matter volume, and 139 regional gray matter volumes), as well as 375 IDPs of white matter microstructure (diffusion tensor imaging and neurite orientation dispersion and density imaging indices). The authors observed negative associations between alcohol intake and global gray and white matter measures, regional gray matter volumes, and white matter microstructural indices were observed. Controlling for confounding variables, the authors observed decreases in both gray matter and white matter volumes. These associations were diffuse across the brain, and their magnitude increased with the average absolute units of alcohol consumed per day. The authors observed a significant volume change with the transition from 1 to 2 drinks (10 milliliters or 8 grams of ETOH) daily. The negative effects of alcohol consumption were similar among men and women.

Dawson, G. (2017, June 30). Understanding benzodiazepines and their role in substance use disorders. *Psychiatric Times*, *34*(6). <http://www.psychiatrictimes.com/special-reports/understanding-benzodiazepines-and-their-role-substance-use-disorders>

Deangelis, T. (2019, December). Informing the courts with the best research. *Monitor on Psychology*, *50*(11), 49–54. <http://www.apamonitor-digital.org/apamonitor/201912/MobilePagedReplica.action?pm=1&folio=49#pg52>
APA staff writer Tori Deangelis provides a summary of 10 precedent-setting court cases in which APA filed amicus curiae (“friend of the court”) briefs that had a significant impact on societal trends. The summary begins with *Jenkins v. United States* (1962), when the U.S. Court of Appeals for the D.C. Circuit decided that psychologists were allowed by U.S. courts to serve as expert witnesses on mental illness.

De Cuypere, G., Van Hemelrijck, M., Michel, A., Crael, B., Heylens, G., Rubens, R., Hoebeke, P., & Monstrey, S. (2007). Prevalence and demography of transsexualism in Belgium. *European Psychiatry*, *22*(3), 137–141. DOI: [10.1016/j.eurpsy.2006.10.002](https://doi.org/10.1016/j.eurpsy.2006.10.002)

Decker, Hannah S. (2013). *The making of DSM-III®: A diagnostic manual's conquest of American psychiatry*. New York, NY: Oxford University Press. p. xvii.

DeWall, C. N., Pond, R. J., Carter, E. C., McCullough, M. E., Lambert, N. M., Fincham, F. D., & Nezlek, J. B. (2014). Explaining the relationship between religiousness and substance use: Self-control matters. *Journal of Personality and Social Psychology*, *107*(2), 339–351.

DiClemente, C. C. (1991). Motivational interviewing and the stages of change. In W. R. Miller & S. Rollnick (Eds.), *Motivational interviewing: Preparing people to change addictive behavior* (pp. 191–202). New York, NY: Guilford Press.

DiClemente, C. C. (2003). *Addiction and change: How addictions develop and addicted people recover*. New York, NY: Guilford Press.

Diamond, M. (2013). Transsexuality among twins: Identity concordance, transition, rearing, and orientation. *International Journal of Transgenderism*, *14*(1), 24–38.

Digman, J. M. (1990). Personality structure: Emergence of the five-factor model. *Annual Review of Psychology*, *41*, 417–440.

Dilts, R. B., Epstein, T., & Dilts, R. W. (1991). *Tools for dreamers: Strategies for creativity and the structure of innovation*. Cupertino, CA: Meta Publications.

Dobzhansky, T. G. (1937). *Genetics and the evolutionary process*. New York, NY: Columbia University Press.

Dockrill, P. (2019, February 18). *Neuroscientists say they've found an entirely new form of neural communication*. Science Alert. <https://www.sciencealert.com/neuroscientists-say-they-ve-found-an-entirely-new-form-of-neural-communication>

A previously unknown form of neural communication that self-propagates across brain tissue, and can leap wirelessly from neurons in one section of brain tissue to another even after the tissue has been surgically severed. This neural process seems to be unrelated to conventionally understood neural mechanisms, such as axonal transport, synaptic transmission, and gap junction connections. For additional information, see Chiang et al. (2019) article titled “Slow periodic activity in the longitudinal hippocampal slice can self-propagate non-synaptically by a mechanism consistent with ephaptic coupling.

Doll, R., & Hill, A. B. (1950, September 30). *British Medical Journal*, *2*(4682). Smoking and carcinoma of the lung. doi: 10.1136/bmj.2.4682.739

Richard Doll and A. Bradford Hill's article on the relationship on smoking and lung cancer is regarded by some as the first such article published in a prestigious medical journal.

Dollard, J., & Miller, N. E. (1950). *Personality and psychotherapy: An analysis in terms of learning, thinking, and culture*. New York, NY: McGraw-Hill.

Dominy, S. S., Lynch, C., Ermini, F., Benedyk, M., Marczyk, A., Konradi, A., Nguyenm., Haditsch, U., Raha, D., Griffin, C., Holsinger, L. J., Arastu-Kapur, S., Kaba, S., Lee, L., Ryder, M. I., Potempa, B., Mydel, P., Hellvard, A., Adamowicz, K., Hasturk, H., Walker, G. D., Reynolds, E. C., Faull, R. L. M., Curtis, M. A., Dragunow, M., & Potempa, J. (2019, January 23). *Porphyromonas gingivalis* in Alzheimer's disease brains: Evidence for disease causation and treatment with small-molecule inhibitors. *Science Advances*, 5(1), eaau3333. DOI: 10.1126/sciadv.aau3333

Porphyromonas gingivalis, the primary pathogen that has been identified in chronic periodontitis, has also been detected in the brain of patients with Alzheimer's disease. Toxic proteases from the bacterium called gingipains were also identified in the brain of Alzheimer's patients, and the levels of gingipains correlated with tau pathology. In mice, oral *P. gingivalis* infection resulted in brain colonization and increased production of amyloid- β ($A\beta$), which is a component of amyloid plaques. To block neurotoxicity, Dominy and associates designed and synthesized small-molecule inhibitors targeting gingipains. The resulting gingipain inhibition reduced the bacterial load of an established *P. gingivalis* brain infection, blocked $A\beta$ production, reduced neuroinflammation, and rescued neurons in the hippocampus. According to the authors, these data suggest that gingipain inhibitors could be valuable for treating *P. gingivalis* brain colonization and neurodegeneration in Alzheimer's disease.

Donaldson, K. (1976). *Insanity inside out*. New York, NY: Crown.

Kenneth Donaldson's book provides the background that ultimately led to the U.S. Supreme Court cases known as *Dr. J. B. O'Connor v. Kenneth Donaldson*, 422 U.S. 563 (1975).

Douglas, K. S., Hart, S. D., Webster, C. D., & Belfrage, H. (2013). *HCR-20V3: Assessing risk of violence – User guide*. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University.

Keywords: HCR-20, dangerousness, duty to protect

This user guide contains the correct citation for the HCR-20V3.

Douglas, K. S., Shaffer, C., Blanchard, A. J. E., Guy, L. S., Reeves, K., & Weir, J. (2014). *HCR-20 violence risk assessment scheme: Overview and annotated bibliography*. HCR-20

Violence Risk Assessment White Paper Series, #1. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University.

Keywords: HCR-20, dangerousness, duty to protect

This paper contains an HCR-20 annotated bibliography.

Doverspike, W. F., & Humphries, L. (1980). Differential diagnosis in a psychiatric emergency receiving facility: An actuarial approach. Paper presented at the annual meeting of the Georgia Psychological Association, Macon, GA.

Doverspike, W. F. (1983). *Clinical assessment: A handbook for mental health professionals*. Atlanta, GA: Division of Mental Health and Mental Retardation, Georgia Department of Human Resources.

Doverspike, W. F. (1988). Neuropsychology assessment in the psychiatric hospital. *Medicus*, 1(2), 8–9.

Doverspike, W. F. (1995). Suicide risk factors rating scale. In W. Doverspike *Clinical risk management: Assessment and intervention guidelines for suicidal and violent behavior*. Atlanta, GA: Author.

Doverspike, W. F. (1995). Violence Risk Factors Rating Scale. In W. Doverspike *Clinical Risk Management: Assessment and Intervention Guidelines for Suicidal and Violent Behavior*. Atlanta, GA: Author.

Doverspike, W. F. (1999). *Multiaxial Diagnostic Inventory - Revised (MDI-R)*. Sarasota, FL: Professional Resource Press, Inc. ISBN # 1-56887-051-5. Professional Resource Exchange, 1891 Apex Road, Sarasota, FL.

Note: For webpages on a website with a group author or an individual author, the style of this bibliography mostly follows APA (2020, p. 351), using example 112 (Webpage on a website with an individual author).

Doverspike, W. F. (1999). *Ethical risk management: Guidelines for practice*. Sarasota, FL: Professional Resource Press, Inc.

Doverspike, W. F. (2008, December). *How to stop obsessive worry: A key to peace of mind*. http://drwilliamdoverspike.com/files/how_to_stop_obsessive_worry.pdf

Doverspike, W. F. (2012, May 10). *History of the Georgia Psychological Association*. <https://gapsychology.site-ym.com/page/History>

Doverspike, W. F. (2013). DSM-5 in development: Substance use disorders. *Georgia Psychologist*, 67(1), 8–9.

Doverspike, W. F. (2013). *Citing DSM-5 in APA style*.

http://drwilliamdoverspike.com/files/apa_style_-_citing_DSM-5_-_2010.pdf

Note: For the most current version of the *DSM-5-TR* (APA, 2022) and APA (2020) 7th edition style, see Doverspike (2022) document titled as “Citing DSM-5 and ICD in APA Style,” which is listed under Student Resources on the website.

Doverspike, W. F. (2013). *Citing DSM-5 in APA style*. <http://drwilliamdoverspike.com/>

Note: The website hyperlink is embedded in Doverspike (2020) document titled “Citing DSM-5 and ICD in APA Style,” which is listed under Student Resources. For the most current version of the *DSM-5-TR* (APA, 2022) and APA (2020) 7th edition style, see Doverspike (2022) document titled as “Citing DSM-5 and ICD in APA Style,” which is listed under Student Resources on the website.

Doverspike, W. F. (2015). *DSM-5 substance use disorders*.

http://drwilliamdoverspike.com/files/dsm-5_substance_use_disorders.pdf

Doverspike, W. F. (2016). *How to understand addictions: Addiction fact sheet*.

http://drwilliamdoverspike.com/files/how_to_understand_addictions.pdf

Doverspike, W. F. (2016). *How to understand the opioid epidemic: Addiction fact sheet*.

http://drwilliamdoverspike.com/files/how_to_understand_the_opioid_epidemic.pdf

Doverspike, W. F. (2018). *Motivational interviewing made simple*. <https://ecams.richmont.edu/>

Doverspike, W. F. (2018). *The transtheoretical model of behavioral change: Processes and stages of change*. <https://ecams.richmont.edu/>

Doverspike, W. F. (2019). *How to understand the violence epidemic*.

http://drwilliamdoverspike.com/files/how_to_understand_the_violence_epidemic.pdf

Doverspike, W. F. (2013). *APA style checklist*. <http://drwilliamdoverspike.com/>

Note: The website hyperlink is embedded in the Doverspike (2020) document titled APA Style Checklist, which is listed under Student Resources.

Doverspike, W. F. (2013). *Citing ethical and legal standards*. <http://drwilliamdoverspike.com/>

Note: The website hyperlink is titled APA Style – Legal Sources II, listed under Student Resources.

Doverspike, W. F. (2013). *Citing DSM-5 in APA style*.

http://drwilliamdoverspike.com/files/apa_style_-_citing_DSM-5_-_2010.pdf

Note: The website hyperlink is embedded in Doverspike (2020) document titled Citing DSM-5 and ICD in APA Style, which is listed under Student Resources.

Doverspike, W. F. (2020). *APA style: The issue with issues*. <http://drwilliamdoverspike.com/>

Doverspike, W. F. (2020). *APA style checklist*. <http://drwilliamdoverspike.com/>

The document is an updated version, based on the APA (2020) *Publication Manual* style, of the 2013 document.

Doverspike, W. F. (2020). *APA style template*. <http://drwilliamdoverspike.com/>

The document is an updated version, based on the APA (2020) *Publication Manual* style, of the 2013 document.

Doverspike, W. F. (2020). *Citing DSM-5 and ICD in APA style*. <http://drwilliamdoverspike.com/>

The document is an updated version, based on the APA (2020) *Publication Manual* style, of the 2013 document.

Doverspike, W. F. (2020). *Citing ethical and legal standards*.

http://drwilliamdoverspike.com/files/apa_style_-_citing_legal_sources_doverspike.pdf

The document is an updated version, based on the APA (2020) *Publication Manual* style, of the 2013 document.

Doverspike, W. F. (2020). *Missing reference information*. <http://drwilliamdoverspike.com/>

When information needed to create a reference list entry is missing or unknown, there are various strategies to adapt the reference. The following table shows the basic structure of an APA Style reference to a published work, adapted for missing information, along with the corresponding in-text citations. Refer to the reference examples and Chapters 9 and 10 of the *Publication Manual* for specific details for the type of work being cited. Table 9.1 (below) can be found in APA (2020, p. 284). This information can also be found on the APA Style website (<https://apastyle.apa.org/style-grammar-guidelines/references/missing-information>).

Doverspike, W. F. (2021). *Psychopathology: Key concepts and glossary terms*.

<https://ecams.richmont.edu/>

Doverspike, W. F. (2021). *CED 6123: Ethical, legal, and professional standards in professional counseling and marriage and family therapy* [Syllabus]. Atlanta, GA: Richmond Graduate University. <https://ecams.richmont.edu/>

Doverspike, W. F. (2021). *CEG 6143: Psychopathology* [Syllabus]. Atlanta, GA: Richmond Graduate University. <https://ecams.richmont.edu/>

Doverspike, W. F. (2021). *CEG 6832: Addictions counseling: An integrative approach to assessment and treatment* [Syllabus]. Atlanta, GA: Richmond Graduate University. <https://ecams.richmont.edu/>

Doverspike, W. F. (2022). *Citing DSM-5-TR and ICD in APA style*.

http://drwilliamdoverspike.com/files/apa_style_-_citing_DSM-5.pdf

The document is an updated version, based on the APA (2020) *Publication Manual* style and based on the DSM-5-TR (i.e., the 2022 text revision of DSM-5). For archival purposes, the earlier articles can be accessed through the hyperlinks at the end of this article. The website hyperlinks are embedded in Doverspike (2022) document titled “Citing DSM-5-TR and ICD in APA Style,” which is listed under Student Resources of the Publications page of the website.

Dozier, T. H. (2017). Counterconditioning treatment for misophonia. *Clinical Case Studies, 14*(5), 374–387. doi: 10.1177/1534650114566924
Keywords: Hyperacusis, misophonia

Dragowski, E. A., Scharron del Rio, M. R., & Sandigorsky, A. L. (2011). Childhood gender identity...disorder? Developmental, cultural and diagnostic concerns. *Journal of Counseling and Development, 89*(3), 360–366.

Drake, J. W., & Holland, J. J. (1999). Mutation rates among RNA viruses. *Proceedings of the National Academy of Sciences, 96*, 13910–19013.

Mutation rates of rhinoviruses, which are small RNA viruses, are roughly 100,000 times higher than in humans. With a global population exceeding one billion trillion (10²¹), rhinoviruses are arguably the most successful rapidly infecting viruses on Earth today.

Ducharme, E. L. (2017). Best practices in working with complex trauma and dissociative identity disorder. *Practice Innovations, 2*(3), 150–161. <https://dx.doi.org/10.1037/pri0000050>

Duckworth, A. (2016). *Grit: The power of passion and perseverance*. New York, NY: Simon and Schuster.

Duckworth, A. L., & Yeager, D. S. (2015). Measurement matters: Assessing personal qualities other than cognitive ability for educational purposes. *Educational Researcher, 44*(4), 237–251.

Duncan, S. R., Scott S., & Duncan, C. J. (2005, March 10). Reappraisal of the historical selective pressures for the CCR5- Δ32 mutation. *Journal of Medical Genetics*, 42(3), 205–208. Biologists at the University of Liverpool have discovered how the plagues of the Middle Ages have made around 10% of Europeans resistant to HIV. For some time, scientists have known that these individuals carry a genetic mutation (known as CCR5-Δ32) that prevents the HIV virus from entering the cells of the immune system but have been unable to account for the high levels of the gene in Scandinavia and relatively low levels in areas bordering the Mediterranean. Also see Return of the Black Death (Scott & Duncan, 2004).

Dunn, D. S., & Andrews, E. E. (2015). Person-first and identity-first language: Developing psychologists' cultural competencies using disability language. *American Psychologist*, 70(3), 255–264. <https://doi.org/10.1037/a0038636>

Dusky v. United States, 362 U.S. 402 (1960)

This U.S. Supreme Court case established the following precedent: “The evaluation must be more than a brief mental status exam, and must determine whether the accused “has sufficient present ability to consult with his lawyer with a reasonable degree of rational understanding—and whether he has a rational as well as factual understanding of the proceedings against him.”

Dziegielewska, S. F. (2014). *DSM-5 in action* (3rd ed.). New York, NY: John Wiley & Sons.

Eberle, H., & Neumann, H. (2012). *Was Hitler ill?: A final diagnosis*. Malden, MA: Polity Press. First published in German as *War Hitler krank?* (c) Bastei Lübbe GmbH & Com. KG, Köln, 2009.

Ecker, B., Ticic, R., Kushner, E., Lasser, K., Greenwald, R., Feinstein, D., Dahilitz, M. (Ed.), & Hall, G. (Ed.). (2015). *Memory reconsolidation in psychotherapy: The neuropsychologist special issue, Volume 1*. Parkridge, Queensland, AU: Dahlitz Media.

Eckerd, Marcia. (2018, Fall). Identifying autism spectrum disorder (level 1) in adults. *Journal of Health Service Psychology*, 44(4), 93–100.

<https://ce.nationalregister.org/publication/identifying-autism-spectrum-disorder-level-1-in-adults/>

Author discusses diagnosis, treatment, and counseling with autism spectrum disorder.

Eckerd, Marcia. (2019, Winter). Disclosure of ASD diagnosis to children and adolescents. *Journal of Health Service Psychology*, 45(1), 17-22.

<https://ce.nationalregister.org/publication/disclosure-of-asd-diagnosis-to-children-and-adolescents/>

Author discusses biomedical and psychosocial models with respect to disclosing diagnosis to parents of child autism spectrum disorder.

Edwards, G., & Gross, M. (1976). Alcohol dependence: Provisional description of a clinical syndrome. *British Medical Journal*, *1*, 1058–1061.

Erford, B. T., Hayes, D. G., & Crockett, S. (2020). *Mastering the National Counselor Examination and the Counselor Preparation Comprehensive Examination* (3rd. ed). Hoboken, NJ: Pearson.

Ericsson, K. A. (2012, October 01). Training history, deliberate practise and elite sports performance: An analysis in response to Tucker and Collins review—what makes champions?. *British Journal of Medicine*, *47*(9), 533–535. doi:10.1136/bjsports-2012-091767

K. Anders Ericsson disputes Malcolm Gladwell’s misuse of the idea that 10,000 repetitions of a skill can create mastery of that skill.

Ericsson, K. A., Krampe, R. T., & Tesch-Römer, C. (1993). The role of deliberate practice in the acquisition of expert performance. *Psychological Review*, *100*, 363–406.

This research article appears to have been the evidence-base on which Malcolm Gladwell (2008) wrote his book *Outliers*, which contained the “10,000-Hour Rule.” However, the first author of the original study (see Ericsson, 2012), on which Malcolm’s book was based, has disputed Gladwell’s use of this idea.

Efrati, Y., (2019, December). Normal versus abnormal sexual behavior in adolescents. *Psychiatric Times*, *36*(12), 9, 14.

Eisenkraft, N., & Elfenbein, H. A. (2010, March 16). The way you make me feel: Evidence for individual differences in affective presence. *Psychological Science*, *21*(4), 505–510.

Keywords: Affective presence

Noah Eisenkraft and Hillary Anger Elfenbein describe their research on the importance of affective presence, particularly positive affective presence, as one of the primary determinants of what makes people feel comfortable around another person.

Ekirch, A. R. (2005, January 01). *At day’s close: Night in times past*. New York, NY: W. W. Norton & Company.

Roger Ekirch, Ph.D., is an award-winning author of five books and a professor of history at Virginia Polytechnic Institute State University (Virginia Tech). Although early America remains his teaching interest, his research has ranged widely to include

European as well as American history—even the history of sleep, which he probed in this book, which offers a panoramic study of nocturnal culture before the Industrial Revolution. The book is the recipient of four prizes and is now in its eighth printing. Ekirch describes nocturnal phenomena such as *segmented sleep*—particularly as it related to sociability, sex, and solitude before artificial light was invented. In perhaps his most fascinating revelation, Ekirch speculates that pre-industrial people slept a segmented sleep. Ekirch has found in more than 500 references, from Homer into contemporary researchers, to a “first sleep” that lasted until maybe midnight, and was followed by “second sleep.” In between the two periods of segmented sleep, people routinely got up, urinated, smoked tobacco, read things, chatted with each other, had friends around, or simply reflected on the events of the previous day – and on their dreams. As a parenthetical note, Ekirch speculates that plenty of them also had sex, which by all accounts was far more satisfactory than at the end of a hard day of laboring. Couples who copulated “after the first sleep,” wrote a 16th-century French doctor, “have more enjoyment, and do it better.”

Ekirch, A. R. (2015, February 02). The modernization of Western Sleep: Or, does insomnia have a history? *Past & Present*, 226(1), 149–192. <https://doi.org/10.1093/pastj/gtu040>

Ellis, E. (2001). Positive psychology. *Georgia Psychologist*, 55(3), 22.

Ellis, A. E., Meade, N. G., & Brown, L. S. (2020). Evidence-based relationship variables when working with affectional and gender minority clients: A systematic review. *Practice Innovations*, 5(3), 202–217. <https://doi.org/10.1037/pri0000118>

Amy E. Ellis, Nicholas G. Meade, and Laura S. Brown synthesized the quantitative and qualitative research examining the role of evidence-based relationship variables (EBRVs) in the treatment of affectional and gender minority (AGM) individuals. The authors reviewed 14 unique studies (in a total of 15 articles) published between 2009 and 2019. Most studies examined the role of empathy and alliance. Positive regard, strong therapeutic alliances, genuineness, and empathy were all associated with improvements in treatment engagement and treatment outcome. There appeared to be no evidence that matching clients on sexual or gender identities improved outcomes. See also Ginicola, Smith, and Filmore (2017).

Ellison, R. L., & Stika, M. (2018). Feedback on invalid neuropsychological testing: Mild traumatic brain injury (MTBI). *Journal of Health Service Psychology*, 44, 19–23.

Emory University School of Medicine. (2020, April 20). Wellness guides [Website].

https://med.emory.edu/departments/psychiatry/covid/wellness_guides.html

Keywords: COVID-19, Coronavirus

These wellness guides are offered with the aim of helping people cope with the COVID-19 pandemic. Their contents reflect the consensus ideas and recommendations of Emory's interprofessional group of mental health professionals.

Eriksen, K., & Kress, V. E. (2008). Gender and diagnosis: Struggles and suggestions for counselors. *Journal of Counseling & Development, 86*(2), 152–162.

Erikson, E. H., & Erikson, J. M. (1998). *The life cycle completed: Extended version*. New York, NY: Norton.

Erik Erikson (1902-1994) was a German-American developmental psychologist and psychoanalyst known for his theory on psychological development of human beings. He may be most famous for coining the phrase “identity crisis.” Although he never earned a bachelor's degree, Erikson served as a professor at prominent institutions, including Harvard, Yale, and the University of California, Berkeley. He has been ranked as the 12th most cited psychologist of the 20th century.

Escobar, Javier I. (2004, April 15). Transcultural aspects of dissociative and somatoform disorders. *Psychiatric Times, 21*(5).

<http://www.psychiatrictimes.com/articles/transcultural-aspects-dissociative-and-somatoform-disorders/page/0/2>

EurekAlert! (2005, March 10). Biologists discover why 10% of Europeans are safe from HIV infection. *EurkAlert!* https://www.eurekalert.org/pub_releases/2005-03/uol-bdw031005.php

Biologists at the University of Liverpool have discovered how the plagues of the Middle Ages have made around 10% of Europeans resistant to HIV.

Evans, S. C., Reed, G. M., Roberts, M. C., Esparza, P., Watts, A. D., Correia, J. M., Ritchie, P., Maj, M., & Saxena, S. (2013). Psychologists' perspectives on the diagnostic classification of mental disorders: Results from the WHO-IUPsyS Global Survey. *International Journal of Psychology, 48*(3), 177-193. 10.1080/00207594.2013.804189.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3725658/>

Eysenck, H. J. (1991). Dimensions of personality: 16, 5, or 3?—Criteria for a taxonomic paradigm. *Personality and Individual Differences, 12*, 773–790.

Eysenck, H. J. (1992). Four ways five factors are *not* basic. *Personality and Individual Differences, 13*, 667–673.

Eysenck, H. J., & Eysenk, M. W. (1958). *Personality and individual differences*. New York, NY: Plenum Publishing.

Faraone, S. V., Perlis, R. H., Doyle, A. E., et al. (2005). Molecular genetics of attention-deficit/hyperactivity disorder. *Biological Psychiatry*, *57*, 1313–1323.

Fausto-Sterling, A. (2000). The five sexes, revisited. *The Sciences*, *40*(4), 19–23.

Federal Bureau of Investigation. (2020, October 1). NICS firearm background checks: Month/Year (November 30, 1998 - September 30, 2020). https://www.fbi.gov/file-repository/nics_firearm_checks_-_month_year.pdf/view

Keywords: Trigger effect, Weapons effect

The Federal Bureau of Investigation's (FBI) National Instant Criminal Background Check System (NICS) is not the same statistic as retail gun sales, but it is the closest nationwide proxy because background checks are conducted by federally licensed gun dealers, which includes all gun stores, every time someone tries to buy a gun. See also Smith (2020).

Feighner, J. P., Robins, E., Guze, S. B., Woodruff, R. A., Winokur, G., & Munoz, R. (1972) Diagnostic criteria for use in psychiatric research. *Archives of General Psychiatry*, *26*, 57–63.

Feinstein, D. (2022). Uses of energy psychology following catastrophic events. *Frontiers in Psychology*, *13*, 856209. doi:10.3389/fpsyg.2022.856209

Abstract: Energy psychology, as most widely practiced, integrates the manual stimulation of acupuncture points with imaginal exposure, cognitive restructuring, and other evidence-based psychotherapeutic procedures. Efficacy for energy psychology protocols has been established in more than 120 clinical trials, with meta-analyses showing strong effect sizes for PTSD, anxiety, and depression. The approach has been applied in the wake of natural and human made disasters in more than 30 countries. Four tiers of energy psychology interventions following the establishment of safety, trust, and rapport are described, including (1) immediate relief/stabilization, (2) reducing limbic arousal to trauma-based triggers, (3) overcoming complex psychological difficulties, and (4) promoting optimal functioning. The first tier is most pertinent in psychological first aid immediately following a disaster, with the subsequent tiers progressively being introduced over time with complex stress reactions and chronic disorders. Advantages of adding the stimulation of acupuncture points to a conventional exposure approach are identified, and challenges around cultural sensitivities and unintended effects are discussed. After establishing a framework for introducing energy psychology in disaster relief efforts, reports from a sampling of settings are presented, based on interviews with this paper's author. These include accounts of relief work with survivors of mass

shootings, genocide, ethnic warfare, earthquakes, hurricanes, tornadoes, floods, wildfires, and the COVID-19 pandemic. Hundreds of other reports from the field show a pattern of strong outcomes following the use of energy psychology in the days or weeks after a disaster and in the subsequent treatment of trauma based psychological problems. Many of these accounts corroborate one another in terms of rapid relief and long-term benefits. Finally, examples of more efficient delivery methods utilizing large groups, lay counselors, digital technology, and cultivating community resilience are presented.

Fernandez, E., Woldgabreal, Y., Day, A., Pham, T., Gleich, B., & Aboujaoude, E. (2021, November). Live psychotherapy by video versus in-person: A meta-analysis of efficacy and its relationship to types and targets of treatment. *Clinical Psychology and Psychotherapy*, 28(6), 1535–1549. doi: 10.1002/cpp.2594

Keywords: Telepsychology, telehealth

Ephrem Fernandez, Yilma Woldgabreal, Andrew Day, Tuan Pham, Bianca Gleich, and Elias Aboujaoude performed a meta-analysis of psychotherapy delivery. In their meta-analysis, Fernandez et al. evaluated pre-post changes within video-delivered psychotherapy (VDP) as well as outcome differences between VDP versus in-person psychotherapy (IPP) or other comparison groups. A literature search identified k = 56 within-group studies (N = 1681 participants) and 47 between-group studies (N = 3564). The researchers concluded that psychotherapy is no less efficacious when delivered via telehealth rather than in-person/face-to-face. The effects are most pronounced for cognitive behavioral therapy with affective disorders. Fernandez et al. (2021) conclude, “Live psychotherapy by video emerges as not only a popular and convenient choice but also one that is now upheld by meta-analytic evidence” (p. 1535).

Ferré, S. (2019, August 19). Caffeine: Neurobiological and psychiatric implications.

https://www.psychiatrytimes.com/cme/caffeine-neurobiological-and-psychiatric-implications?rememberme=1&elq_mid=8312&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Sergi Ferré, M.D., Ph.D. discusses psychostimulant properties of caffeine, the most commonly consumed psychotropic drug in the world.

Ferster, C. B. (1953). The use of the free operant in the analysis of behavior. *Psychological Bulletin*, 50, 263–274.

Fink, J. L. W. (2020, August 4). 9 types of masks and how effective they are. *HealthGrades*.

<https://www.healthgrades.com/>

Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care

Jennifer L. W. Fink, R.N., B.S.N. is a Registered Nurse who provides a discussion of the relative effectiveness of various forms of masks being used to help prevent the spread of COVID-19.

Finkelstein, S. R. (2009). *Adults with Tourette Syndrome* [Doctoral dissertation, Emory University].

First, M. B. (2013). *DSM-5TM handbook of differential diagnosis*. Arlington, VA: American Psychiatric Association.

First, M. B. (2017, October), New diagnostic codes for substance use disorders and avoidant/restrictive food intake disorder. *Psychiatric Times*, 34(10), 1, 4.

Fleischmann, A., Bertolote, J. M., Wasserman, D., De Leo, D., Bolhari, J., Botega, N. J., De Silva, D., Phillips, M., Vijayakumar, L., Värnik, A., Schlebush, L., & Thanh, H. T., (2008). Effectiveness of brief intervention and contact for suicide attempters: A randomized control trial in five countries. *Bulletin of the World Health Organization*, 86(9), 703–709.

Fleming, A. (2019, January 27). ‘Hangxiety’: Why alcohol gives you a hangover and anxiety. *The Guardian*. <https://www.theguardian.com/lifeandstyle/2019/jan/27/hangxiety-why-alcohol-gives-you-a-hangover-and-anxiety>

Florido, A. (Producer). (2022, January 2). *Law aiming to protect consumers against surprise medical bills takes effect. Interview with Kaiser Health News reporter Julie Appleby* [Audio podcast]. All Things Considered. <https://www.npr.org/2022/01/02/1069784227/no-surprises-act-begins>

Key words: No Surprise Act, No Surprises Act, Good Faith Estimate
NPR reporter Adrian Florido speaks with Kaiser Health News reporter Julie Appleby about the No Surprises Act, which went into effect on January 1, 2022. Unexpected medical bills from out-of-network providers have been an all-too-common reality for many Americans. Often they come after a visit to a hospital emergency room. But a new federal law that went into effect yesterday is meant to protect patients from these kinds of unwanted surprises. The legislation, approved by Congress more than a year ago, is called the No Surprises Act. Appleby provides some background that resulted in this consumer protection legislation: “Some studies before this law passed showed that 1 in 5 emergency room visits and about 1 in 10 elective surgeries resulted in one of these surprise out-of-network bills” (TC 00:44-00:54). It is ironic that some of the greatest sources of surprise billing—ground ambulances—are not even covered under this legislation. As Appleby explains, “The legislation doesn't include ground, ambulances, for example. And some studies have found that at least half of all ground ambulance rides may result in a surprise bill” (TC 02:20-02:28). With respect to addictive disease treatment centers and mental health professionals, “The law also does not apply to

nonemergency services provided in other facilities, things like addiction treatment centers and nonemergency mental health counseling” (TC 02:40-02:50). See also cross-reference to Florido and Appleby (2022).

Florido, A., & Gold, J. A. (2022, January 2). Law aiming to protect consumers against surprise medical bills takes effect. Interview with Kaiser Health News reporter Julie Appleby by NPR reporter Adrian Florido [Audio podcast]. *All Things Considered*. <https://www.npr.org/2022/01/02/1069784227/no-surprises-act-begins>

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Foa, E. B., & Kozak, M. J. (1986). Emotional processing of fear: Exposure to corrective information. *Psychological Bulletin*, 99(1), 20–35. <https://doi.org/10.1037/0033-2909.99.1.20>

Psychologists Edna Foa and Michael Kozak argue that some form of exposure to feared situations is common to many forms of psychotherapy for the treatment of anxiety. They discuss how confrontation with feared objects or situations is an effective treatment for some forms of anxiety.

Ford, D. H., & Urban, H. B. (1963). *Systems of psychotherapy: A comparative study*. New York, NY: John Wiley and Sons.

Fowler, J. W. (1981). *Stages of faith*. New York, NY: Harper & Row.

Fox, J., & Dayle, K. (2013). DSM-5 and bereavement: The loss of normal grief? *Journal of Counseling & Development, 91*(1), 113–119.

Fragedakis, T. M., & Toriello, P. (2014). The development and experience of combat-related PTSD: A demand for neurofeedback as an effective form of treatment. *Journal of Counseling and Development, 92*(4), 481–488.

Francis, D., Diorio, J., Lin, D., & Meaney, M. J. (1999). Nongenomic transmission across generations of maternal behavior and stress responses in the rat. *Science, 286*, 1155–1158.

Frankenfield, J. (2018, October 19). *Which industry spends the most on lobbying?* Investopedia. <https://www.investopedia.com/investing/which-industry-spends-most-lobbying-antm-so/>
Based on data from [opensecrets.org](http://www.opensecrets.org), Jake Franekfield provides an industry by industry breakdown of lobbying efforts, combining all political contributions and lobbying spending from 1998-2018, to show how much each industry and its related corporations spend in lobbying: (1) Pharmaceuticals/Health Products (\$3,937,356,877), (2) Insurance (\$2,704,636,807), (3) Electric Utilities (\$2,353,570,360) (4) Electronics Manufacturing and Equipment (\$2,230,043,875), (5) Business Associations (\$2,217,425,929), (6) Oil and Gas (\$2,096,923, 653), (7) Miscellaneous Manufacturing and Distributing (\$1,687,618, 725), (8) Education (\$1,633,122,450), and (9) Hospitals/Nursing Homes (\$1,604,969,566).

Franklin, M. E., Freeman, J. B., & March, J. S. (2019). *Treating OCD in children and adolescents: A cognitive-behavioral approach* (2nd ed.). New York, NY: Guilford Press.

Freedman, R., Lewis, D. A., Michels, R., Pine, D. S., Schultz, S. K., Tamminga, C. A., Gabbard, G. O., Shur-Fen Gau, S., Javitt, D. C., Oquendo, M. A., Shrout, P. E., Vieta, E., & Yager, J. (2013, January 1). The initial field trials of DSM-5: New blooms and old thorns. *American Journal of Psychiatry, 170*, 1–5.

Freud, Ernest L. (Ed.). (1987). *Sigmund Freud: Brautbriefe: Briefe an Martha Bernays aus den Jahren 1882–1886*. Frankfurt: Germany: Fischer.

This original book contains Joseph Breuer's treatment of Anna O., who was later posthumously identified as Bertha Pappenheim (1859–1936), who was the founder of many institutions, including kindergartens, community homes, educational institutions, and the Jewish Women's Association.

Freud, S. (1901). *The Psychopathology of Everyday Life*, i-ix. (J. Strachey, Ed. & Trans.). London: The Hogarth Press and the Institute of Psychoanalysis.
See also Strachey (1960).

- Freud, S. (1917). Trauer und melancholie [Mourning and melancholia]. *Internationale Zeitschrift für Psychoanalyse [International Journal for Medical Psychoanalysis]* (in German). Leipzig and Vienna. Hugo Heller, 4(6), 288–301.
- Freud, S. (2013). *Introductory lectures on psychoanalysis* (J. Strachey, Ed. & Trans.). New York, NY: W. W. Norton & Company. (Original work published September 17, 1989).
Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy
Freud observed “cases in which a mental disease has started with a dream and in which a delusion originating in the dream has persisted (p. 113).”
- Freud, Sophie. (2007). *Living in the shadow of the Freud family*. Westport, CT: Praeger Publishers.
- Freudenberger, H. J. (1974). Staff burnout. *Journal of Social Issues*, 30, 159–165.
doi:10.1111/j.1540-4560.1974.tb00706.x
- Freudenberger, H. & Richelson G. (1980). *Burn out: The high cost of high achievement. What it is and how to survive it*. New York, NY: Bantam Books.
- Freund, K. (1976). Diagnosis and treatment of forensically significant anomalous erotic preferences. *Canadian Journal of Criminology and Corrections*, 18, 181–189.
- Freund, K., & Blanchard, R. (1986). The concept of courtship disorder. *Journal of Sex & Marital Therapy*, 12, 79–92.
- Fuerst, M. L. (2018, August 10). 3 new studies on dementia. *Psychiatric Times*.
http://www.psychiatrictimes.com/geriatric-psychiatry/3-new-studies-dementia?rememberme=1&elq_mid=3147&elq_cid=860775
- Francis Galton (1884). *Measurement of character*.
Sir Frances Galton was the first scientist to discover the “lexical hypothesis,” which is the idea that the most salient and socially relevant personality differences in people's lives will eventually become encoded into language. The hypothesis further suggests that by sampling language, it is possible to derive a comprehensive taxonomy of human personality traits (Caprara & Cervone, 2000).
- Galietti, C., Wright, C. V., Higuchi, S. A., & Bufka, L. (2020, May 1). *COVID-19: When is it OK to resume in-person services?* APA Services.
<https://www.apaservices.org/practice/news/in-person-services-covid-19>
Keywords: COVID-19, Coronavirus

Connie Galietti, J.D, C. Vaile Wright, Ph.D., Shirley Ann Higuchi, J.D., and Lynn Bufka, Ph.D. discuss several factors for psychologists to consider before opening their offices: Determine whether an in-person visit is necessary, review the physical and mental health risks, establish new rules for patients attending in-person sessions, take steps to reduce the spread of COVID-19 in your office, implement policies that protect employees.

Galietti, J. D., Wright, C. V., Higuchi, S. A., & Bufka, L. (2021, March 11). *COVID-19: When is it OK to resume in-person services?* APA Services. <https://www.apaservices.org/practice/news/in-person-services-covid-19>

Keywords: COVID-19, Coronavirus

This article is an update of the May 1, 2020 article.

Connie Galietti, JD, C. Vaile Wright, PhD, Shirley Ann Higuchi, JD, and Lynn Bufka, PhD discuss several factors for psychologists to consider before opening their offices.

Galietti, J. D., Wright, C. V., Higuchi, S. A., & Bufka, L. (2021, May). *COVID-19: When is it OK to resume in-person services?* APA Services. <https://www.apaservices.org/practice/news/in-person-services-covid-19>

Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care

This article is an update of the March 11, 2021 article.

Connie Galietti, JD, C. Vaile Wright, PhD, Shirley Ann Higuchi, JD, and Lynn Bufka, PhD discuss several factors for psychologists to consider before opening their offices.

These recommendations are contained verbatim under the section heading titled “Establish new rules for patients attending in-person sessions: “As vaccines become more widely available, it may be tempting to require patients to be vaccinated before seeing them in person. This is a legally untested area and states have differing approaches to mandatory vaccinations. Until the issue is settled, it may be better practice to take vaccination status into consideration with other health risk factors as you assess the situation. Vaccines are not 100% effective and may lead to a false sense of security. Patients may also have valid reasons for not being vaccinated (e.g. difficulty accessing vaccination, they have medical issues prohibiting them from being vaccinated, etc.). Because vaccination status does not negate your responsibility to take other precautions (for example, masks, distancing, and sanitizing common surfaces), you should instead treat this as one of the many screening factors you use when deciding how to proceed. If you decide not to see unvaccinated patients, be sure that you are not being discriminatory and that you are able to provide treatment via telehealth or refer those patients to other providers.”

Gable, S. L., Reis, H. T., Impett, E. A., & Asher, E. R. (2004). What do you do when things go right? The intrapersonal and interpersonal benefits of sharing positive events. *Journal of Personality and Social Psychology*, 87, 228–245. 10.1037/0022-3514.87.2.228

Ganser, M. E. (2019, September). Gaming addiction in ICD-11: Issues and implications. *Psychiatric Times*, 36(9), 1, 5–6. <https://www.psychiatristimes.com/addiction/gaming-addiction-icd-11-issues-and-implications?/>

Psychiatrist Meredith Ganser, M.D. discusses the implications of the World Health Organization's (WHO) decision in May 2019 to classify gaming disorder as a medical illness in ICD-11.

Garber, S. W., Garber, M. D., & Spitzman, R. F. (1987, June). *Good behavior*. New York, NY: Villard Books.

This excellent book, which was the first book that I had ever seen that focused on scientifically-based operant behavioral principles written in a highly readable manner for parents, was also published in paperback edition by St. Martin's Paperbacks in February 1991. Its subtitle, which is the longest I have ever seen, is a very honest description of the breadth of behavioral problems addressed in the book: "Over 1,200 sensible solutions to your child's problems from birth to age twelve, including tantrums, bed-wetting, stuttering, nail-biting, peer pressure, lying, and other common problems."

Garcia-Falgueras, A., & Swaab, D. F. (2008). A sex difference in the hypothalamic uncinate nucleus: Relationship to gender identity. *Brain*, 131, Part 12, 3132–3146.

Garlipp, P., Gödecke-Koch, T., Dietrich, D.E., & Haltenhof, H. (2004, January). Lycanthropy: Psychopathological and psychodynamical aspects. *Acta Psychiatr Scand*, 109(1), 19–22. doi:10.1046/j.1600-0447.2003.00243.x. PMID 14674954

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

This review of the medical literature lists over 30 published cases of lycanthropy, only the minority of which have wolf or dog themes. Canines are not uncommon, although the delusional experience of being transformed into a hyena, cat, horse, bird, or tiger has been reported on more than one occasion. There have also been reported cases of delusional transformation into frogs and even bees.

Garretson, D. J. (1993). Psychological misdiagnosis of African Americans. *Journal of Multicultural Counseling & Development*, 21(2), 119–127.

Gasparini, R., Panatto, D., Lai, P. L., & Amicizia, D. (2015, June). The "urban myth" of the association between neurological disorders and vaccinations. *Journal of Preventive Medicine and Hygiene*, 56(1), E1–E8.

The authors point out that potentially serious adverse events attributed to a vaccination are often capitalized by the media because these stories appeal to the emotions of the public. Widespread social media posts and news of alleged adverse events of vaccination help create an "urban myth" that vaccines cause serious neurological disorders.

Unfortunately, this type of urban myth perpetuates antivaccination movements. Such speculation is linked to the fact that the true causes of many neurological diseases are largely unknown. Gasparini et al. conclude, “The relationship between vaccinations and the onset of serious neuropsychiatric diseases is certainly one of coincidence rather than causality. This claim results from controlled studies that have excluded the association between vaccines and severe neurological diseases, therefore it can be said, with little risk of error, that the association between modern vaccinations and serious neurological disorders is a true “urban myth” (2015, p. E1).

GBD 2013 Mortality and Causes of Death Collaborators (2014). Global, regional, and national age–sex specific all-cause and cause-specific mortality for 240 causes of death, 1990–2013: A systematic analysis for the Global Burden of Disease Study 2013. *Lancet*, 385(9963), 117–171. doi:10.1016/S0140-6736(14)61682-2 [212 collaborators]
Abstract available at <https://www.ncbi.nlm.nih.gov/pubmed/25530442>
Keywords: Global Burden of Disease Study

Georgia Department of Behavioral Health & Developmental Disabilities. (2012, March 20). Form 1013 – Certificate authorizing transport to emergency receiving facility & report of transportation (mental health). Atlanta, GA: Author. Fillable form available at <https://www.pdfFiller.com/jsfiller-desk14/?projectId=285380516&expId=4765&expBranch=2#b3ba622455d14948b3db988165a584db>
Keywords: 1013, 2013, DBHDD, involuntary commitment, involuntary transport
This form is a fillable and downloadable Form 1013.

Georgia Department of Behavioral Health & Developmental Disabilities. (2016, March 29). *Emergency admission process map*. Atlanta, GA: Author.
<https://dbhdd.georgia.gov/document/document/emergency-admission-process-map/download>
Keywords: 1013, 2013, DBHDD, involuntary commitment, involuntary transport
A downloadable flowchart illustrates an involuntary care decision tree applicable to Georgia’s emergency receiving, evaluating, and treatment facilities. The one-page map contains flow chart for Form 1013, Probate Court Order, and a Peace Officer.

Georgia Department of Behavioral Health & Developmental Disabilities. (2017, February 14). Frequently asked questions (FAQ) regarding the “Form 1013 and Form 2013.” DBHDD Policy 01–110: Attachment C. Atlanta, GA: Author.
Keywords: 1013, 2013, DBHDD, involuntary commitment, involuntary transport
This four page resource provides formal DBHDD answers to 12 questions based on interpretations of OCGA 37-4-41 (mental health) and 37-7-41 (alcohol, drug dependence, or drug abuse). Other questions may be sent to PolicyQuestions@dbhdd.gov

Georgia Department of Behavioral Health & Developmental Disabilities. (2021, July 29). Form 1013 and Form 2013 – Certificate Authorizing Transport to Emergency Receiving Facility and Report of Transportation, 01-110.

<https://gadbhdd.policystat.com/policy/10155434/latest/>

This website has downloadable and fillable 1013 and 2013 forms revised July 29, 2021.

Georgia Department of Public Health. (2019, February 4). *Updated guidance for clinicians to report possible cases of 2019 Novel Coronavirus (2019-nCoV): Guidance subject to change as outbreak unfolds*. Georgia Department of Public Health. Retrieved 03-03-2020 from

file:///C:/Users/RICHMONT1/Downloads/ncov_guidance_for_healthcare_providers_02_04_2020.pdf

COVID-19 Health Advisories and updates are available at <https://dph.georgia.gov/novelcoronavirus>

Keywords: COVID-10, Coronavirus

Georgia Department of Public Health (DPH) Commissioner Kathleen Toomey, MD., M.P.H. and state officials have confirmed Georgia's first cases of Coronavirus Disease 2019 (COVID-19) involving two residents of Fulton County who live in the same household. The following statement was listed in the fifth bullet point of the summary and highlighted in boldface at the bottom of the COVID Health Advisory website (but not boldfaced in the summary itself): "Healthcare providers who suspect COVID-19 infection in a patient should report them immediately to DPH by calling 1-866-PUB-HLTH (1-866-782-4584) and ask for a Medical Epidemiologist" (2020, p. 1).

Gersen, J. S. (2014, December 15). *The trouble with teaching rape law*. The New Yorker. <https://www.newyorker.com/news/news-desk/trouble-teaching-rape-law>

Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions, Safetyism

Jeannie Suk Gersen, Professor at Harvard Law School, opens her article with this scenario: "Imagine a medical student who is training to be a surgeon but who fears that he'll become distressed if he sees or handles blood. What should his instructors do? Criminal-law teachers face a similar question with law students who are afraid to study rape law" (Gersen, 2014, para. 1). Professors Gersen's observations are that students seem more anxious about classroom discussion, and about approaching the law of sexual violence in particular, than they had been in her previous eight years as a law professor. Some students have suggested that rape law should not be taught because of its potential to cause distress. Gersen recalls a colleague who was once asked by a student not to use the word "violate" in class (i.e., as in "Does this conduct violate the law?") because the word *violate* was triggering. Gersen recounts teachers of criminal law at multiple

institutions who have disclosed that “they do not include rape law in their courses, arguing that it’s not worth the risk of complaints of discomfort by students” Gersen, para. 5). In observing students, Gersen observes, “They are also more inclined to insist that teachers protect them from causing or experiencing discomfort—and teachers, in turn, are more willing to oblige, because it would be considered injurious for them not to acknowledge a student’s trauma or potential trauma” (para. 9). See also *Unlearning Liberty* (Lukianoff, 2014) and *The Coddling of the American Mind* (Lukianoff & Haidt, 2018).

Ghaemi, N. (2011). *A first rate madness: Uncovering the links between leadership and mental illness*. New York, NY: Penguin Press.

Nassir Ghaemi, M.D. is a Professor of Psychiatry at Tufts University and a faculty member of the Harvard Medical School and holds degrees in history, philosophy and public health. In his book, Ghaemi uses a case-study approach in his analysis of outstanding figures from history to illustrate how bipolar mentality can disable or enhance the ability of leaders to cope with crisis. His subjects are William T. Sherman, Ted Turner, Winston Churchill, Abraham Lincoln, Mahatma Gandhi, Martin Luther King Jr., Franklin D. Roosevelt, John F. Kennedy, and Adolf Hitler. In each of these cases, there was early history of mood swings, some dominated by depression, others by ebullient, thymic personality (FDR in particular).

Gholipour, B. (2014, April 16). Real-life werewolves: Psychiatry reexamines rare delusion. *LiveScience*. <https://www.livescience.com/44875-werewolves-in-psychiatry.html>

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

Giakoumatos, C. I., Nanda, P., Mathew, I. T., Tandon, N., Shah, J., Bishop, J. R., Clementz, B. A., Pearlson, G. D., Sweeney, J. A., Tamminga, C. A., & Keshavana, M.S. (2015). Effects of lithium on cortical thickness and hippocampal subfield volumes in psychotic bipolar disorder. *Journal of Psychiatric Research*, *61*, 180–187. Published online 2014 Dec 23. 10.1016/j.jpsychires.2014.12.008

Keywords: neuroprotective effects of lithium in bipolar disorder

Patients treated with lithium exhibited significantly larger hippocampal subfield volumes than no lithium, and those treated with lithium were no different from healthy controls cortical thickness or hippocampal volumes. This evidence directly supports the hypothesis that lithium may counteract the locally thinner and smaller gray matter structure found in psychotic bipolar disorder. (See also Osser, 2020).

Gilbert, R. (1992). *Extraordinary relationships: A new way of thinking about human interactions*. New York, NY: John Wiley & Sons.

Psychiatrist Roberta M. Gilbert, M.D. provides a useful observation of Bowen system theory. Although Dr. Gilbert does not specifically address Al-Anon Family Groups in this

book, her observation may help explain one of the reasons why may help improve the family situation: “If any family member can change his or her emotional functioning, provided he or she is present and accounted for within the family, the whole family will improve its functioning in response to that change. In the process, the clinical symptom or relationship problem present in the family will generally lessen. Such a viewpoint provides both solid rationale for *not trying to change others* and guidelines for *being part of the family without being part of the family problem*” (Gilbert, 1992, viii-ix).

Gilbert, R. (2004). *The eight concepts of Bowen therapy: A new way of thinking about the individual and the group*. Basye, VA: Leading Systems Press.

Ginicola, M. M., Smith, C., & Filmore, J. M. (Eds.). (2017). *Affirmative counseling with LBGTQI+ people*. Alexandria, VA: American Counseling Association.

<https://doi.org/10.1002/9781119375517>

Misty M. Ginicola (Ed), Cheri Smith (Ed), and Joel M. Filmore (Ed) provide a handbook for educators, students, and clinicians wanting to increase their awareness, knowledge, and skills in working with LBGTQI+ populations. The book contains 25 chapters divided into four sections, which explore the science behind gender and affectional orientation, development across the life span, the specialized needs of nine distinct populations, the intersectionality of ethnicity and overlapping identities, the role of religion, and counselor advocacy. Affectional minorities refer to those individuals “whose affectional orientation differs from that of the majority of other members of the surrounding society and its corresponding culture” (p. 359). Gender minorities refer to those individuals “whose gender identity, in relation to their designated sex at birth, differs from, that of the majority of other members of the surrounding society and its corresponding culture (p. 359).

Gladwell, M. (2008, November 18). *Outliers: The story of success*. Boston, MA: Little, Brown, and Company.

Throughout this book, Malcolm Gladwell repeatedly mentions the “10,000-Hour Rule,” claiming that the key to achieving world-class expertise in any skill is, to a large extent, a matter of practicing the correct way, for a total of around 10,000 hours. Elsewhere, the first author of the original study (see Ericsson, 2012), on which Malcolm’s book was based, has disputed Gladwell’s use of this idea. Hambrick et al. (2014) provide further evidence that the “10,000-Hour Rule” may not always be applicable.

Gladwell, Malcolm. (2013, October 1). *David and Goliath: Underdogs, misfits, and the art of battling giants*. Boston, MA: Little, Brown, and Company.

Goldberg, L. R. (1993). The structure of phenotypic personality traits. *American Psychologist*, 48, 26–34.

Goldenson, R. M. (Ed.). (1984). *Longman dictionary of psychology and psychiatry*. New York, NY: Longman.

Goldfried, M. R. (2019). Obtaining consensus in psychotherapy: What holds us back? *American Psychologist*, 74(4) 484–496. <https://doi.org/10.1037/amp0000365>

Marvin Goldfried, Ph.D., Department of Psychology, Stony Brook University, describes each of these impediments to obtaining consensus and offers some suggestions for what might be done to address them. A brief summary of some practical clinical tips derived from this article is contained Levine's (2020) article 8 *Core Components of Psychotherapy*.

Goldstein, B. J., Birmaher, B., & Youngstrom, E. A. (2020, January 30). Diagnostic and treatment challenges in bipolar disorder in children and adolescents. *Psychiatric Times*, 37(1). <https://www.psychiatristimes.com/special-reports/diagnostic-and-treatment-challenges-bipolar-disorder-children-and-adolescents>

Benjamin I. Goldstein, M.D., Ph.D., Boris Birmaher, M.D., and Eric A. Youngstrom, Ph.D. discuss differential diagnosis and treatment of differential clinical presentations of bipolar disorder. Goldstein et al. discuss diagnostic precursors to bipolar disorder, such as higher rates of childhood subthreshold mania or hypomania; manic, mixed, or hypomanic episodes; major depressive episodes; attention deficit hyperactivity disorder; disruptive behavior disorders; anxiety disorders; and substance use disorders. The authors also discuss risk factors for poor prognosis (i.e., comorbid disorders, environmental stressors, poor psychosocial functioning, low socioeconomic status, and family history of psychopathology such as mood disorders).

Goldstick, J. E., Cunningham, R. M., & Carter, P. N. (2022, April 20). Current causes of death in children and adolescents in the United States. *New England Journal of Medicine*. doi: 10.1056/NEJMc2201761

In their Letter to the Editor of the *New England Journal of Medicine*, Goldstick et al. (2022) discuss the implications of the Centers for Disease Control and Prevention (CDC) recently released updated official mortality data that showed 45,222 firearm-related deaths in the U.S. in 2020. This figure not only represents a new record number of deaths from firearms, but from 2019 to 2020 the relative increase in the rate of firearm-related deaths of all types (suicide, homicide, unintentional, and undetermined) among children and adolescents was 29.5%, which was more than twice as high as the relative increase in the general population. From 2019 to 2020, drug overdose and poisoning increased by 83.6% among children and adolescents, becoming the third leading cause of death in that age group. This change is largely explained by the 110.6% increase in unintentional poisonings from 2019 to 2020. The rates for other leading causes of death have remained relatively stable since the previous analysis, which suggests that changes in mortality

trends among children and adolescents during the early Covid-19 pandemic were specific to firearm-related injuries and drug poisoning; Covid-19 itself resulted in 0.2 deaths per 100,000 children and adolescents in 2020 (CDC, 2021).

Goldwater v. Ginzburg, Boroson, and Fact Magazine, Inc. (1969) 414 F.2d 324 (2d Cir. 1969).

Keywords: Goldwater Rule, Narcissistic Personality, Paranoid Personality

Barry M. Goldwater, Plaintiff-appellee, v. Ralph Ginzburg, Defendant-appellant, Warren Boroson, Defendant, and Fact Magazine, Inc., Defendant-appellant, 414 F.2d 324 (2d Cir. 1969)

Annotate this Case. US Court of Appeals for the Second Circuit - 414 F.2d 324 (2d Cir. 1969). Argued April 15, 1969. Decided July 18, 1969.

Goleman, D. (1995). *Emotional intelligence*. New York, NY: Bantam.

Keywords: amygdala hijacking, emotional regulation, emotional dysregulation

Daniel Goleman refers to an “amygdala hijack” as a phenomenon that can occur in which instinctive reaction takes the place of reflective decision and we do things that are harmful to us as well as to others.

Gomperts, S. N., Rentz, D. M., Moran, E., Becker, J. A., Locascio, J. J., Klunk, W. E., Mathis, C. A., Elmaleh, D. R., Shoup, T., Fischman, A. J., Hyman, B. T., Growdon, J. H., & Johnson, K. A. (2008, September 16). Imaging amyloid deposition in Lewy body diseases. *Neurology*, 71(12), 903–910. First published September 15, 2008, doi: <https://doi.org/10.1212/01.wnl.0000326146.60732.d6>

Gomperts et al. begin their discussion with foundational statement of how extrapyramidal motor symptoms precede dementia in Parkinson disease (PDD) by many years, whereas dementia occurs early in dementia with Lewy bodies (DLB). Despite this clinical distinction, the authors point out, the neuropathologic and neuropsychological features of these conditions overlap. In addition to widespread distribution of Lewy bodies, both diseases have variable burdens of neuritic plaques and neurofibrillary tangles characteristic of Alzheimer disease (AD). In this study, PET imaging with the β -amyloid-binding compound Pittsburgh Compound B (PiB) distinguished between a sample of subjects (N=8) with dementia with Lewy bodies (DLB) compared to a sample (n=7) of subjects with dementia with Parkinson disease (PDD). Cortical amyloid burden was measured as higher in the DLB sample than in the PDD sample, comparable to the Alzheimer's disease (AD) sample (N=15). Amyloid deposition in the PDD group was low, comparable to the Parkinson's disease (N=11) and Normal Control sample (N=37). Gomperts et al. conclude that global cortical amyloid burden is high in dementia with Lewy bodies (DLB) but low in Parkinson disease dementia. According to the authors, these data suggest that β -amyloid may contribute selectively to the cognitive impairment of DLB and may contribute to the timing of dementia relative to the motor signs of Parkinsonism.

Gopnik, A. (2016, August 31). *Should we let toddlers play with saws and knives?* Wall Street Journal. <https://www.wsj.com/articles/should-we-let-toddlers-play-with-saws-and-knives-1472654945>

Developmental psychologist Alison Gopnik, D.Phil. describes a psychological analog to the “hygiene hypothesis,” which was proposed to explain the dramatic recent increase in allergies: “Thanks to hygiene, antibiotics and too little outdoor play, children don’t get exposed to microbes as they once did. This may lead them to develop immune systems that overreact to substances that aren’t actually threatening—causing allergies. In the same way, by shielding children from every possible risk, we may lead them to react with exaggerated fear to situations that aren’t risky at all and isolate them from the adult skills that they will one day have to master” (Gopnik, 2016, para. 9–10). Dr. Gopnik is also known for her contributions to theory of mind research.

Gordis, E. (2000). Alcohol, the brain, and behavior: Mechanisms of addiction. *Alcohol Research & Health*, 24(1), 12–15.

Gordon, K. H., Castro, Y., Sitnikov, L., & Holm-Denoma, J. M. (2010). Cultural body shape ideals and eating disorder symptoms among White, Latina, and Black college women. *Cultural Diversity and Ethnic Minority Psychology*, 16(2), 135–143.

Gorvett, Z. (2021, January 14). How effective is a single vaccine dose against Covid-19? *BBC Future*. <https://www.bbc.com/future/article/20210114-covid-19-how-effective-is-a-single-vaccine-dose>

Keywords: COVID-19, Coronavirus, Vaccine, Vaccination

BBC writer Zaria Gorvett reviews several studies regarding the relative effectiveness of a single dose of vaccine, including those from Pfizer-BioNtech, Oxford-AstraZeneca, Moderna, CoronaVac (China), and Sputnik V (Russia). It is not yet clear how long the partial protection provided by a single dose of any of the vaccines will last.

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Based on European twin studies from 1963 to 1987, estimates of concordance rates for schizophrenia show higher rates for monozygotic (48%) than for dizygotic twins (17%).

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Gottman, J. M. (2011). *The science of trust: Emotional attunement for couples*. New York, NY: W. W. Norton & Company.

Gottman, J. M., & DeClaire, J. (2001). *The relationship cure*. New York, NY: Three Rivers Press.

Gottman and DeClaire refer to bids as “the fundamental unit of emotional communication” (Gottman & DeClaire, 1993, p. 4).

Gottman, J., & Gottman, J. (2016, October 31). *The sound relationship house theory* [Chart]. The Gottman Institute. <https://www.gottman.com/>

Gottman, J. M., & Silver, N. (1995). *Why marriages succeed or fail*. New York, NY: Simon & Schuster.

Nan Silver is an author, editor, and journalist who specializes in parenting, relationships, psychology, and health. With Dr. John Gottman, she is co-author of several books including *What Makes Love Last?* as well as the *New York Times* bestseller, *The Seven Principles for Making Marriage Work* and *Why Marriages Succeed or Fail*.

Gottman, J. M., & Silver, N. (1999). *The seven principles for making marriage work*. New York, NY: Three Rivers Press.

Gottman, J. M., & Levenson, R. W. (1999). What predicts change in marital interaction over time? A study of alternative models. *Family Process*, 38(2), 143–158.

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Graham, B. M. (2018, November 30). Sex hormones and gender vulnerabilities to anxiety disorders. *Psychiatric Times*, 35(11), 12–13. <http://www.psychiatrictimes.com/special-reports/sex-hormones-and-gender-vulnerabilities-anxiety-disorders>

Graham, Paul K. (2011). *Admission register of Central State Hospital, Georgia: 1842-1861*. Decatur, GA: The Genealogy Company.

According to Graham (2011, p. i), this book contains the admission record for the first 888 patients admitted to the Central State Hospital in Milledgeville, Georgia. The hospital, the state’s first mental institute, was authorized in 1837 and opened to patients at the end of 1842. At its founding, the hospital was called the Georgia Lunatic Asylum. It began on a 40-acre campus, located south of Milledgeville near Midway, which has eventually expanded to 1,750.00 The hospital’s name was changed to the Georgia State Sanitarium in 1898, then to the Milledgeville State Hospital in 1929, and finally to Central State Hospital in 1967. The first patient was admitted December 15, 1842 and died of “maniacal exhaustion” on June 18, 1843 (Graham, 2011, p. 1). See also Cranford (1981).

Grandin, T. (1995). *Thinking in pictures: My life with autism*. New York, NY: Vintage Books, Random House.

Grandin, T., & Barron, S. (2005). *Unwritten rules of social relationships: Decoding social mysteries through the unique perspectives of autism*. Arlington, TX: Future Horizons.

Granello, D. H., & Granello, P. F. (2007). *Suicide: An essential guide for helping professionals and educators*. Boston, MA: Allyn & Bacon.

Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L., & Keisling, M. (2011). *Injustice at every turn: A report of the National Transgender Discrimination Survey*. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force. http://www.thetaskforce.org/static_html/downloads/reports/reports/ntds_full.pdf

Graham, Paul K. (2011). *Admission register of Central State Hospital, Georgia: 1842–1861*. Decatur, GA: The Genealogy Company.

According to Graham (2011, p. i), this book contains the admission record for the first 888 patients admitted to the Central State Hospital in Milledgeville, Georgia. The hospital, the state's first mental institute, was authorized in 1837 and opened to patients at the end of 1842. At its founding, the hospital was called the Georgia Lunatic Asylum. It began on a 40-acre campus, located south of Milledgeville near Midway, which has eventually expanded to 1,750.00 The hospital's name was changed to the Georgia State Sanitarium in 1898, then to the Milledgeville State Hospital in 1929, and finally to Central State Hospital in 1967. The first patient was admitted December 15, 1842 and died of “maniacal exhaustion” on June 18, 1843 (Graham, 2011, p. 1).

Gray, J. A. (1987). *The psychology of fear and stress* (2nd ed.). New York, NY: Cambridge University Press.

This author discusses the behavioral inhibition system (BIS) and the reward system (RS).

Greenberg, B. (2017). Assessing the impact of sound sensitivity in tinnitus. Doctoral dissertation: American School of Professional Psychology, San Francisco Bay Area.

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Greenberg, B. & Leigh, K. (2018). Loss, meaning making, and reconstruction of narratives in adults enduring tinnitus exacerbated by exposure to sound. *The Practitioner Scholar: Journal of Counseling and Professional Psychology* 7(18), 81–99.

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Greenberg, A. S., Bailey, J. M. (1993). Do biological explanations of homosexuality have moral, legal, or policy implications? *Journal of Sex Research*, 30(3), 245–251.

Grewal, R. S., & George, T. P. (2017, July). Cannabis-induced psychosis: A review. *Psychiatric Times*, 34(7), 7–9. <http://www.psychiatrytimes.com/schizophrenia/8-distinguishing-features-primary-psychosis-versus-cannabis-induced-psychosis>

Grinker, Roy R. (1945). War Neuroses or Battle Fatigue? *The Journal of Nervous and Mental Disease*, 101(5) 442–444.

Grohol, J. M. (2018, October 8). Top 25 psychiatric medication prescriptions for 2013. *Psych Central*. <https://psychcentral.com/lib/top-25-psychiatric-medication-prescriptions-for-2013/>

Shown by brand and generic name in millions of prescriptions written, the most frequently prescribed U.S. psychiatric medications (2013) are reported by IMS as follows: Xanax (alprazolam) 45.5, Zoloft (sertraline) 41.4, Celexa (citalopram) 39., Prozac (fluoxetine) 28.3, Atavan (lorazepam) 27.9, Desyrel (trazadone HCL) 26.2, Lexapro (escitalopram) 24.9, Cymbalta (duloxetine) 18.6, Wellbutrin XL (bupropion HCL XL) 16.1, and Effexor XR s(venlafaxine HCL ER) 15.8. IMS Health, the largest vendor of U.S. physician prescribing data, is an American company that provides information, services and technology for the healthcare industry.

Gross, T., & Harrington, A. (2019, May 2). *How drug companies helped shape a shifting, biological view of mental illness Interview with Anne Harrington by Terry Gross* [Audio Podcast]. <https://www.npr.org/>

Group for the Advancement of Psychiatry (1966). *Psychopathological disorders in childhood: Theoretical considerations and a proposed classification*. New York, NY: Author.

The Group for the Advancement of Psychiatry was a membership of approximately 185 psychiatrists, organized in the form of a number of working committees that directed their efforts toward the study of various aspects of psychiatry. This report was formulated by the Committee on Child Psychiatry. This report was produced for the Group for the Advancement of Psychiatry by the Mental Health Materials center, Inc., New York.

Group for the Advancement of Psychiatry, Long, B., Brown, A. O., Sassano-Higgins, S., Morrison, D. E., & Flinton, C. (2020). Functional assessment for disability applications: Tools for the psychiatrist. *Psychiatric Times*, 36(6).

<https://www.psychiatrictimes.com/risk-assessment/functional-assessment-disability-applications-tools-psychiatrist>

Group for the Advancement of Psychiatry, Long, B., Brown, A. O., Sassano-Higgins, S., Morrison, D. E., & Flinton, C. (2020, January 6). 5 domains of functional assessment for disability evaluation. *Psychiatric Times*. <https://www.psychiatrictimes.com/risk-assessment/5-domains-functional-assessment-disability-evaluation>

Gun Violence Archive. (2021, January 3). *Gun violence archive 2020*.

<https://www.gunviolencearchive.org/past-tolls>

Although correlation does not imply causation, it is noteworthy that the Gun Violence Archive (<https://www.gunviolencearchive.org>), a site that collects and validates gun violence and crime incidents from 7,500 sources daily, reported a record number of 43,532 gun-related deaths from all causes in 2020, including 24,156 deaths from suicide and 19,376 deaths from homicide, murder, and unintentional accidents. As of March 15, 2020, the first quarter of 2021 included 8,630 gun-related deaths from all causes, including 4,884 deaths from suicide and 3,746 deaths from homicide, murder, and unintentional accidents (Gun Violence Archive, 2021).

Gun Violence Archive. (2021, March 15). *Gun violence archive 2021*.

<https://www.gunviolencearchive.org/>

The Gun Violence Archive (<https://www.gunviolencearchive.org>) is a site that collects and validates gun violence and crime incidents from 7,500 sources daily. As of March 15, 2020, the first quarter of 2021 included 8,630 gun-related deaths from all causes, including 4,884 deaths from suicide and 3,746 deaths from homicide, murder, and unintentional accidents (Gun Violence Archive, 2021).

Gunderson, G., & Pray, L. M. (2009). *Leading causes of life: Five fundamentals to change the way you live your life*. Nashville, TN: Abingdon Press.

The authors discuss agency, blessing, connection, coherence, and hope as five factors that improve quality of life.

Guy, L. S., & Wilson, C. M. (2007). *Empirical support for the HCR-20: A critical analysis of the violence literature*. HCR-20 Violence Risk Assessment White Paper Series, #2. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University.

Keywords: HCR-20, dangerousness, duty to protect

This paper contains an HCR-20 V2 risk factor literature review.

Guy, L. S., Wilson, C. M., Douglas, K. S., Hart, S. D., Webster, C. D., & Belfrage, H. (2013). *HCR-20 Version 3: Item-by-item summary of violence literature*. HCR-20 Violence Risk Assessment White Paper Series, #3. Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University.

Keywords: HCR-20, dangerousness, duty to protect

This paper contains an HCR-20 V3 risk factor literature review and rationale.

Guyer, A. E., McClure, E. B., Adler, A. D., Brotman, M. A., Rich, B. A., Kimes, A. S., Pine, D. S., Ernst, M., & Leibenluft, E. (2007). Specificity of facial expression labeling deficits in childhood psychopathology. *Journal of Child Psychology and Psychiatry*, 48, 863–871.

Hacking, I. (1995). The looping effect of human kinds. In D. Sperber, D. Premack, & A. J. Premack (Eds.). *Causal cognition: A multidisciplinary debate*. Oxford: Clarendon Press, 351–383.

Ian Hacking, Ph.D. is a philosopher (b. 1936) who grew up in Vancouver and completed his first degree (BA in Mathematics and Physics) at the University of British Columbia. He went on to Cambridge University, where he earned a BA, MA, and Ph.D. (1962) in Moral Sciences. Hacking has taught philosophy at many universities in North America and abroad, including Cambridge, Oxford, Princeton, and Stanford. He returned to live in Canada in 1982, joining the University of Toronto's Institute for the History and Philosophy of Science and Technology, but he continues to travel and lecture widely. The citation that accompanied his 2001 Canada Council for the Arts Molson Prize states that Hacking is "considered to be among the very top rank of philosophers in the world."

Hacking, I. (1999). *The social construction of what?* Cambridge, MA: Harvard University Press.

Hacking, I. (2006, August 17). Making up people. *London Review of Books*, 28(16), 23–26.

Hacking, I. (2007). Kinds of people: Moving targets. In *Proceedings of the British Academy*, 151, 285–318.

Hacking, I. (2008, December 30). Unspeakably more depends on what things are called than on what they are called. *Filosofia Unisinos*, 9(3), 189–200. DOI:10.4013/fsu.20083.01
This article by Ian Hacking is the source of the adage, "more depends on what things are called than on what they are called."

Haddon, M. (2003). *The curious incident of the dog in the night-time*. New York, NY: Vintage Contemporaries, A Division of Random House.

Hagen, E. (2004). *The Evolutionary Psychology FAQ*. Berlin, Germany: Institute for Theoretical Biology.

Haidt, J. (2013, February 12). *The righteous mind: Why good people are divided by politics and religion*. New York, NY: First Vintage Books Edition. Originally published in hardcover by Pantheon Books, a division of Random House in New York.

Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions, Safetyism

Jonathan Haidt, Ph.D. (social psychologist at the New York University Stern School of Business) challenges conventional thinking about morality, politics, and religion in a way that speaks to conservatives and liberals alike in this *New York Times* bestselling “landmark contribution to humanity’s understanding of itself” (The New York Times Book Review). Drawing on his 25 five years of research on moral psychology, Haidt shows how moral judgments arise not from reason but from gut feelings. He shows why liberals, conservatives, and libertarians have such different intuitions about right and wrong, and he shows why each side is actually right about many of its central concerns. See also the essay “The trouble with teaching rape law” (Gersen, 2014), *Unlearning Liberty* (Lukianoff, 2014), and *The Coddling of the American Mind* (Lukianoff & Haidt, 2018).

Haidt, J. (2018, September 3). *The coddling of the American mind* [Video]. YouTube. <https://www.youtube.com/watch?v=6KX5o3Hvndg>

Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions, Safetyism

Jonathan Haidt, Ph.D. (social psychologist at the New York University Stern School of Business) discusses how the generation now coming of age has been taught three Great Untruths: their feelings are always right; they should avoid pain and discomfort; and they should look for faults in others and not themselves.

Hall, D. D. (1994). Witch hunting in Salem. *Christian History*, 13(1), 38-40. Carol Stream, IL: Christianity Today.

Hall, S. D. (2016, May 18). Jesus: The first transgender man [Updated December 6, 2017]. *Huffington Post*. https://www.huffingtonpost.com/suzanne-dewitt-hall/jesus-the-first-transgend_b_10006134.html

Hall, K. S. K., & Graham, C. A. (2014). Culturally sensitive sex therapy: The need for shared meanings in the treatment of sexual problems. In Y. M. Binik & K. S. K. Hall (Eds.), *Principles and practice of sex therapy* (pp. 334–358). The Guilford Press.

Hallinan, J. T. (2014, June 13). School shootings, suicide, and contagion: Suicidal school attacks may not be isolated events. *Psychology Today*.
<https://www.psychologytoday.com/us/blog/kidding-ourselves/201406/school-shootings-suicide-and-contagion>

According to the American journalist Joseph Hallinan, Ph.D., the Sunday, August 5, 1962 “probable suicide” of 36-year-old Marilyn Monroe in Los Angeles was followed by a record wave of suicides that swept New York City. In all, 12 people killed themselves in New York on that next Sunday day. This was six times the city’s daily average, and set a new single-day record, breaking the previous record of eight. The wave of suicides rolled across the rest of the nation, as people elsewhere killed themselves in unusually large numbers. In the month after Marilyn Monroe’s death, suicides throughout the U.S. increased by 12%. The wave swelled across the Atlantic, with a 10% increase in suicides in England and Wales, where Monroe was popular. In the two-month period following Monroe’s death, there were 303 “excess” suicides in the U.S. and 60 in England and Wales. Overall, Marilyn Monroe’s death likely spawned deadly acts of imitation by 363 complete strangers.

Halpern, A. L. (2011, June). The proposed diagnosis of hypersexual disorder for inclusion in DSM-5: Unnecessary and harmful. *Archives of Sexual Behavior*, 40(3), 487–488. doi: 10.1007/s10508-011-9727-3

Hambrick, D. Z., Oswald, F. L., Altmann, E. M., Meinz, E. J., Gobet, F., & Campitelli, G. (2014). Deliberate practice: Is that all it takes to become an expert?. *Intelligence*, 45, 34–45. <https://doi.org/10.1016/j.intell.2013.04.001>
Addressing Malcolm Gladwell’s catchy principle that 10,000 hours of “deliberate practice” are needed to master a skill, these authors provide evidence that the “10,000-Hour Rule” may not always be applicable.

Hamilton, J., Scott, A., McCoy, B., & Ramirez, R. (2023, August 4). *This sausage-shaped part of your brain causes out-of-body experiences* [Podcast]. NPR Short Wave.
<https://www.npr.org/2023/07/28/1190816885/this-sausage-shaped-part-of-your-brain-causes-out-of-body-experiences?ft=nprml&f=510351>
NPR science correspondent Jon Hamilton shares the tale of the discovery with host Aaron Scott. They discuss evidence from eight case studies that demonstrate how out of body experiences can be induced by electrostimulation of the anterior precunious part of

the posterior medial cortex. They also discuss why it may be helpful to occasionally venture outside of your bodily self. This episode was produced by Berly McCoy, edited by Rebecca Ramirez and fact checked by Jon Hamilton. The audio engineer was Patrick Murray.

Hanna, F. J. (2002). *Therapy with difficult clients: Using the precursors model to awaken change*. Washington, DC: American Psychological Association.

Hansen, J. H. (2014). Take a chill pill: A cultural history of Attention Deficit/Hyperactivity Disorder. Doctoral dissertation, University of Iowa.
<https://doi.org/10.17077/etd.9r6c0v6z>

Hare, L., Bernard, P., Sanchez, F. J., Baird, P. N., Vilain, E., Kennedy, T., & Harley, V. R. (2009, January 1). Androgen receptor (AR) repeat length polymorphism associated with male-to-female transsexualism. *Biological Psychiatry*, 65(1), 93–96. Advance online publication date 27 Oct 2008. doi: 10.1016/j.biopsych.2008.08.003

Harold E. Jones Study Center. (1928). Harold E. Jones Study Center nursery school [1928-1929]. Berkeley, CA: Bancroft Library, University of California, Berkeley.
Run time: 00:16:48. This silent motion picture shows footage of children at play outdoors at a nursery school “founded by a pioneer in early childhood education” (Gopnik, 2016, para. 1). Although these children would be in their 90s now, they are depicted in this black and white motion video playing with a duck and a rabbit, splashing through a paddling pool, and digging in a sandbox. In the frames between 00:14:00 and 00:14:10, a boy (certainly no older than 5) attempts to saw a board while another child attempts to hammer nails into a board. The video is available at this link:
<https://calisphere.org/item/abe1db5ad774876750e2fd30767e73/>

Harrington, A. (2019). *Mind fixers: Psychiatry’s troubled search for the biology of mental illness*. New York, NY: W. W. Norton and Company.

Harvey, P. D. (2019). Smoking cannabis and acquired impairments in cognition: Starting early seems like a really bad idea. *American Journal of Psychiatry*, 176, 90–91.
In his editorial, Harvey summarizes current literature on the effect of cannabis on cognition. There is a solid body of studies that report a significant irreversible decline in cognitive functioning in adolescents who regularly use cannabis.

Haynes, J-D, Sakai, K., Rees, G., Gilbert, S., Frith, C., & Passingham, R. E. (2007, February). Reading hidden intentions in the human brain. *Current Biology*, 17(4), 323–328.

In 2007 this research group was able to predict volitional decisions up to 7 seconds before they became conscious, thus improving the time bound of 0.5 seconds found in the 1980s by Benjamin Libet.

Haslam, N. (2016). Concept creep: Psychology's expanding concepts of harm and pathology. *Psychological Inquiry*, 27(1), 1–17. <https://doi.org/10.1080/1047840X.2016.1082418>
Professor Nick Haslam, Ph.D., at the Melbourne School of Psychological Sciences, University of Melbourne, describes how concepts in clinical and social psychology have undergone semantic shifts over the years. Concepts that refer to the negative aspects of human behavior and experience have expanded meanings so that they now encompass a much broader range of phenomena than they did originally. In examining concepts of abuse, addiction, bullying, trauma, mental disorder, and prejudice, Dr. Haslam describes “horizontal” and “vertical” forms of this expansion: Concepts extend outward to capture qualitatively new phenomena (horizontal expansion) and downward to capture quantitatively less extreme phenomena (vertical expansion). In either case, the concept's boundary has stretched and its meaning has been expanded. Of the many explanations that have been suggested for this pattern of “concept creep,” Haslam offers his own opinion: “I contend that the expansion primarily reflects “an ever-increasing sensitivity to harm, reflecting a liberal moral agenda. Its implications are ambivalent, however. Although conceptual change is inevitable and often well motivated, concept creep runs the risk of pathologizing everyday experience and encouraging a sense of virtuous but impotent victimhood” (Haslam, 2016, p. 1). See also Ashman (2018).

Hemenway, D., Vriniotis, M., & Miller, M. (2006). Is an armed society a polite society? Guns and road rage. *Accident Analysis and Prevention*, 38(4), 687–695.
Keywords: Road rage, Trigger effect, Weapons effect
Professor of Health Psychology at Harvard Injury Control Research Center (Harvard School of Public Health) David Hemenway, Ph.D. and colleagues were interested in studying whether motorists with guns in the car more or less likely to engage in hostile and aggressive behavior while in their vehicles. The researchers analyzed data from a 2004 national random digit dial survey of over 2,400 licensed drivers. Respondents were asked whether, in the past year, they (1) made obscene or rude gestures at another motorist, (2) aggressively followed another vehicle too closely, and (3) were victims of such hostile behaviors. Seventeen percent of the respondents admitted making obscene or rude gestures, and 9% reported that they had aggressively followed too closely. Forty-six percent reported victimization by each of these behaviors in the past year. Males, young adults, binge drinkers, those who do not believe most people can be trusted, those ever arrested for a non-traffic violation, and motorists who had been in a vehicle in which there was a gun were more likely to engage in such forms of road rage. The researchers concluded that, at least in their survey, riding with a firearm in the vehicle was a marker

for aggressive and dangerous driver behavior. The authors compare their results to a similar survey in Arizona (see Miller, Azrael, Hemenway, & Solop, 2002).

Henley, J. (2009, October 31). Life before artificial light. *The Guardian*.

<https://www.theguardian.com/lifeandstyle/2009/oct/31/life-before-artificial-light>

The Guardian writer Jon Henley provides a short summary of Robert Ekirch's book that describes segmented sleep in preindustrial times before artificial light such as the incandescent bulb.

Hersen, M., & Barlow, D. H. (1976). *Single-case experimental designs strategies for studying behavior change*. Elmsford, NY: Pergamon Press Ltd.

Heylens, G., De Cuypere, G., Zucker, K. J., Schelfaut, C., Elaut, E., Vanden Bossche,... T'Sjoen, G. (2012). Gender identity disorder in twins: A review of the case report literature. *Journal of Sexual Medicine*, 9, 751–775.

Hill, K. P. (2019, August 9). Medical use of cannabis in 2019. *JAMA*, 322, 974–975.
10.1001/jama.2019.11868

Kevin P. Hill, addiction psychiatrist at the Division of Addiction Psychiatry, Beth Israel Deaconess Medical Center in Boston and faculty member of the Department of Psychiatry at Harvard Medical School states that the non-psychiatric medical benefits of cannabis are very thinly evidenced despite outsized claims to the contrary.

Hillman, C. H., Erickson, K. I., & Kramer, A. F. (2008, January). Be smart, exercise your heart: exercise effects on brain and cognition. *Nature Reviews: Neuroscience*, 9(1), 58–65. doi: 10.1038/nrn2298

Charles Hillman, Kirk Erickson, and Arthur Kramer review multidisciplinary literature that documents the beneficial influence of physical activity engendered through aerobic exercise on selective aspects of brain function. The authors discuss how human and non-human animal studies have shown that aerobic exercise can improve a number of aspects of cognition and performance. Lack of physical activity, particularly among children in the developed world, is one of the major causes of obesity. Exercise might not only help to improve their physical health, but might also improve their academic performance. This article examines the positive effects of aerobic physical activity on cognition and brain function, at the molecular, cellular, systems and behavioral levels. These effects include changes in structure, function, vasculature, and cognition.

Himle, J. A., Chatters, L. M., Taylor, R. J., & Nguyen. A. (2013). The relationship between obsessive-compulsive disorder and religious faith: Clinical characteristics and implications for treatment. *Spirituality in Clinical Practice*, 1(S), 53–70.

Hollocks, M. J., Lerh, J. W., Magiati, I, Meiser-Stedman, R., & Brugha, T. S. (2019, March).

Anxiety and depression in adults with autism spectrum disorder: a systematic review and meta-analysis. *Psychological Medicine*, 49(4), 559–572. doi: 10.1017/S0033291718002283. Epub 2018 Sep 4.

Hollon, S. D. (2020, December). Is cognitive therapy enduring or antidepressant medication iatrogenic? Depression as an evolved adaptation. *American Psychologist*, 75(9), 1207–1218. <http://dx.doi.org/10.1037/amp0000728>

Steven D. Hollon, Ph.D., Department of Psychology, Vanderbilt University, received the 2020 APA Award for Distinguished Scientific Application to Psychology. In addition with the award, Hollon was invited to submit a manuscript to *American Psychologist*, which was peer reviewed. The article was published as part of the journal’s annual Awards Issue. According to Hollon (2020, p. 1207), “There is reason to believe that depression may have evolved because it keeps organisms focused on (ruminating about) complex social issues until they can be resolved and that medications work not so much by addressing a nonexistent deficit in neurotransmitters in the synapse as by perturbing underlying regulatory mechanisms to the point that they reassert homeostatic control over those systems. If the latter is true, then medications may work to suppress symptoms in a manner that leaves the underlying episode unaddressed and patients at elevated risk of relapse whenever they are taken away.” Whereas cognitive therapy has been shown to reduce the risk of subsequent depressive episodes by half, antidepressant medications may suppress symptoms in a way that actually prolongs the underlying depression. Public Significance Statement: “There is reason to think that depression may be an adaptation (like pain or anxiety) that evolved in our ancestral past to help resolve complex social problems. If true then interventions like cognitive therapy that facilitate the functions that depression evolved to serve may be preferred over antidepressant medication that merely anesthetize the distress” (Hollon, 2020, p. 1207).

Holmes, T. H., & Rahe, R. H. (1967). Social Readjustment Rating Scale. *Journal of Psychosomatic Research*, 11(2), 213–218.

Holoyda, B. (2019, December). Paraphilias: From diagnosis to treatment. *Psychiatric Times*, 36(12), 19–21.

Holshue, M. L., DeBolt, C., Lindquist, S., Lofy, K. H., Wiesman, J., Bruce, H., Spitters, C, Ericson, K., Wilkerson, S., Tural, A., Diaz, G., Cohn, A. et al., for the Washington State 2019-nCoV Case Investigation Team. (2020, March 5). First case of 2019 Novel Coronavirus in the United States. *New England Journal of Medicine*, 382, 929-936. 10.1056/NEJMoa2001191

Keywords: COVID-19, Coronavirus

This report describes the epidemiologic and clinical features of the first case of 2019-nCoV infection confirmed in the U.S. On December 31, 2019, China reported a cluster of cases of pneumonia in people associated with the Huanan Seafood Wholesale Market in Wuhan, Hubei Province. On January 7, 2020, Chinese health authorities confirmed that this cluster was associated with a novel coronavirus, 2019-nCoV.2 Although cases were originally reported to be associated with exposure to the seafood market in Wuhan, subsequent epidemiologic data indicated that person-to-person transmission of 2019-nCoV was occurring. As of January 30, 2020, a total of 9976 cases had been reported in at least 21 countries, including the first confirmed case of 2019-nCoV infection in the U.S, reported on January 20, 2020.

Holtzheimer, P. (2018, May). Focal brain stimulation for posttraumatic stress disorder. *PTSD Research Quarterly*, 29(2), 1–3.

Hughes, A., Williams, M. R., Lipari, R. N., Bose, J., Copello, E. A. P., & Kroutil, L. A. (2016, September). *Prescription drug use and misuse in the United States: Results from the 2015 National Survey on Drug Use and Health*. NSDUH Data Review.
<http://www.samhsa.gov/data/>

Hunt, A. (2022, March 04, 2022). Faith-based groups, public health more in sync on COVID-19 than some reports suggest. *Emory News Center*.
https://news.emory.edu/stories/2022/03/er_college_sociology_religious_groups_covid_idler_03-03-2022/story.html?utm_source=ebulletin&utm_medium=email&utm_campaign=Emory_Report_EB_030322

April Hunt reports that Emory sociologists found that American religious groups of all faiths were far more supportive of public health measures designed to end the pandemic than media coverage initially suggested. Faith groups amplified public health messages in the early days of the pandemic.

Huntington, G. (1872, April 13). On Chorea. *Medical and Surgical Reporter of Philadelphia*, 26(15), 1. The Hague: Nijhoff. pp. 317–321. ISBN 978-90-6186-011-2.

Huntington’s disease has been recognized as a disorder since at least the middle ages, often given different names throughout this history as understanding of the disease changed. Originally called “chorea” because of the jerky dancelike movements associated with the disease, the autosomal dominant disorder has also been called “hereditary chorea” and “chronic progressive chorea.” In 1872, a 22 year old George Huntington, M.D. of Pomeroy, Ohio described the disorder in this paper.

Humphreys, K., & Saitz, R. (2019). Should physicians recommend replacing opioids with cannabis? *JAMA*, 321(17), 639–640.

It is said to be “irresponsible” to encourage patients addicted to opiates to switch to cannabis for their problems with pain.

Hutton, J. S., Dudley, J., Horowitz-Kraus, T., DeWitt, T., & Holland, S K. (2019, November 4). Associations between screen-based media use and brain white matter integrity in preschool-aged children. *JAMA Pediatrics*. Published online November 4, 2019. doi:<https://doi.org/10.1001/jamapediatrics.2019.3869>

In a cross-sectional study of 47 healthy prekindergarten children, screen use greater than that recommended by the American Academy of Pediatrics guidelines was associated with (1) lower measures of microstructural organization and myelination of brain white matter tracts that support language and emergent literacy skills and (2) corresponding cognitive assessments. To explore the associations between screen-based media use and integrity of brain white matter tracts supporting language and literacy skills in preschool-aged children. The study involved healthy children aged 3 to 5 years (n = 47) who were recruited at a US children’s hospital and community primary care clinics. Children completed cognitive testing followed by diffusion tensor imaging (DTI), and their parent completed a ScreenQ survey. These findings suggest a need for further study into the association between screen-based media use and the developing brain, particularly during early childhood.

Incarceration Nation: The United States leads the world in incarceration. A new report explores why—and offers recommendations for fixing the system. (2014, October). *Monitor on Psychology*, 45(9), 56. <http://www.apa.org/monitor/2014/10/incarceration.aspx>

Institute of Medicine. (1990). *Broadening the base for treatment of alcohol problems*. Washington, DC: National Academy Press.

Keywords: American Society of Addiction Medicine (ASAM)

The American Society of Addiction Medicine (ASAM) system is built around criteria dimensions that are used to place patients in one of four levels of care originally presented in this Institute of Medicine (1990) report that described transitions in the alcoholism treatment field. The four levels of care are as follows: Level I (Outpatient treatment), Level II (Intensive outpatient and partial hospitalization treatment, Level III (Medically monitored inpatient residential treatment), and Level IV (Medically managed in-patient treatment).

Institute of Medicine. (2011). *The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding*. Washington, DC: National Academies Press.

Inter Organizational Practice Committee. (n.d.). *Evidence based neuropsychological care during the COVID-19 pandemic*. <https://iopc.online/teleneuropsychology>

The Inter Organizational Practice Committee (IOPC) is a coalition of representatives of all of the major national Neuropsychology organizations with advocacy expertise in the US. These include the American Academy of Clinical Neuropsychology (AACN/ American Board of Clinical Neuropsychology), Division 40 of the American Psychological Association (APA), the National Academy of Neuropsychology (NAN), the American Board of Professional Neuropsychology (ABN), the Cultural Neuropsychology Council (CNC), as well as the American Psychological Association Services (APAS). The IOPC is tasked with coordinating national neuropsychology advocacy efforts, and improving the practice climate for Neuropsychology. This multi-organizational structure allows for synergy in advocacy efforts, while retaining the individual organization's autonomy in determining the direction of their own organizational priorities. The IOPC represents approximately 8,000 neuropsychologists in the United States.

This site contains a Neuropsychology Toolkit and some practice tools related to report writing, electronic medical records, billing (e.g., PQRs and CPT). The IOPC has created two provisional recommendations and guidance position papers regarding the use of teleneuropsychology during the pandemic and models of care including teleneuropsychology during the pandemic:

IOPC recommendations/Guidance for Teleneuropsychology (TeleNP) in Response to the COVID-19 Pandemic

IOPC Guidance/Recommendation for Models of Care During the Novel Coronavirus Pandemic

Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice: 2016 update. <https://ipec.memberclicks.net/assets/2016-Update.pdf>

Irving, G., Neves, A. L., Dambha-Miller, H., Oishis, A., Tagashira, H., Verho, A., & Holden, J. (2017). International variations in primary care physician consultation time: A systematic review of 67 countries. *BMJ Open*, 7, e017902. doi:10.1136/bmjopen-2017-017902
This article is a systematic review of published and grey literature in English, Chinese, Japanese, Spanish, Portuguese and Russian languages from 1946 to 2016, for articles reporting on length of primary care physician consultations. One hundred and seventy nine studies were identified from 111 publications covering 28,570,712 consultations in 67 countries. Average consultation length differed across the world, ranging from 48 s in Bangladesh to 22.5 min in Sweden. The authors found that 18 countries representing about 50% of the global population spend 5 minutes or less with their primary care physicians. They also found significant associations between consultation length and healthcare spending per capita, admissions to hospital with ambulatory sensitive

conditions such as diabetes, primary care physician density, physician efficiency, and physician satisfaction. The authors conclude that a large proportion of the global population receives only a few minutes with their primary care physicians. Short consultation length is likely to adversely affect patient healthcare and physician workload and stress.

Ivey, A. E., & Ivey, M. B. (1998). Reframing DSM-IV: Positive strategies from developmental counseling and therapy. *Journal of Counseling & Development*, 76(3), 334–350.

Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2014). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (8th ed.). Belmont, CA: Brooks/Cole, Cengage Learning.

Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2018). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (9th ed.). Belmont, CA: Brooks/Cole, Cengage Learning.

Note: The print year is listed as 2016.

Jabr, F. (2012, January 30). By the numbers: Autism is not a math problem. *Scientific American*. <https://www.scientificamerican.com/article/autism-math-problem/>

Ferris Jabr, a contributing writer for *Scientific American*, provides a brief review of the mathematical reason that there are 2,027 ways to be diagnosed with autism in *DSM-IV* and only 11 ways in *DSM-5*. However, the numbers alone are misleading. The staff of *Scientific American* asked astronomer and Hubble Fellow Joshua Peek, Ph.D. (Doctoral degree in Astronomy, University of California, Berkeley) of Columbia University to code a computer program that would calculate the total possible ways to get a diagnosis of autistic disorder in *DSM-IV* and the total possible ways to get a diagnosis of autism spectrum disorder in *DSM-5*. It all comes down to factorials. The *DSM-IV* criteria are a set of 12 items in three groups from which a clinician must choose 6 criteria, with at least two items from group one and at least one item each from groups two and three. In contrast, the *DSM-5* criteria are a set of seven items in two groups from which one must choose five, including all three items in group one and at least two of the four items in group two. Peek's program reveals that there are 2027 different ways to be diagnosed with autism in *DSM-IV* and 11 ways to be diagnosed with autism in *DSM-5*. As Ferris Jabr points out, the numbers alone don't explain anything unless it is understood how common each symptom of autism is in the general population. Symptoms of autism are not randomly distributed throughout the population and the symptoms do not cluster together in random combinations. Some symptoms appear together much more often than others, which is one of the main reasons that the American Psychiatric Association consolidated the *DSM-IV* criteria for autism into fewer, denser and more accurate criteria

in the *DSM-5*. The idea is that the *DSM-IV* criteria allowed for too many possible combinations, many of which rarely occur; the *DSM-5* criteria, in contrast, better reflect the most common combinations of symptoms.

Jackson, S. E., Smith, L., Firth, J., Grabovac, I., Soysal, P., Koyanagi, A., Hu, L., Stubbs, B., Demurtas, J., Veronese, N., Zhu, X., & Yang, L. Is there a relationship between chocolate consumption and symptoms of depression? A cross-sectional survey of 13,626 US adults. *Depression and Anxiety*. 2019 Jul 29 [Epub ahead of print].10.1002/da.22950

Jackson et al. analyzed data obtained from 13,626 adults (≥ 20 years) who had participated in the National Health and Nutrition Examination Survey between 2007-08 and 2013-14. Daily chocolate consumption was derived from two 24-hour dietary recalls. Depressive symptoms were assessed using the Patient Health Questionnaire (PHQ-9), with scores above 10 indicating the presence of clinically relevant symptoms. Adults with diabetes were excluded and models controlled for relevant sociodemographic, lifestyle, health-related, and dietary covariates. Three consumer groups were identified (i.e., no chocolate, non-dark chocolate, dark chocolate). Overall, 11.1% of the population reported any chocolate consumption, with 1.4% reporting dark chocolate consumption. Analyses stratified by the amount of chocolate consumption showed participants reporting chocolate consumption in the highest quartile (104 to 454 grams per day) had 57% lower odds of depressive symptoms than those who reported no chocolate consumption) after adjusting for dark chocolate consumption).

Jacobson, E. (1929). *Progressive relaxation*. Chicago, IL: University of Chicago Press
Progressive relaxation was developed by Edmund Jacobson, M.D. and presented first in 1908 at Harvard University as a detailed procedure for reducing muscular tension.

Jacobson, E. (1938). *Progressive relaxation*. Chicago, IL: University of Chicago Press.

Jaeki, P. (2018, June 6). Sleepwalking is the result of a survival mechanism gone awry. <https://getpocket.com/explore/item/sleepwalking-is-the-result-of-a-survival-mechanism-gone-awry>

Jager, I., de Koning, P., Bost, T., Denys, D., & Vulink, N. (2020). Misophonia: Phenomenology, comorbidity and demographics in a large sample. *PloS One*, 15(4), 1–16. <https://doi.org/10.1371/journal.pone.0231390>
Keywords: Revised diagnostic criteria for misophonia, Hyperacusis

Jain, A., Marshall, J., Buikema, A., Bancroft, T., Kelly, J. P., & Newschaffer, C. J. (2015, April 21). Autism occurrence by MMR vaccine status among US children with older siblings with and without autism. *Journal of the American Medical Association*, 313(15), 1534–1540. doi: 10.1001/jama.2015.3077

Keywords: Autism, debunk, vaccines, vaccination, retract
Anjali Jain, Jaclyn Marshall, Ami Buikema, Tim Bancroft, Jonathan P. Kelly, and Craig J. Newschaffer report the results of a retrospective cohort study using an administrative claims database associated with a large commercial health plan. Research participants included children continuously enrolled in the health plan from birth to at least 5 years of age during 2001-2012 who also had an older sibling continuously enrolled for at least 6 months between 1997 and 2012. The children received the measles, mumps, and rubella (MMR) vaccine (0, 1, 2 doses) between birth and 5 years of age. Receiving the MMR vaccine was not associated with increased risk of Autism Spectrum Disorder (ASD), regardless of whether older siblings had ASD. The authors conclude that these findings indicate no harmful association between MMR vaccine receipt and ASD even among children already at higher risk for ASD. In summary, there are over 25 studies that disprove a connection between autism and the MMR vaccine.

James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). *The report of the 2015 U.S. transgender survey*. Washington, DC: National Center for Transgender Equality. <http://www.transequality.org/>

Jamison, K.R. (1997). *An unquiet mind*. New York, NY: Random House.

Jamieson, J. P., Nock, M. K., & Mendes, W. B. (2012, August). Mind over matter: reappraising arousal improves cardiovascular and cognitive responses to stress. *Journal of Experimental Psychology, General*, 141(3), 417–422. doi: 10.1037/a0025719. Epub 2011 Sep 26.

Jang, Y., Roh, S. & Chiriboga, D. A. (2014). The impact of acculturation on depressive symptoms: A comparison of older Korean Americans in two areas. *Asian American Journal of Psychology*, 5(3), 200–205.

Jarrett, C. (2017, December 17). 10 of the most famous animals in psychology. *The British Psychological Society Research Digest*. <https://digest.bps.org.uk/2017/12/21/10-of-the-most-famous-animals-in-psychology/>

Jarrett, C. (2019, November 22). *Trigger warnings don't help people cope with distressing material*. Aeon. <https://aeon.co/ideas/trigger-warnings-dont-help-people-cope-with-distressing-material>

Christian Jarrett cites studies that found that the only meaningful effect of trigger warnings was to increase people's belief in the sensitivity of others to upsetting material and in the need for warnings.

Jiang, M. (2020, April 22). *The reason Zoom calls drain your energy*. BBC.

<https://www.bbc.com/worklife/article/20200421-why-zoom-video-chats-are-so-exhausting?fbclid=IwAR0dgtikzO7wzL8pjCzLLASCTsSkRldKMJd1SYTxQs5oaRyH3T0tsP0NPcI>

Keywords: Zoom fatigue

Manyu Jiang offers some ideas on why video chat is more difficult and more draining than to face-to-face communication.

Johansen, M., Karterud, S., Pedersen, G., Gude, T., & Falkum, E. (2004). An investigation of the prototype validity of the borderline DSM-IV construct. *Acta Psychiatrica Scandinavica*, *109*, 289-298.

There are 256 ways to meet *DSM-IV-TR* criteria for Borderline Personality Disorder (Johansen et al., 2004). Given that *DSM-5* uses the same criteria, one can infer that there are also 256 ways to meet *DSM-5* criteria for Borderline Personality Disorder.

Johnson, R. N. (1972). *Aggression in man and animals*. Philadelphia, PA: Saunders.

Johnson, J. (Interviewer). (2018, November 22). Finding the lost world: Can scientists bring back dinosaurs? [Podcast]. <https://the1a.org/audio/#/shows/2018-11-22/finding-the-lost-world-can-scientists-bring-back-dinosaurs-rebroadcast/116157/@00:00>

Interview by Joshua Johnson, NPR journalist and host, with Adam Rutherford, Geneticist (and host on “Inside Science” on BBC Radio and author of *A Brief History of Everyone Who Ever Lived: The Human Story Retold Through Our Genes*, and Steve Brusatte, Paleontologist at University of Edinburgh and author of *The Rise and Fall of the Dinosaurs: The Untold Story of a Lost World*.

Johnson, J. B., & Joy, A. (2016, August 4). Mass shootings and the media contagion effect. [Symposium, Session 1246, Mile High Ballroom 4F Level 3, Ballroom Level]. Paper presented at 2016 APA Annual Convention, Colorado Convention Center, Denver, CO. Jennifer B. Johnson, Ph.D. and Andrew Joy, B.S., both from Western New Mexico University, discuss how the prevalence of these crimes has risen in relation to the mass media coverage of them and the proliferation of social media sites that tend to glorify the shooters and downplay the victims. According to Dr. Johnson, “We suggest that the media cry to cling to ‘the public’s right to know’ covers up a greedier agenda to keep eyeballs glued to screens, since they know that frightening homicides are their No. 1 ratings and advertising boosters.” The demographic profile of mass shooters is fairly consistent. Most are white, ostensibly heterosexual males, largely between the ages of 20 and 50. They tend to see themselves as “victims of injustice,” and share a belief that they have been cheated out of their rightful dominant place as white, middle class males.

Johnson, E., & Kumfor, F. (2018). Overcoming apathy in frontotemporal dementia: Challenges and future directions. *Current Opinion in Behavioral Sciences*, 22, 82–89.

<https://doi.org/10.1016/j.cobeha.2018.01.022>

Apathy presents differently depending on different patterns of brain atrophy, and it emerges earlier and more severely in behavioural-variant frontotemporal dementia than in semantic dementia or progressive nonfluent aphasia. Apathy affects over 90% of people with the behavioral variant frontotemporal dementia. The underlying neuropathology may involve disruption to frontal-striatal regions of the brain. Although apathy was traditionally considered a unidimensional construct, Johnson and Kumfor describe apathy as multidimensional, with affective, behavioural, and cognitive subdomains.

Joiner, T. E. (2005). *Why people die by suicide*. Cambridge, MA: Harvard University Press.

Joiner, T. E. (2010). *Myths about suicide*. Cambridge, MA: Harvard University Press.

Jones, K. (2020, June 1). *How can we win* [Video]. YouTube. David Jones Media.

https://www.youtube.com/watch?v=sb9_qGOa9Go

On Saturday May 30th filmmaker and photographer David Jones of David Jones Media felt compelled to go out and serve the community in some way. He decided to use his art to try and explain the events that were currently impacting our lives. On day two, Sunday the 31st, he activated his dear friend author Kimberly Jones to tag along and conduct interviews. During a moment of downtime he captured these powerful words from her and felt the world couldn't wait for the full length documentary, they needed to hear them now.

Jones, K. D. (2012). Dimensional and cross-cutting assessment in the DSM-5. *Journal of Counseling & Development*, 90(4), 481–487.

Jones, S. L., & Butman, R. E. (2011). *Modern psychotherapies: A comprehensive Christian appraisal* (2nd ed.). Downers Grove, IL: InterVarsity Press.

Jongsma, A. E., Jr., Peterson, L. M., & Bruce, T. J. (2014). *The complete adult psychotherapy treatment planner* (5th ed.). New York, NY: John Wiley & Sons.

Jongsma, A. E., Jr., Peterson, L. M., McInnis, W. P., Bruce, T. J. (2014, January 28). *The adolescent psychotherapy treatment planner: Includes DSM-5 updates* (5th ed.). New York, NY: John Wiley & Sons.

Jongsma, A. E., Peterson, L. M. & Bruce, T. J. (2006). *The complete adult psychotherapy treatment planner* (4th ed.). New York: John Wiley & Sons.

Jongsma, A. E., Peterson, L. M., & McInnis, W. P. (1998). *The complete adult psychotherapy treatment planner*, (2nd ed). New York: John Wiley & Sons.

Jongsma, A. E. & Peterson, L. M. (1995). *The complete psychotherapy treatment planner*. New York: John Wiley & Sons.

Kafka, M. P. (2010). Hypersexual disorder: A proposed diagnosis for DSM-V. *Archives of Sexual Behavior*, 39, 377–400. doi 10.1007/s10508-009-9574.

Kaminski, J., Waller, B. M., Diogo, R., Hartsone-Rose, A., & Burrows, A. M. (2019, June 17). Evolution of facial muscle anatomy in dogs. *Proceedings of the National Academy of Science*. NAS first published June 17, 2019 <https://doi.org/10.1073/pnas.1820653116>
Abstract Summary: Domestication shaped wolves into dogs and transformed both their behavior and their anatomy. Juliane Kaminski et al. show that, in only 33,000 years, domestication transformed the facial muscle anatomy of dogs specifically for facial communication with humans. Based on dissections of dog and wolf heads, the authors show that the levator anguli oculi medialis, a muscle responsible for raising the inner eyebrow intensely, is uniformly present in dogs but not in wolves. Behavioral data, collected from dogs and wolves, show that dogs produce the eyebrow movement significantly more often and with higher intensity than wolves do, with highest-intensity movements produced exclusively by dogs. Interestingly, this movement increases paedomorphism and resembles an expression that humans produce when sad, so its production in dogs may trigger a nurturing response in humans. Kaminski et al. hypothesize that dogs with expressive eyebrows had a selection advantage and that “puppy dog eyes” are the result of selection based on humans’ preferences. This study was conducted at the Centre for Comparative and Evolutionary Psychology, Department of Psychology, University of Portsmouth, Portsmouth, United Kingdom.

Kanner, L. (1943). Autistic disturbances of affective contact. *Nervous Child*, 2, 217–250.

Kaplan, Robert M. (2020, June 25). Alois Maria Ott: I was Hitler’s psychologist. *Psychiatric Times*. <https://www.psychiatristimes.com/view/aloes-maria-ott-i-was-hitler-s-psychologist?eKey=d2RvdmVyc3Bpa2VAZW1venkuZWR1>
Robert Kaplan reviews several sources and provides a fascinating discussion of the 1990 revelation that Adolf Hitler had been treated by a psychologist at Landsberg Prison in 1924, with a positive response to treatment. Alois Maria Ott, the prison “teacher,” was responsible for the rehabilitation at this facility. At the age of 98, Ott first disclosed his involvement with Hitler. There were reports that Ott was going to write a book about his experiences, but he has not published anything on the subject. A devout Catholic, Ott was a firm believer in the power of goodwill and he was reported to have a nonjudgemental approach to his patients in the prison.

Karanzalis, L. (n.d.). *Executive functioning: Brain functioning for those with executive functioning skills deficits*. ADDvantages Learning Center. <https://addvantageslearningcenter.com/executive-functioning/>

Keywords: ADHD, autism, neurodiversity

Linda Karanzalis, MS, is a former special education classroom teacher with over 25 years of experience in the areas of learning disabilities, ADHD, social-emotional learning, social skills training, and behavior management. She has offices in Cherry Hill and Ventnor City, New Jersey.

Kardiner, A. (1941). *The traumatic neuroses of war*. Washington, DC: National Research Council.

Karjala, L. M. (2007). *Understanding trauma and dissociation: A guide for therapists, patients, and loved ones*. Atlanta, GA: ThomasMax Publishing.

Karjala, L. M. (2017). *Healing everyday traumas: Free yourself from the scars of bullying, criticism, and rejection*. Roswell, GA: Psychology Innovations.

Karjala, L. M. (2022). *Healing everyday traumas: Free yourself from the scars of bullying, criticism, and rejection* (2nd ed.) Roswell, GA: Psychology Innovations.

Kaste, M. (2015, July 27). The ‘shock of confinement’: The grim reality of suicide in jail. *NPR*. <https://www.npr.org/2015/07/27/426742309/the-shock-of-confinement-the-grim-reality-of-suicide-in-jail>.

NPR journalist Martin Kaste cites Department of Justice data and provides an opinion on why suicide rates in jails are generally higher than those in prisons. In contrast to suicide rates in prisons (16 per 100,000) and in the general population (13 per 100,000), the higher suicide rates in jails (40 per 100,000) is attributed to “the shock of confinement” experienced by those in jail, because many of those incarcerated have never been in serious legal trouble before.

Kaufman, J., Gelernter, J., Hudziak, J., Tyrka, A. R., & Coplan, J. D. (2015, August). The Research Domain Criteria (RDoC) Project and studies of risk and resilience in maltreated children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 54(8), 617–625. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4515569/>

The Research Domain Criteria (RDoC) project was initiated to develop, for research purposes, new ways of classifying mental disorders based on dimensions of observable behavior and neurobiological measures.

Kay, T. (1990). *To dance with the white dog: A novel of life, loss, mystery, and hope*. Atlanta, GA: Peachtree Publishers.

Keck, P. E., Pope, H. G., Hudson, J. I., McElroy, S. L., & Kulick, A. R. (1988, February).

Lycanthropy: Alive and well in the twentieth century. *Psychological Medicine*, 18(1), 113–120. <https://doi.org/10.1017/S003329170000194X>

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

A study of lycanthropy from the McLean Hospital reported on a series of cases and proposed some diagnostic criteria by which lycanthropy could be recognized: (1) A patient reports in a moment of lucidity or reminiscence that they sometimes feel as an animal or have felt like one. (2) A patient behaves in a manner that resembles animal behavior, for example howling, growling, or crawling. Keck et al. note that, although the condition seems to be an expression of psychosis, there is no specific diagnosis of mental or neurological illness associated with its behavioral consequences.

Kiesler, D. J. (1966). Some myths of psychotherapy research and the search for a paradigm.

Psychological Bulletin, 65, 100–136.

Donald Kiesler, Ph.D. (1933-2007) was the author of an article (one of twelve “classic articles” in the field of clinical psychology) that identified the *patient uniformity myth*, an idea that forever changed how psychotherapy research was conducted. Kiesler was a great clinical training director when I was in school, and many of us doctoral students were glad that earlier in his life he decided to become a psychologist rather than remaining in seminary to become a Roman Catholic priest.

Kiesler, D. J. (1979). An interpersonal communication analysis of relationship in psychotherapy.

Psychiatry, 42, 299–311.

Kiesler, D. J. (1988). *Therapeutic metacommunication: Therapist impact disclosure as feedback in psychotherapy*. Palo Alto, CA: Consulting Psychologists Press.

Kim, M. J., Brown, A. C., Mattek, A. M., Chavez, S. J., Taylor, J. M., Palmer, A. L., Wu, Y-C, & Whalen, P. J. (2016, November 16). The inverse relationship between the microstructural variability of amygdala-prefrontal pathways and trait anxiety is moderated by sex. *Frontiers in Systems Neuroscience*, 16, 93.

<https://doi.org/10.3389/fnsys.2016.00093>

Keywords: amygdala hijacking, emotional regulation, emotional dysregulation

M. Justin Kim and colleagues have conducted neuroimaging studies that demonstrated an inverse relationship between the amygdala and the prefrontal cortex. In other words, when the amygdala is activated, the prefrontal cortex is less activated. This relationship may be a significant contributor to trait anxiety. When emotions run high, the blood and oxygen flow to the amygdala rather than the prefrontal cortex, reducing one’s ability to think and solve problems. Kim et al. (2016) also found a moderating effect of sex (i.e., gender) was found, demonstrating that the observed brain-anxiety relationship was stronger in females than in males.

- Keller, A., Litzelman, K., Wisk, L. E., Maddox, T., Cheng, E. R., Creswell, P. D., & Witt, W. P. (2012, September). Does the perception that stress affects health matter? The association with health and morality. *Health Psychology, 31*(5) 677–684. doi: 10.1037/a0026743. Epub 2011 Dec 26.
- Keller, M. B., McCullough, J. P., Klein, D. N., Arnow, B. A., Rush, A. J., Nemeroff, C. B., Ninan, P. T., Kocsis, J. H., Schatzberg, A., Thase, M. E., Miller, V., Keitner, G., & Markowitz, J. C. (2000). A comparison of nefazadone, the Cognitive Behavioral Analysis System of Psychotherapy and their combination for the treatment of chronic depression. *New England Journal of Medicine, 322*, 1462–1470.
- Kendler, K. S., Muñoz, R. A., & Murphy, G. (2009). The development of the Feighner criteria: A historical perspective. *American Journal of Psychiatry, 167*, 134–142.
This article provides a history of the Feighner criteria, which were the predecessors of the research diagnostic criteria (RDC) that were used by Robert Spitzer, M.D. in the development of the DSM-III (APA, 1980) diagnostic criteria.
- Kendler, K. S., Myers, J., & Zisook, S. (2008). Does bereavement-related major depression differ from major depression associated with other stressful life events? *American Journal of Psychiatry, 165*(11), 1449–1455.
Based on their study of a range of validators in a large-population-based sample of twins, the authors evaluated whether cases of bereavement-related depression that also met DSM criteria for “normal grief” were qualitatively distinct from other depressive cases. The similarities between bereavement-related depression and depression related to other stressful life events substantially outweigh their differences. The authors question the validity of the bereavement exclusion for the diagnosis of major depression.
- Keo-Meier, C., & Ehrensaft, D. (2018). *The gender affirmative model: An interdisciplinary approach to supporting transgender and gender expansive children*. Washington, DC: American Psychological Association.
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<https://doi.org/10.1080/109267712013.813883>
- Kershaw I. (2010). *Hitler 1889–1936: Hubris*. New York, NY: Penguin Books.
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Kessing, L. F., Vradi, E., & Anderson, P. K. (2017). Starting lithium prophylaxis early v. late in bipolar disorder. *British Journal of Psychiatry*, 205, 214–220.

Keywords: neuroprotective effects of lithium in bipolar disorder

The long-term neuroprotective effects of lithium seem to be greatest when lithium is started early in the course of the illness.

Kessler, D. (2019, November 5). *Finding meaning: The sixth stage of grief*. New York, NY: Scribner.

In 1969, Elisabeth Kübler Ross first identified the stages of dying in her transformative book *On Death and Dying*. Decades later, she and David Kessler wrote the classic *On Grief and Grieving*, which introduced the stages of grief with the same transformative pragmatism and compassion. In *Finding Meaning*, Kessler describes how many people look for “closure” after a loss. Kessler maintains that finding meaning beyond the stages of grief (i.e., denial, anger, bargaining, depression, and acceptance) can transform grief into a more peaceful and hopeful experience. Kessler provides a roadmap to remembering those who have died with more love than pain.

Kessler, R. C., McGonagle, K. A., Zhao, S., Nelson, C. B., Hughes, M., Eshleman, S., Wittchen, H., U., & Kendler, K. S. (1994, January). Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States. Results from the National Comorbidity Survey. *Archives of General Psychiatry*, 51(1), 8–19.

Kessler, R. C., Sonnega, A., Bromet, E., Hughes, M., & Nelson, C. B. (1995, December). Posttraumatic stress disorder in the National Comorbidity Survey. *Archives of General Psychiatry*, 52(12), 1048–1060.

Kessler, R. C., Chiu, W. T., Demler, O., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of 12-month DSM-IV Disorders in the National Comorbidity Survey Replication. *Achieves of General Psychiatry*, 62(6), 617–627.

KHN Morning Briefing. (2021, March 16). *OxyContin settlement grows to \$4.28B*.

<https://khn.org/morning-breakout/oxycontin-settlement-grows-to-4-28b/>

Keywords: Opioid epidemic

Kaiser Health News (KHN) Morning Briefing provides summaries of health policy coverage from major news organizations.

King, J. H. (2013, August). Understanding and using the DSM-5. *Counseling Today*, 56(2), 18–20.

King, J. H. (2013, December). Body dysmorphic disorder and teens. *Counseling Today*, 56(6), 12–13.

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- King, J. H. (2013, October). Assessment and diagnosis of PTSD and skin-picking disorder. *Counseling Today*, 56(4), 20–22.
- King, J. H. (2013, September). Assessment and diagnosis of autistic spectrum disorder. *Counseling Today*, 56(3), 18–20.
- King, J. H. (2014, April). Assessment and diagnosis of feeding, eating, and elimination disorders. *Counseling Today*, 56(10), 12–15.
- King, J. H. (2014, August). Assessment and diagnosis of depressive disorders and bereavement disorders. *Counseling Today*, 57(2), 12–15.
- King, J. H. (2014, December). Assessment and diagnosis of neurodevelopmental disorders. *Counseling Today*, 57(6), 12–15.
- King, J. H. (2014, February). Assessment and diagnosis of sexual and gender-related disorders. *Counseling Today*, 56(8), 12–13.
- King, J. H. (2014, January). Assessment and diagnosis of schizophrenia spectrum disorders. *Counseling Today*, 56(7), 12–14.
- King, J. H. (2014, July). Assessment and diagnosis of dissociative and trauma- and stressor-related disorders. *Counseling Today*, 57(1), 12–15.
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- King, J. H. (2014, March). Assessment and diagnosis of sleep-wake cycle disorder. *Counseling Today*, 56(9), 12–15.
- King, J. H. (2014, May). Assessment and diagnosis of psychotic and bipolar-related disorders. *Counseling Today*, 56(11), 12–15.

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- Kingsbury, S. J. (1987). Cognitive differences between clinical psychologists and psychiatrists. *American Psychologist*, 42, 152–156.
- Kleinman, A. (2013, May 4). *Porn sites get more visitors each month than Netflix, Amazon, and Twitter combined* [Updated December 06, 2017]. Huffpost. http://www.huffingtonpost.com/2013/05/03/internet-porn-stats_n_3187682.html
Alexis Kleinman's article was updated on December 06, 2017.
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- Klooster, D., Knutson, D., & Matsuno, E. (2023). Affirmative sexual health care for transgender & nonbinary youth: Toward a sex-positive approach. *Journal of Health Service Psychology*, 49(1), 1–9.
- Knapp, S., Gottlieb, M., & Handelsman, M. (2021, August 2). My patient may be placing others at risk of contracting COVID-19: What should I do? *National Psychologist*.

<https://nationalpsychologist.com/2021/08/my-patient-may-be-placing-others-at-risk-of-contracting-covid-19-what-should-i-do/1014719.html>

Keywords: COVID-19, Coronavirus, Duty to protect

Samuel Knapp, Ed.D., ABPP, Michael Gottlieb, Ph.D., ABPP and Mitchell Handelsman, Ph.D. address this question: “What do we do about a client who is a health care provider who may well be infected, but insists on going to work and tells you so?” Samuel Knapp, Ed.D., ABPP, is the director of professional affairs for the Pennsylvania Psychological Association and has written extensively on ethics, ethical decision-making and suicide prevention. Michael C. Gottlieb, Ph.D., ABPP, is a forensic and family psychologist in independent practice in Dallas, Texas, and a clinical professor at the University of Texas Southwestern Medical Center in Dallas. His interests include ethical decision-making and the psychology-law interface. Mitchell M. Handelsman, Ph.D., is a professor of psychology and a CU Presidents Teaching Scholar at the University of Colorado Denver. He has published widely in the areas of teaching and professional ethics.

Knoll, J. L., IV. (2019, March). Duty of care and informed consent. *Psychiatric Times*, 36(3), 4–5.

Dr. James Knoll, a psychiatrist, discusses liability implications of neuroleptic malignant syndrome (NMS), as well as other clinical and legal aspects of informed consent with psychiatric patients. There is also an analysis and commentary related to the U.S. Supreme Court’s decision in *Zinermon v. Burch* (1990). Dr. Knoll is Director of Forensic Psychiatry and Professor of Psychiatry, SUNY Upstate Medical University, Syracuse, NY.

Koek, R. J. (2017, November). Treatment-resistant PTSD. *Psychiatric Times*, 34(11), 18–19.

<http://www.psychiatrictimes.com/>

Kohn, D. (2015, June 24). *When gut bacteria change brain function*. The Atlantic.

<https://www.theatlantic.com/health/archive/2015/06/gut-bacteria-on-the-brain/395918/>

The author reviews evidence of the gut-brain axis and how gut bacteria can influence or contribute to anxiety, depression, and even neurodevelopmental disorders such as autism. Two bacteria, *lactobacillus* and *bifidobacterium*, reduce anxiety-like behavior in mice. Humans also carry strains of these bacteria in their guts.

Konorski, J., & Miller, M. (1937). On two types of conditioned reflex. *Journal of General Psychology*, 16, 264–272.

The authors discuss Type 1 and Type 2 conditioning and address Skinner’s (1935) article.

Korb, D. (2015). *The upward spiral: Using neuroscience to reverse the course of depression, one small change at a time*. Oakland, CA: New Harbinger Publications.

There is some evidence that looking at babies, puppies, and cute animals may stimulate prefrontal cortex and may be associated with increased happiness, performance, attention, and reduce stress (which, in turn, may improve learning).

Kopelow, L. E. (1976, April). A review of major implications of the O'Connor v. Donaldson decision. *American Journal of Psychiatry*, 133(4), 379–383.

Kral, T. R. A., Schuyler, B. S., Mumford, J. A., Rosenkranz, M. A., Lutz, A., & Davidson, R. J. (2018). Impact of short- and long-term mindfulness meditation training on amygdala reactivity to emotional stimuli. *NeuroImage*, 181, 301–313.

<https://doi.org/10.1016/j.neuroimage.2018.07.013>

Keywords: amygdala hijacking, emotional regulation, emotional dysregulation
Tammi Kral and colleagues evaluated the impact of long- and short-term mindfulness meditation training on the amygdala response to emotional pictures in a healthy, non-clinical population of adults using blood-oxygen level dependent functional magnetic resonance imaging. Long-term meditators (N = 30, 16 females, 14 males) had 9,081 hours of lifetime practice on average, primarily in mindfulness meditation. Short-term training consisted of an 8-week Mindfulness-Based Stress Reduction (MBSR) course (N = 32, 22 females, 10 males), which was compared to an active control condition (N = 35, 19 females, 16 males) in a randomized controlled trial. Meditation training was associated with less amygdala reactivity to positive pictures relative to controls, but there were no group differences in response to negative pictures. Kral et al. speculated that reductions in reactivity to negative stimuli may require more practice experience or concentrated practice, as hours of retreat practice in long-term meditators was associated with lower amygdala reactivity to negative pictures – yet Kral and colleagues did not see this relationship for practice time with MBSR. Compared to the control group, short-term training also led to increased functional connectivity between the amygdala and a region implicated in emotion regulation – ventromedial prefrontal cortex (VMPFC) – during affective pictures. Kral and associates conclude that meditation training may improve affective responding through reduced amygdala reactivity, and heightened amygdala–VMPFC connectivity during affective stimuli may reflect a potential mechanism by which MBSR exerts salutary effects on emotion regulation ability.

Krebs, C. C. (2020, March 19). Memorandum on identification of essential critical infrastructure workers during COVID-19 response.

https://www.cisa.gov/sites/default/files/publications/CISA_Guidance_on_the_Essential_Critical_Infrastructure_Workforce_508C_0.pdf

Keywords: COVID-10, Coronavirus

Christopher C. Krebs, Director, Cybersecurity and Infrastructure Security Agency (CISA), issued this statement in response to U.S. President Donald Trump's March 16th updated Coronavirus Guidance for America. This guidance states that: "If you work in a

critical infrastructure industry, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule.” See also United States Department of Homeland Security (2020).

Krishna, S. (2019, December). Sexting: The technological evolution of the sexual revolution. *Psychiatric Times*, 36(12), 24–25.

Kroeger, C. C. & Evans, M. J. (2009). *The women’s study Bible: New Living Translation* (2nd ed.). New York, NY: Oxford University Press. ISBN 978-0-19-529125-4

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

Catherine Clark Kroeger has written that several parts of the Bible refer to King Nebuchadnezzar’s behavior in the book of Daniel 4 as a being manifestation of clinical lycanthropy.

Kruijver, F. P. M., Zhou, J. N., Pool, C. W., Hofman, M. A., Gooren, L. J. G., & Swaab, D. F. Male-to-female transsexuals have female neuron numbers in a limbic nucleus (2000). *Journal of Clinical Endocrinology and Metabolism*, 85(5), 2034–2041.

Kuchera, B. (2017, December 14). *Loot boxes are the video game issue of the year*. Polygon. <https://www.polygon.com/2017-best-games/2017/12/14/16772900/loot-boxes-loot-crates-2017>

Keywords: Gaming disorder

Kuntz, L. (2021, April 1). Biden administration plan tackles drug addiction crisis. *Psychiatric Times*. <https://www.psychiatristimes.com/view/biden-administration-plan-narrows-in-on-drug-addiction-crisis?>

Psychiatric Times staff writer Leah Kuntz provides a summary of the Biden administration’s seven priorities: (1) Expanding access to evidence-based treatment, (2) advancing racial equity in our approach to drug policy, (3) enhancing evidence-based harm reduction efforts, (4) supporting evidence-based prevention efforts to reduce youth substance use, (5) reducing the supply of illicit substances, (6) advancing recovery-ready workplaces and expanding the addiction workforce, and (7) expanding access to recovery support services.

Kupfer, D. J., First, M. B., & Reiger, D. A. (2002). *A research agenda for DSM-V*. Arlington, VA: American Psychiatric Association.

LaChance, L. R., & Ramsey, D. (2018). Antidepressant foods: An evidence-based nutrient profiling system for depression. *World Journal of Psychiatry*, 8(3), 97104. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6147775/>

The authors outline an Antidepressant Food Scale that lists 12 antidepressant nutrients linked to the prevention and treatment of depression: Folate, iron, long-chain omega-3 fatty acids (EPA and DHA), magnesium, potassium, selenium, thiamine, vitamin A, vitamin B6, vitamin B12, vitamin C, and zinc. On the Antidepressant Food Score (AFS), the highest scoring foods were bivalves such as oysters and mussels, various seafoods, and organ meats for animal foods. The highest scoring plant foods were leafy greens, lettuces, peppers, and cruciferous vegetables.

Lambert, M. J. (1992). Psychotherapy outcome research: Implications for integrative and eclectic therapists. In J. C. Norcross & M. R. Goldfried (Eds.), *Handbook of psychotherapy integration*. New York, NY: Basic Books.

Lambert, M. J. (2005). Implications of outcome research for psychotherapy integration. In J. C. Norcross & M. R. Goldfried (Eds.), M. R., *Handbook of Psychotherapy Integration* (pp. 94–129). New York, NY: Oxford University Press.

Lambert, M. J., & Bergin, A. E. (1994). The effectiveness of psychotherapy. In A. E. Bergin & S. L. Garfield (Eds.), *Handbook of psychotherapy and behavioral change: An empirical analysis* (pp. 143–184). New York, NY: John Wiley.

Lange, K. W., Hauser, J., Lange, K. M., Makulska-Gertruda, E., Nakamura, Y., Reissmann, A., Sakaue, Y., Takano, T., & Takeuchi, Y. (2017, February). The role of nutritional supplements in the treatment of ADHD: What the evidence says. *Current Psychiatry Reports*, 19(2), 8. doi: 10.1007/s11920-017-0762-1

The authors discuss how evaluation of therapeutic nutritional long-chain polyunsaturated fatty acids (LC-PUFAs) supplementation in ADHD has shown mixed and inconclusive results and at best marginal beneficial effects. The benefits of PUFAs are much smaller than the effect sizes observed for traditional pharmacological treatments of ADHD. The effectiveness of LC-PUFA supplements in reducing medication dosage has been suggested but needs to be confirmed. The authors suggest that zinc, iron, and magnesium supplementation may reduce ADHD symptoms in children with or at high risk of deficiencies in these minerals. The authors caution, however, that convincing evidence in this regard is still lacking.

Lange, K. W., Reichl, S., Lange, K. M., Tucha, L., Tucha, O. (2010, November 30). The history of attention deficit hyperactivity disorder. *Attention Deficit Hyperactivity Disorder*, 2(4), 241–255. doi: 10.1007/s12402-010-0045-8

Lankford, A., & Madfis, E. (2018, February 1). Don't name them, don't show them, but report everything else: A pragmatic proposal for denying mass killers the attention they seek and deterring future offenders. *American Behavioral Scientist*, 62(2), 260-279. [Article

first published online: September 5, 2017; Issue published: February 1, 2018.]

<https://doi.org/10.1177/0002764217730854>

Media contagion effect

Abstract: Prior research has shown that many mass shooters have explicitly admitted they want fame and have directly reached out to media organizations to get it. These fame-seeking offenders are particularly dangerous because they kill and wound significantly more victims than other active shooters, they often compete for attention by attempting to maximize victim fatalities, and they can inspire contagion and copycat effects. However, if the media changes how they cover mass shooters, they may be able to deny many offenders the attention they seek and deter some future perpetrators from attacking. We propose that media organizations should no longer publish the names or photos of mass shooters (except during ongoing searches for escaped suspects), but report everything else about these crimes in as much detail as desired. In this article, we (1) review the consequences of media coverage of mass shooters, (2) outline our proposal, (3) show that its implementation is realistic and has precedent, (4) discuss anticipated challenges, and (5) recommend future steps for consensus building and implementation. Adam Lankford, Ph.D. is an associate professor of criminology and criminal justice at The University of Alabama. Eric Madfis, Ph.D. is an associate professor of criminal justice at The University of Washington Tacoma.

Lampert, V. (2020, September 24). *Exorcism: The battle against Satan and his demons.*

Steubenville, OH: Emmaus Road Publishing

Fr. Vincent Lampert was appointed senior exorcist by Indianapolis Archbishop Daniel M. Bluechlein in 2005, at which time there were only 12 priests in the U.S. who were exorcists (in contrast to 125 in 2001 according to Catholic News Services). In this book, Fr. Lampert explains how the Church selects and trains priests for the ministry of exorcism, why it is vital for Catholics to live a vibrant life of faith, and how to fend off spiritual attack and build a stronger relationship with God.

Larsen, Randy J., & Buss, David M. (2002). *Personality psychology: Domains of knowledge about human nature.* New York, NY: McGraw-Hill.

Lavine, J.S., Bjornstad, O. N., & Antla, R. (2021, January 12). Immunological characteristics govern the transition of COVID-19 to endemicity. *Science*. First release January 12, 2021.

<https://science.sciencemag.org/content/sci/early/2021/01/11/science.abe6522.full.pdf>

Keywords: COVID-19, Coronavirus

Jennie Lavine, Ph.D. (Department of Biology, Emory University) and colleagues discuss the question of how CoV-2 severity may change in future years. Their analysis of immunological and epidemiological data shows that infection-blocking immunity wanes rapidly, whereas disease-reducing immunity is long-lived. The authors suggest that once the endemic phase of CoV-2 is reached and the primary exposure is in childhood, the

CoV-2 virus may be no more virulent than the common cold. Also see Adam (2021) “SARS-CoV-2 Isn’t Going Away, Experts Predict.”

Lazarus, A. A. (1981). *The practice of multimodal therapy*. New York, NY: McGraw-Hill.

Leahy, R. L., Holland, S. J. F., & McGinn, L. K. (2012). *Treatment plans and interventions for depression and anxiety disorders*. New York, NY: Guilford Press.

Robert L. Leahy, Ph.D., Stephen J. F. Holland, Psy.D., and Lata K. McGinn, Ph.D. provide basic information on depression and the six major anxiety disorders; step-by-step instructions for evidence-based assessment and intervention; illustrative case examples; and practical guidance for writing reports and dealing with third-party payers. The book includes 74 reproducible client handouts, homework sheets, and therapist forms for assessment and record keeping. Also included is a CD-ROM that enables clinicians to develop individualized treatment plans, print extra copies of the forms, and find information on frequently prescribed medications.

LeGare, J. (2017, December 2017). Autism-vaccine link debunked. Mayo Clinic Health System. <https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/autism-vaccine-link-debunked>

Keywords: Autism, debunk, vaccines, vaccination, retract

Jennifer LeGare, a nurse practitioner in Pediatrics and Adolescent Medicine in Eau Claire, Wisconsin. In this article, she provides a brief synopsis of how a small study in 1998 by UK physician Andrew Wakefield, who reported a link between vaccinations and autism spectrum disorder, underwent further inspection and was eventually retracted. Wakefield’s medical license was revoked due to falsified information in the study. This article Since the time of Wakefield's retracted article, there have been over 25 studies that disprove a connection between autism and the measles, mumps, and rubella (MMR) vaccine (see Jain et al., 2015).

Les, J. (2020, July 27). A psychological exploration of Zoom fatigue. *Psychiatric Times*. <https://www.psychiatrytimes.com/view/psychological-exploration-zoom-fatigue?eKey=d2RvdmVyc3Bpa2VAZW1vcnkuZWR1>

Keywords: Zoom fatigue

Jena Lee, M.D. provides a discussion of a phenomena that affects more than 300 million daily participants of Zoom. Causal factors include millisecond delays in virtual verbal responses, which negatively affect our interpersonal perceptions. Cognitive factors may include the increased ability to virtually multitask during Zoom meetings, which threatens the user’s attentional capacity. Lack of direct mutual gaze may be a factor, given that eye contact improves connection—faster responses, more memorization of faces, and increased likeability and attractiveness. In contrast, gaze during video conferences must be directed at the camera to appear as if one is making eye contact with

an observer. As a result, during video conferences with three or more people, it can be impossible to distinguish mutual gaze between any two people. Lack of nonverbal cues may also be a factor contributing to fatigue. Nonverbal cues are not only used to acquire information about others, but are also directly used to prepare an adaptive response and engage in reciprocal communication, all in a matter of milliseconds. By contrast, most cues in video conferences are difficult to visualize, since the same environment is not shared (limiting joint attention) and both subtle facial expressions and full bodily gestures may not be captured. Without the help of these unconscious cues on which we have relied since infancy to socioemotionally assess each other and bond, compensatory cognitive and emotional effort is required. In addition, this increased cost competes for people's attention with acutely elevated distractions such as multitasking, the home environment (e.g., family, lack of privacy), and their mirror image on the screen. Overall, videoconferences can be associated with low reward and high cost.

Lea, T. (1944). Marines call it that 2,000 yard stare. *Life Magazine*.

In 1944, *Life Magazine* published the painting titled "Marines Call It That 2,000 Yard Stare," by World War II artist Tom Lea.

Lee, Y. H., Cherkerzian, S., Seidman, L. J., et al. (2019, October 4). Maternal bacterial infection during pregnancy and offspring risk of psychotic disorders: variation by severity of infection and offspring sex. *American Journal of Psychiatry*. October 4, 2019; Epub ahead of print.

Lee and colleagues investigated the association between maternal bacterial infections during pregnancy and psychosis risk. They considered 16,188 live births enrolled between 1959 and 1966 at the Boston and Providence sites of the Collaborative Perinatal project, currently known as the New England Family Study. Parents and offspring (who are now in their 50s) with psychotic disorders were identified. A total of 15,421 participants were included in the final analytic sample. Lee and colleagues identified 3% multisystemic and 21% localized infections among the mothers during pregnancy. Localized infections included vaginitis, urinary tract infections, pneumonia, syphilis, gonorrhea, and tuberculosis. Psychotic disorders were 3-fold more likely to develop in males after maternal infection, whereas there was no difference in females. The authors concluded that maternal bacterial infection during pregnancy was significantly associated with the development of schizophrenia and related psychoses among offspring, with stronger effects for multisystemic than localized infections, especially in males.

Leibenluft, E. (2011). Severe mood dysregulation, irritability, and the diagnostic boundaries of Bipolar Disorder in youths. *American Journal of Psychiatry*, 168(2), 129–142.

Leiter, M. P., & Maslach, C. (2017) Latent burnout profiles: A new approach to understanding the burnout experience. *Burnout Research*, 3(4) 89–100.

<https://doi.org/10.1016/j.burn.2016.09.001>

Burnout profile must meet all three dimensions: Exhaustion, Cynicism, and Professional inefficacy. Six areas of work-life mismatches are “drivers” of burnout: Workload, Control, Reward, Community, Fairness, and Values.

Leon-Sarmiento, F. E., Paez, E., & Hallet, M. (2013, February). Nature and nurture in stuttering: A systematic review on the case of Moses. *Neurological Sciences: Official Journal of the Italian Neurological Society and of the Italian Society of Clinical Neurophysiology*, 34(2), 231–237. doi: 10.1007/s10072-012-0984-2. Epub 2012 Mar 6.

Fidias E. Leon-Sarmiento, Edwin Paez, and Mark Hallet describe the genetic and environmental correlated of stuttering. The authors describe how Moses used at least two “sensory trick” strategies that would help to modulate his speech motor program abnormalities. The first “trick” was the “rod of God” prescribed by God himself and emphasized in several passages of the Bible including Exodus 4:17 and Numbers 20:9. The second “trick” used by Moses was singing, a method used for enhancing speech fluency in stutterers. It is noteworthy that the first time that the verb “sing” is conjugated in the Bible is in Exodus 15:1 when Moses sang. Later, Deuteronomy 31:30 and 32:44 stated that Moses sang a song in front of the crowd, without displaying any language abnormality. Moses is also credited with being the author of Psalm 91, which is one of the most famous songs of the Bible.

Lester, R., & Petrie, T. A. (1998). Prevalence of disordered eating behaviors and bulimia nervosa in a sample of Mexican American female college students. *Journal of Multicultural Counseling & Development*, 26(3), 157–165.

Levenson, R. W., & Gottman, J. M. (1985). Physiological and affective predictors of change in relationship satisfaction. *Journal of Personality and Social Psychology*, 49(1), 85–94.

Levin, J., & Fox, J. A. (1985). *Mass murder: America's growing menace*. New York, NY: Plenum Publishing Corporation.

Jack Levin, Ph.D., a professor of sociology at Northwestern University, and James Alan Fox, Ph.D., a professor of criminal justice at Northwestern University, discuss psychological and sociological factors relevant to the chilling profiles of compulsive murders such as Ted Bundy, Charles Manson, and the Hillside Strangler.

Levine, S. B. (2019). 8 core components of psychotherapy.

https://www.psychiatrictimes.com/psychotherapy/8-core-components-psychotherapy?rememberme=1&elq_mid=7956&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Stephen Levine, M.D. provides a brief list of eight components of psychotherapy: (1) The patient's trust is required, (2) The therapist must provide a respectful psychological intimacy, (3) It is vital for the psychiatrist to understand the patient's predicament, (4) The patient continually evaluates the therapist, (5) An attachment to the therapist should be perceived, acknowledged, and respected. (6) The therapist should not assume that patients believe that they have revealed the whole story, (7) Symptoms can improve, and (8) The therapist should behave in a warm, friendly manner, unafraid of revealing minor aspects of his personal life. Dr. Levine acknowledges that the article is based on Goldfried (2019) article *Obtaining Consensus in Psychotherapy: What Holds Us Back?*

Levitan, R. (2020, April 20). *The infection that's silently killing Coronavirus patients*. New York Times. <https://www.nytimes.com/>

Keywords: COVID-19, Coronavirus

Richard Levitan, MD, an emergency physician in Littleton, NH, is president of Airway Cam Technologies, a company that teaches courses in intubation and airway management. Dr. Levitan explains how a pulse oximeter can provide early warning of the kinds of breathing problems associated with COVID-19 pneumonia. This article was linked to the listserv of one state psychological association and has been of interest to psychotherapists who treatment patients with Illness Anxiety Disorder, Obsessive Compulsive Disorder, Generalized Anxiety Disorder, and Panic Disorder. The article describes many patients presenting to emergency rooms with advanced COVID-19 pneumonia and low oxygen levels but without subjective complaints of breathing problems (termed "silent hypoxia"). Some of the details of the article can trigger some patients with health anxiety (e.g., "By the time patients have noticeable trouble breathing and present to the hospital with dangerously low oxygen levels, many will ultimately require a ventilator"). This phenomenon has some similarities to so-called "dry drowning" that is sometimes a target fear of patients with obsessive compulsive disorder. The article advocates buying pulse oximeters, which at the time of the COVID-19 shelter-in-place restrictions may be difficult to obtain, thus further increasing anxiety among affected anxious patients who don't have them.

Levy, B. R., Slade, M. D., Kunkel, S. R., & Kasl, S. V. (2002). Longevity increased by positive self-perceptions of aging. *Journal of Personality and Social Psychology*, 83, 261–270.

Lewis, T. (2021, January 14). Should we change COVID vaccine doses to reach more people? What the data say. *Scientific American*.

<https://www.scientificamerican.com/article/should-we-change-covid-vaccine-doses-to-reach-more-people-what-the-data-say1/>

Keywords: COVID-19, Coronavirus, Vaccine, Vaccination

Tanya Lewis is a senior editor at Scientific American who covers health and medicine. She reviews the literature related to Moderna and Pfizer-BioNTech vaccines in terms of

benefits and risks of various options such as halving doses, delaying the second dose, timing of the second dose, and skipping the second dose of the vaccines.

Lezak, M. D., Howieson, D. B., Bigler, E. D., & Tranel, D. (2018). Conducting neuropsychological assessment with transgender individuals. *Neuropsychological Assessment, 32*(8), 1393–1410.

Li, N. P., & Kanazawa, S. (2016). Country roads, take me home... to my friends: How intelligence, population density, and friendship affect modern happiness. *British Journal of Psychology, 107*(4), 675–697. First published: 04 February 2016
<https://doi.org/10.1111/bjop.12181>

Norman P. Li and Satoshi Kanazawa propose the *savanna theory of happiness*, which suggests that it is not only the current consequences of a given situation but also its ancestral consequences that affect individuals' life satisfaction and explains why such influences of ancestral consequences might interact with intelligence. The authors choose two varied factors that characterize basic differences between ancestral and modern life—population density and frequency of socialization with friends—as empirical test cases. As predicted by the theory, population density is negatively, and frequency of socialization with friends is positively, associated with life satisfaction. More importantly, the main associations of life satisfaction with population density and socialization with friends significantly interact with intelligence, and, in the latter case, the main association is reversed among the extremely intelligent. More intelligent individuals experience lower life satisfaction with more frequent socialization with friends. In one sense, the very intelligent would seem to be happier if they were left alone. This study highlights the utility of incorporating evolutionary perspectives in the study of subjective well-being. See also Sloat (2016).

Libon, D. J., Lamar, M., Swenson, R. A., & Heilman, K. H. (2020, January 23). *Vascular disease, Alzheimer's disease, and mild cognitive impairment: Advancing an integrated approach*. New York, NY: Oxford University Press.

LifeWay Research. (2014). Study of acute mental illness and Christian faith: Research report. Nashville, TN: Author. <http://www.lifewayresearch.com/files/2014/09/Acute-Mental-Illness-and-Christian-Faith-Research-Report-1.pdf>

Lindamer, L. A., Lohr, J. B., Harris, M. J., & Jeste, D. V. (1997). Gender, estrogen, and schizophrenia. *Psychopharmacology Bulletin, 33*(2), 221–228.

Linder, D. (2002). *Famous American trials: The John Hinkley trial (1982)*.
<http://law2.umkc.edu/faculty/projects/ftrials/hinckley/hinckleytrial.html>

- Linehan, M. M. (1993). *Cognitive-behavioral treatment of borderline personality disorder*. New York, NY: Guilford Press.
- Linehan, M. M., Goodstein, J. L., Nielsen, S. L., & Chiles, J. A. (1983). Reasons for staying alive when you are thinking of killing yourself: the reasons for living inventory. *Journal of Consulting and Clinical Psychology, 51*, 276–286.
The *Reasons for Living Inventory* (RFL-48) is available online:
<http://tools.farmacologiaclinica.info/index.php>
- Livermore, J., Malmquist, C., & Meehl, P. (1968). On the justification for civil commitment. *University of Pennsylvania Law Review, 117*, 75–96.
- Loeber, R., Pardini, D., Homish, D. L., Wei, E. H., Crawford, A. M., Farrington, D. P., et al. (2005). The prediction of violence and homicide in young men. *Journal of Consulting and Clinical Psychology, 73*(6), 1074–1088.
- Loring M., & Powell, B. (1988, March). Gender, race, and DSM-III: A study of the objectivity of psychiatric diagnostic behavior. *Journal of Health and Social Behavior, 29*(1), 1–22.
[doi:10.2307/2137177](https://doi.org/10.2307/2137177)
- Lotter, V. (1967). Epidemiology of autistic conditions in young children. *Social Psychiatry, 1*, 163–173.
In 1966, Victor Lotter (1967) examined 8 to 10 year old schoolchildren in Middlesex, UK, and estimated a prevalence of 4.5 cases per 10,000 children.
- Løvaas, O. L. (1987). Behavioral treatment and normal educational and intellectual functioning in young autistic children. *Journal of Consulting and Clinical Psychology, 55*(1), 3–9.
doi: 10.1027/0022-006X.55.1.3
- Loucks, L., Yasinski, C., Norrholm, S. D., Maples-Keller, J., Post, L., Zwiebach, L., Fiorillo, D., Goodlin, M., Jovanovic, T., Rizzo, A. A., & Rothbaum, B. O. (2019, January). You can do that?!: Feasibility of virtual reality exposure therapy in the treatment of PTSD due to military sexual trauma. *Journal of Anxiety Disorders, 61*, 55–63.
10.1016/j.janxdis.2018.06.004. Epub 2018 Jun 18.
Keywords: Military, Virtual Reality (VR), Posttraumatic Stress Disorder (PTSD), Military Sexual Trauma
Researchers at the Emory University School of Medicine conducted an initial feasibility study that examined the use of virtual reality exposure therapy (VRE) in the treatment of military sexual trauma-related posttraumatic stress disorder (MST-related PTSD), with newly developed content tailored to MST. Participants included 15 veterans (26% male)

with MST-related PTSD. Assessment of PTSD, depression, and psychophysiological indicators of distress occurred at pre-treatment, post-treatment, and 3-month follow-up. Treatment included 6-12 VRE sessions. There were significant reductions in pre- to post-treatment PTSD and depressive symptoms, which were maintained at follow-up. There also was a significant pre- to post-treatment reduction in heart rate response to a trauma cue. The percentage of participants meeting PTSD criteria continued to decline from post-treatment (53%) to follow-up (33%). Findings indicate VRE can be safely delivered and is a promising treatment for MST-related PTSD. As a parenthetical comment, it might be pointed out that the title of the article contains one of the most unusual combinations of punctuation in a scholar journal.

Lovestone, S. (2012). Dementia: Alzheimer's disease. In M. G. Gelder, N. C. Andreasen, J. J. Lopez Jr., & J. R. Geddes (Eds.). *New Oxford textbook of psychiatry* (2nd. ed., Vol. 1, pp. 333-343). New York, NY: Oxford University Press.

Ludwig, J., Marcotte, D. E., & Norberg, K. (2009). Anti-depressants and suicide. *Journal of Health Economics*, 28(3), 659–676.

Lukianoff, G. (2014, March 11). *Unlearning liberty: Campus censorship and the end of American debate*. New York, NY: Encounter Books.

Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions
Drawing on a decade of experience battling for freedom of speech on campus, First Amendment lawyer Greg Lukianoff reveals how higher education fails to teach students to become critical thinkers: by stifling open debate, our campuses are supercharging ideological divisions, promoting groupthink, and encouraging an unscholarly certainty about complex issues. See also *The Coddling of the American Mind* (Lukianoff & Haidt, 2018).

Lukianoff, G., & Haidt, J. (2015, September). *The coddling of the American mind*. The Atlantic. <https://www.theatlantic.com/magazine/archive/2015/09/the-coddling-of-the-american-mind/399356/>

Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions, Safetyism

According to the authors, this article was originally submitted with the title, *Arguing Towards Misery: How Campuses Teach Cognitive Distortions*. The magazine's editor, Don Peck, liked the article, helped Lukianoff and Haidt strengthen their argument and gave the article its more succinct and provocative title when it was published on August 11, 2015: "The Coddling of the American Mind" (Lukianoff & Haidt, 2018, p. 10). Greg Lukianoff (attorney, president, and CEO of the Foundation for Individual Rights in Education) and Jonathan Haidt, Ph.D. (social psychologist at the New York University

Stern School of Business) discuss how the generation now coming of age has been taught three Great Untruths: their feelings are always right; they should avoid pain and discomfort; and they should look for faults in others and not themselves. The authors also provide a critique on the popular academic term *microaggression*. Lukianoff and Haidt say that uncovering allegedly racist, sexist, classist, or otherwise discriminatory microaggressions doesn't *incidentally* teach students to focus on small or accidental slights. Instead, the authors maintain, its *purpose* is to get students to focus on perceived slights and then relabel the people who have made such remarks as aggressors. In academic environments in which microaggressions can be perceived in just about anything, Luchianoff and Haidt cite examples of how even joking about microaggressions can be seen as a form of aggression. According to Luchianoff and Haidt, this type of environment "presumes an extraordinary fragility of the collegiate psyche" (2015, para. 5). The ultimate goal it seems, according to the authors, "is to turn campuses into 'safe spaces' where young adults are shielded from words and ideas that make some uncomfortable. And more than the last, this movement seeks to punish anyone who interferes with that aim, even accidentally" (para. 5). The term *vindictive protectiveness* is used by the authors to describe the impulse to punish anyone—professors or other students—who interfere with this goal. See also "The trouble with teaching rape law" (Gersen, 2014), *Unlearning Liberty* (Lukianoff, 2014), and *The Coddling of the American Mind* (Lukianoff & Haidt, 2018).

Lukianoff, G., & Haidt, J. (2018). *The coddling of the American mind: How good intentions and bad ideas are setting up a generation for failure*. New York, NY: Penguin Press.
Keywords: Coddling, Trigger warnings, Activation notification, Microaggressions, Safetyism

Lupien, S. J., Juster, R. P., Raymond, C., & Marin, M. F. (2018). The effects of chronic stress on the human brain: From neurotoxicity, to vulnerability, to opportunity. *Frontiers in Neuroendocrinology*, 49, 91–105. <https://doi.org/10.1016/j.yfrne.2018.02.001>
Receptors for glucocorticoids are found in the amygdala, hippocampus, and frontal cortex, three brain regions involved in memory processing and emotional regulation. The authors discuss how chronic exposure to stress is associated with reduced volume of the hippocampus and that chronic stress can modulate volumes of both the amygdala and frontal cortex, suggesting neurotoxic effects of stress hormones on the brain. The authors cite some studies reporting that exposure to early adversity and/or familial/social stressors can increase vulnerability to stress in adulthood. Models have been recently developed to describe the roles that neurotoxic and vulnerability effects can have on the developing brain. These models suggest that developing early stress interventions can potentially counteract the effects of chronic stress on the brain and results going along with this hypothesis are summarized.

Maas, J. B. (1998). *Miracle sleep cure*. London: Thorsons.

Cornell social psychologist James Maas, Ph.D. coined the term “power nap” in this book.

Mace, N. L., & Rabins, P. V. (1981). *The 36-hour day: A family guide to caring for persons with Alzheimer’s disease, related dementing illnesses, and memory loss in later life*.

Baltimore: Johns Hopkins University Press.

Nancy L. Mace, M.A. and Peter V. Robins, M.D. provide a useful guide for families.

Mace, N. L., & Rabins, P. V. (2017, April 18). *The 36-hour day: A family guide to caring for persons with Alzheimer’s disease, related dementing illnesses, and memory loss in later life* [6th ed.]. Baltimore, MD: Johns Hopkins University Press.

Copyright 1981, 1991, 1999, 2006, 2011, 2017 Johns Hopkins University Press.

MacKenzie, D. (2019, January 23). We may finally know what causes Alzheimer’s – and how to stop it. *New Scientist*. <https://www.newscientist.com/article/2191814-we-may-finally-know-what-causes-alzheimers-and-how-to-stop-it/>

Although it is not a scholarly article, Debora MacKenzie provides a brief discussion of evidence that *Porphyromonas gingivalis*, a bacteria that causes chronic gum disease, may contribute to the development of Alzheimer’s disease, in which the build up of amyloid proteins may be as a defense against *P. gingivalis*.

MacLean, Paul D. (1990). *The triune brain in evolution: Role in paleocerebral functions*. New York, NY: Plenum Press.

Macnow, Alexander Stone. (Ed.) (2014). *MCAT Behavioral Science Review*. New York, NY: Kaplan Publishing.

Existential questions, derived from Erik Erikson’s states of psychosocial development, are contained on page 220. Also see Erikson and Erikson (1998).

Madigan, L., & Gamble, N. C. (1991). *The second rape: Society’s continued betrayal of the victim*. New York, NY: Macmillan Publishing Company.

Maier, S. F., & Seligman, M. E. P. (2016, July). Learned helplessness at fifty: Insights from neuroscience. *Psychological Review*, 123(4), 349–367. doi: 10.1037/rev0000033

Majid, F., Ali, M., Somayeh, M., & Cyrus, R. (2020). Neurobiology of COVID-19. *Journal of Alzheimer’s Disease*, 76(1), 3–19. <https://content.iospress.com/articles/journal-of-alzheimers-disease/jad200581>

Keywords: COVID-19, Coronavirus

In an effort to integrate the multiple disease processes that occur in COVID-19 infections, these authors have integrated several concepts and have proposed a three-stage system to classify neurological complications from the disease. Stage 1 may involve damage to the epithelial cells in the nose and mouth, which may account for the reduction in sense of taste and smell. Stage 2 seems to involve an inflammatory response that leads to the formation of blood clots, which can cause strokes. Stage 3 involves a *cytokine storm* (i.e., an explosive inflammatory response), which can damage the blood-brain barrier. This may allow inflammatory cells and molecules—and possibly viral particles—to enter the brain. Patients may develop seizures, confusion, coma, or encephalopathy.

Makinson, R. A., & Young, J. S. (2012). Cognitive behavioral therapy and the treatment of Posttraumatic stress disorder: Where counseling and neuroscience meet. *Journal of Counseling and Development, 90*(2), 131–140.

Malmo, R. B. (1975). *On emotions, needs, and our archaic brain*. New York, NY: Holt, Rinehart, and Winston, Inc.

Malott, R. (2007). *Principles of behaviour*. Upper Saddle River, NJ: Pearson Prentice Hall.

Richard Malott, Ph.D. defines a discriminative stimulus as “a stimulus in the presence of which a particular response will be reinforced” (2007, p. 202), whereas the stimulus delta is defined as “a stimulus in the presence of which a particular response will not be reinforced” (2007, p. 202).

Manangan, L. P., Schulster, L. M., Chiarello, L., Simonds, D. N., & Jarvis, W. R. (1998, October). Risk of infectious disease transmission from a common communion cup. *American Journal of Infection Control, 26*(5), 538–539. [https://doi.org/10.1016/S0196-6553\(98\)70029-X](https://doi.org/10.1016/S0196-6553(98)70029-X)

Keywords: COVID-10, Coronavirus

Within the CDC, the consensus of the National Center for Infectious Diseases and the National Center for Human Immunodeficiency Virus, Sexually Transmitted Diseases, and Tuberculosis is that a theoretic risk of transmitting infectious diseases by using a common communion cup exists, but that the risk is so small that it is undetectable. Experimental studies have shown that bacteria and viruses can contaminate a common communion cup and survive despite the alcohol content of the wine. Therefore, an ill person or asymptomatic carrier drinking from the common cup could potentially expose other members of the congregation to pathogens present in saliva. Were any diseases transmitted by this practice, they most likely would be common viral illnesses, such as the common cold. However, a recent study of 681 persons found that people who receive Communion as often as daily are not at higher risk of infection compared with persons who do not receive communion or persons who do not attend Christian church services at all. In summary, the risk for infectious disease transmission by a common communion

cup is very low, and appropriate safeguards—that is, wiping the interior and exterior rim between communicants, use of care to rotate the cloth during use, and use of a clean cloth for each service—would further diminish this risk. In addition, churches may wish to consider advising their congregations that sharing the communion cup is discouraged if a person has an active respiratory infection (i.e., cold or flu) or moist or open sores on their lips (e.g., herpes).

Manley, J. J., & Echemendia, R. J. (2007, March). Race-specific norms: Using the model of hypertension to understand issues of race, culture, and education in neuropsychology. *Archives of Clinical Neuropsychology*, 22(3), 319–325. <https://doi.org/10.1016/j.acn.2007.01.006>

The use of demographic corrections in the norms for neuropsychological tests, including race along with other variables such as age, education, and gender, is common and generally accepted practice in clinical neuropsychology that is empirically-based. These corrections are included in the most commonly used and accepted normative data sets in neuropsychology, including the Heaton norms (2004) and Pearson’s products including the Advanced Clinical Solutions norms for the Wechsler Adult Intelligence Scale and Wechsler Memory Scale, as well as the Test of Premorbid Functioning, which are among the most frequently used tests in neuropsychology. The use of demographic corrections has been consistently demonstrated to result in more accurate diagnosis and detection of cognitive impairment and underlying brain pathology. These norms improve the sensitivity and specificity of neuropsychological measures in detecting cognitive impairment. However, given that racial issues in general are among the most highly emotionally charged topics in our society, the use of race as a demographic correction variable is certainly not without controversy. In this article, Jennifer J. Manly and Ruben J. Echemendia point out that the development of race/ethnicity-specific norms has been popular but also controversial. Two major arguments have surfaced that: (1) race-specific norms ignore underlying cultural and educational factors for which race serves as a proxy, and (2) setting “more lenient” cutoffs for impairment among ethnic minorities denies these groups needed services. In this article, Manley and Echemendia argue that recent research on hypertension reveals a number of crucial lessons for neuropsychologists who are struggling with these concerns.

Manne, K. (2015, September 19). Why I use trigger warnings. *New York Times*. <https://www.nytimes.com/2015/09/20/opinion/sunday/why-i-use-trigger-warnings.html>

Marangoni, C. (2018, October). ADHD, bipolar disorder, or borderline personality disorder: Getting to the right diagnosis. *Psychiatric Times*, 35(10), 18–20, 30. <http://www.psychiatrictimes.com/special-reports/adhd-bipolar-disorder-or-borderline-personality-disorder>

Keywords: Differential diagnosis

Markowitz, D. M., & Hancock, J. T. (2018) Deception in mobile dating conversations, *Journal of Communication*, (1–23).

The authors collected mobile dating deceptions from a discovery phase, a conversation period after daters match on profiles but before a face-to-face interaction. Study 1 found that nearly two-thirds of lies were driven by impression management, particularly self-presentation and availability management goals. Study 2 found that approximately 7% of messages were deceptive, and content patterns were consistent with Study 1. Across studies, the participant's lying rate was correlated with the perceived lying rate of the partner.

Martin-Joy, J. (2015, August 1). *Goldwater v. Ginzburg*. *American Journal of Psychiatry*, 172(8), 729–730.

Keywords: Goldwater Rule, Narcissistic Personality, Paranoid Personality

Meier, M. H., Caspi, A., Ambler, A. et al. (2012). Persistent cannabis users who neuropsychiatric decline from childhood to midlife. *Proceedings of the National Academy of Science USA*, 109, E2857-E2664.

A cohort of 1,027 individuals in Dunedin, New Zealand born in 1972 or 1973 were evaluated every 2 years from birth up to age 38, with 95% retention. Cannabis use was monitored and IQ testing was performed at ages 8, 11, 13, and 38. Individuals with persistent cannabis use that began during the adolescent years lost an average of 8 IQ points. In contrast, individuals who began using as adults had no decline in their IQ score. These data support the likelihood of a neurotoxic effect with the regular use of cannabis in the developing brain, resulting in an enduring decline in cognitive function.

Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, 50(4), 370–396.

Maslow, A. H. (1954). *Motivation and personality*. New York, NY: Harper & Bros.

Maslow, A. H. (1962). *Toward a psychology of being*. Princeton, NJ: D. Van Nostrand Company.

Massie, H. N, Miranda, G. Snowdon, D. A., Greiner, L. H., Wekstein, D. R., Danner, D., Markesbery, W. R., Kemper, S. J., & Mortimer, J. A. (1996, June 26). Linguistic ability in early life and Alzheimer disease in late life. *Journal of the American Medical Association*, 275(24), 1879.

Maté, G. (2010). *In the realm of hungry ghosts: Close encounters with addiction*. Berkeley, CA: North Atlantic Books.

- Maurel, L. (2015, September 28). *Coming so close...but missing by a mile?*
<http://onesafetynet.com/news/coming-so-close-but-missing-by-a-mile/>
Lisa Maurel, LMFT provides a critique of Mark Yarhouse's 2015 article "Understanding the transgender phenomenon."
- McCarter, S. J., St. Louis, E. K., & Boeve, B. F. (2012). REM sleep behavior disorder and REM sleep without atonia as an early manifestation of degenerative neurological disease. *Current Neurological and Neuroscience Reports*, 12, 182–192.
- McCarty, R., & Mathews, C. A. (2017, September). Hoarding throughout the life span. *Psychiatric Times*, 34(9), 35–38.
- McClelland, J. E., & Dorn, H. (2006). *Science and technology in world history* (2nd ed.). Baltimore, MD: Johns Hopkins University Press.
The first edition of this book was published in 1999.
- McCullough, Jr., J. P. (2000). *Treatment for chronic depression: Cognitive behavioral analysis system of psychotherapy (CBASP)*. New York, NY: Guilford Press.
- McCullough, J. P. (2006). *Treating chronic depression with disciplined personal involvement: Cognitive behavioral analysis system of psychotherapy (CBASP)*. New York, NY: Springer-Verlag.
- McCullough, Jr., J. P., Schramm, E., & Penberthy, J. K. (2015). CBASP as a distinctive treatment for persistent depressive disorder. New York, NY: Routledge.
- McGilchrist, I. (2012, October 9). *The master and his emissary: The divided brain and the making of the Western world*. New Haven, CT: Yale University Press.
Iain McGilchrist, psychiatrist and former Oxford literary scholar, presents an exploration of the differences between the brain's left and right hemispheres, and how those differences have affected society, history, and culture. Drawing from a vast body of recent research in neuroscience and psychology, he reveals that the difference is profound: the left hemisphere is detail oriented, while the right has greater breadth, flexibility, and generosity. In discussing Western culture, McGilchrist illustrates the tension between these two worlds as revealed in the thought and belief of artists and philosophers. See also RSA (2010) video titled "Iain McGilchrist: The divided brain and the making of the Western world."
- McGue, M., & Lykken, D. T. (1992). Genetic, influence on risk of divorce. *Psychological Science*, 3(6), 368–373.

McLeod, S. (2013). *What is validity?* Simply Psychology.
<https://www.simplypsychology.org/validity.html>

McMugh, M. L. (2012, October 22). Interrater reliability: The kappa statistic. *Biochemia Medica (Zagreb)*, 22(3), 276–282. Published online October 15, 2012.

Mary L. McHugh (2012) has suggested that Cohen's interpretation of kappa may be too lenient for health related studies because it implies that a score as low as 0.41 might be acceptable. For this reason, McHugh has recommended that both kappa and percent agreement should be used in studies of healthcare.

McMullin, R. E. (1986). *Handbook of cognitive therapy techniques*. New York, NY: W. W. Norton.

McMullin, R. E. (2000). *The new handbook of cognitive therapy techniques*. (2nd ed.). New York, NY: W. W. Norton.

Clinical psychologist Rian McMullin, Ph.D. (2000, p. 194) makes the following observations: "Logical fallacies are unsubstantiated assertions that are often delivered with a conviction that makes them sound as though they are proven facts. ...Whatever their origins, fallacies can take on a special life of their own when they are popularized in the media and become part of a national credo."

McKenzie, J. F., Pinger, R. R., & Kotecki, J. E. (2008). *An introduction to community health*. Boston: Jones and Bartlett Publishers.

McWilliams, N. (2011). *Psychoanalytic diagnosis: Understanding personality structure in the clinical process* (2nd ed.). New York, NY: Guilford Press.

Psychologist Nancy McWilliams, Ph.D. teaches in the Graduate School of Applied and Professional Psychology at Rutgers, The State University of New Jersey. She is a former president of the Division of Psychoanalysis (39) of the American Psychological Association and she is on the editorial board of *Psychoanalytic Psychology*. In *Psychoanalytic Diagnosis*, Williams makes psychoanalytic personality theory and its implications for practice accessible to practitioners of all levels of experience. She explains major character types and demonstrates specific ways that understanding the patient's individual personality structure can influence the therapist's focus and style of intervention.

Means, P. A. (2006). *Men's secret wars*. Grand Rapids, MI: Revell, a division of Baker publishing Group.

Medicine: The last days of Freud. (1957, October 14). *Time*.

<https://content.time.com/time/subscriber/article/0,33009,862786,00.html>

Mednick, S., with Ehrman, E. (2006). *Take a nap! Change your life*. New York, NY: Workman Publishing.

Sara Mednick, Ph.D., sleep researcher at the University of California, Riverside, focuses on four types of naps:

20 minutes (for energy and alertness) includes two minutes of Stage 1 sleep and 18 minutes of Stage 2.

35 minutes (energy, alertness and mind-clearing) includes two minutes of Stage 1, 23 minutes of Stage 2, and 10 minutes of Slow-wave sleep.

60 to 75-minutes (all the above, plus a creativity boost) includes two minutes of Stage 1, 28 minutes of Stage 2, 25 minutes of Slow-wave and five to 20 minutes of REM.

90-minutes (the “perfect nap” because it mimics the balance of stages during nocturnal sleep), includes five minutes of Stage 1, 35 of Stage 2, 25 minutes of slow-wave, and 25 minutes of REM.

Dr. Mednick also provides a Nap Wheel that can be used to calculate the “perfectly balanced state” in which Rapid Eye Movement (REM) and Slow-Wave sleep (SWS) are equally proportioned, and where “The Ultimate Nap” occurs. Naps occurring before this crossing point will have more REM and naps occurring after will have more SWS. The Nap Wheel is available at this link: <https://saramednick.com/htmls/book/napwheel.htm>

Mee-Lee, D., M.D. (2014, July 16). *The new ASAM criteria for the treatment of addictive, substance-related, and co-occurring conditions: What you might need to re-form for healthcare reform* [Plenary address]. The 45th annual Kentucky School of Alcohol and Other Drug Studies, Crown Plaza Airport Expo Center, Louisville, KY.

<http://dbhidid.ky.gov/dbh/documents/ksaods/2014/Mee-Lee1.pdf?t=10451706092018>

Keywords: American Society of Addiction Medicine (ASAM)

Mee-Lee, D., Shulman, G. D., Fishman, M., Gastfriend, D. R., & Griffith, J. H. (Eds.). (2001). *ASAM patient placement criteria for the treatment of substance-related disorders* (2nd ed., rev.). Chevy Chase, MD: American Society of Addiction Medicine, Inc.

Keywords: American Society of Addiction Medicine (ASAM)

Mee-Lee, D., Shulman, G. D., Fishman, M. J., Gastfriend, D. R., & Miller, M. M. (Eds.). (2013). *The ASAM criteria: Treatment criteria for addictive, substance-related, and co-occurring conditions* (3rd ed.). Carson City, NV: The Change Companies.

Keywords: American Society of Addiction Medicine (ASAM)

Melzack, R., & Wall, P. D. (1965). Pain mechanisms: A new theory. *Science*, 150(3699), 971–979.

Melzack, R. (1996). Gate control theory: On the evolution of pain concepts. *Pain Forum*, 5, 128–138.

Melton, J. Gordon. (2007, January 1). *The encyclopedia of religious phenomena*. Canton, MI: Visible Ink Press. Page 359.

Menninger, K. A. (1973, September 1). *Whatever became of sin?* New York, NY: Hawthorn Books.

Karl Augustus Menninger (1893-1990) was an American psychiatrist and a member of the Menninger family of psychiatrists who founded the Menninger Foundation and the Menninger Clinic in Topeka, Kansas. Published when he was 80 years old, the theme of this book is that the term *sin* would be eventually replaced with medical and psychiatric terms such as illness, disorder, and dysfunction. Menninger hypothesized that the concept of sin would become increasingly irrelevant and that explanations of moral wrongdoing would be replaced by rationalizations that excused individual accountability and responsibility. Eventually, the human condition would be explained away as a product of biochemistry, childhood experiences, and environmental influences (including trauma). Looking back 50 years, Menninger now seems like a psychiatric prophet in his prediction of the biologicalization of morality. See also Abercrombie (2012) “Whatever became of sin.”

Mercante, G., Ferreli, F., De Virgilio, A. et al. (2020, June 18). Prevalence of taste and smell: Dysfunction in Coronavirus Disease 2019. *JAMA Otolaryngology: Head & Neck Surgery*, 146(8), 723–728.

<https://jamanetwork.com/journals/jamaotolaryngology/fullarticle/2767510>

Keywords: COVID-19, Coronavirus

Abstract: This survey study of 204 patients with coronavirus disease 2019 found that taste reduction was present in 55.4% of patients, whereas smell reduction was present in 41.7% of patients. Severe nasal obstruction was uncommon at the onset of the disease (7.8%). The authors suggest that coronavirus disease 2019 should be suspected when severe reduction of taste and smell are present in the absence of nasal obstruction. See also Majid, Ali, Somayeh, and Cyrus (2020) and Multiple Disease Processes (2020).

Full authorship includes the following: Giuseppe Mercante, M.D., Fabio Ferreli, M.D., Armando De Virgilio, M.D., Ph.D., Francesca Gaino, M.D., Matteo Di Bari, M.D., Giovanni Colombo, M.D., Elena Russo, M.D., Andrea Costantino, M.D., Francesca Pirola, M.D., Giovanni Cugini, M.D., Luca Malvezzi, M.D., Emanuela Morengi, M.S., Ph.D., Elena Azzolini, M.D., Michele Lagioia, M.D., and Giuseppe Spriano, M.D.

- Michalopoulos, L. M., Unick, G. J., Haroz, E. E., Bass, J., Murray, L. K., & Bolton, P. A. (2015). Exploring the fit of western PTSD models across three non-western low- and middle-income countries. *Traumatology, 21*(2), 55–63.
- Mielke, M. M. (2018, November 30). Sex and gender differences in Alzheimer disease dementia. *Psychiatric Times, 35*(11), 14–15, 17. <http://www.psychiatrictimes.com/special-reports/sex-and-gender-differences-alzheimer-disease-dementia>
- Milgram, S. (1963). Behavioral study of obedience. *The Journal of Abnormal and Social Psychology, 67*(4), 371–378. <https://doi.org/10.1037/h0040525>
- Yale University Professor and Psychologist Stanley Milgram (1933–1984) had a Jewish heritage that contributed to his personal concern and intellectual curiosity for finding an answer to a perplexing moral question: “If Hitler asked you, would you execute a stranger?” In other words, would ordinary U.S. from various walks of life behave as the Nazis did in harming, torturing, and killing innocent victims who had been their neighbors and fellow citizens? Despite cultural differences, historical setting differences, and the absence of the charismatic power of a dictatorial leader, could it be demonstrated in the lab that thousands of U.S. citizens could be led down the same path? Milgram’s results shocked even the psychology majors who made predictions. Before conducting the experiment, Milgram polled 14 Yale University senior-year psychology majors to predict the behavior of 100 hypothetical teachers. All of the poll respondents believed that only a very small fraction of teachers (the range was from zero to 3 out of 100, with an average of 1.2) would be prepared to inflict the maximum voltage. Milgram also informally polled his colleagues and found that they, too, believed very few subjects would progress beyond a very strong shock. The classic experiment was actually designed to study obedience or conformity to authority. The researchers informed volunteers that the purpose of the research was to study learning and memory. Each subject was told to teach a “student” and to punish the students’ errors by administering increasing levels of electric shock. The “students” were confederates of the researchers and were never actually harmed. The “students” pretended to be poor learners. They mimicked pain and even unconsciousness as the subjects increased the levels of electric shock. Sixty-three (63%) percent of the subjects administered what they thought were lethal shocks, sometimes even after the “student” claimed to have heart disease. Some of the subjects, after being “debriefed” from the study, experienced serious emotional crises. Although contemporary critics and armchair psychologists have said that the results could not be replicated with modern, psychologically-sophisticated people, English mentalist and illusionist Derren Brown (b. 1971) has even done so for entertainment purposes.
- Milgram, S. (1967). The small world problem. *Psychology Today, 2*, 60–67.

Dr. Stanley Milgram's classic "six degrees of separation" between friends became 4.74 degrees in 2011. Facebook's data show that there are now only four friend connections between people around the world (Facebook cuts six degrees of separation to four, 2012). In 2011, researchers at Cornell, the Università degli Studi di Milano, and Facebook computed the average across the 721 million people using the site then, and found that it was 3.74 (Backstrom et al., 2012; Ugander, et al., 2011).

Miller, B. (2018, October 8). Sleep disorders in early psychosis: New research. *Psychiatric Times*. http://www.psychiatrictimes.com/schizophrenia/sleep-disorders-early-psychosis-new-research?rememberme=1&elq_mid=3687&elq_cid=860775

Miller, C. (2019). *Know my name: A memoir*. New York, NY: Viking.

Miller, N. S., & Mahler, J. C., & Gold, M. S. (1991). Suicide risk associated with drug and alcohol dependence. *Journal of Addictive Diseases*, 10(3), 49–61.

Miller, J. J. (2019, April 15). Is it time to legalize cannabis? [Editorial]. *Psychiatric Times*, 36(4), 8–9.

In his editorial, John Miller, M.D. provides a brief literature review and discusses two potentially serious adverse effects from the regular use of cannabis (THC) on the developing brain: "increased incidence and earlier onset of psychosis in individuals already at risk and cognitive impairments that can be irreversible. Ideally, as with alcohol and cigarettes, cannabis should not be used until the brain is fully developed, somewhere between the ages of 21 and 25" (p. 9).

Miller, M., Azrael, D., Hemenway, D., & Solop, F. (2002, November). 'Road rage' in Arizona: Armed and dangerous: *Analysis and Prevention*, 34(6), 807–814.

Keywords: Road rage, Trigger effect, Weapons effect

Abstract: Little is known about the relationship between firearm carrying and hostile behavior on the roadway. To explore a possible association between firearm carrying by drivers and hostile driving behavior [the authors] conducted a random-digit-dial survey of 790 licensed drivers in Arizona. In addition to demographic questions, [the authors] asked whether respondents had carried a gun while driving in the 12 months prior to the survey. Respondents were also asked if they, in anger, had personally made obscene gestures, cursed or shouted at other drivers, impeded another drivers progress with their vehicle, aggressively 'followed another driver too closely', or brandished a gun at another driver. [The authors] used multivariable logistic regression to explore correlates of hostile driving behavior while taking into account several demographic and behavioral characteristics. Overall 11% of drivers always (4%) or sometimes (7%) carried a gun with them in their vehicle; 34% report having made obscene gestures/cursed/shouted angrily; 28% report aggressively following or blocking other drivers with their vehicle. In

both crude and multivariate adjusted analyses, self-report of engaging in hostile behavior while driving was significantly more common among men, young adults, and individuals who carried a firearm in their car. [The authors'] findings suggest that, at least among Arizona motorists, having a gun in the car is a strong marker for aggressive and illegal behavior behind the wheel.

Miller, A. L., Rathus, J. H., & Linehan, M. M. (2006). *Dialectical behavior therapy with suicidal adolescents*. New York, NY: Guilford Publications.

Millon, T. (Ed.). (1967). *Theories of psychopathology and personality: Essays and critiques*. New York, NY: John Wiley and Sons.

Millon, T. (1969). *Modern psychopathology*. Philadelphia, PA: W. B. Saunders Company.

Millon, T. (Ed.). (1973). *Theories of psychopathology and personality: Essays and critiques* [2nd ed.]. New York, NY: John Wiley and Sons.

Millon, T. (1981). *Disorders of personality*. New York, NY: John Wiley and Sons.

Millon, T., Grossman, S., & Millon, C. (2015). *Millon Clinical Multiaxial Inventory-IV*. San Antonio, TX: Pearson Assessment.

Keywords: MCMI-IV

The Millon[®] Clinical Multiaxial Inventory-IV helps clinicians quickly identify clients who may require more intensive evaluation. MCMI[®]-IV reports provide an in-depth analysis of personality and symptom dynamics, and include action-oriented suggestions for therapeutic management.

Mills, S., & Hedderly, T. (2014, January). A guide to childhood motor stereotypies, tic disorders and the Tourette spectrum for the primary care practitioner. *Ulster Medical Journal*, 83(1), 22–30.

Mistler, B. J., Reetz, D. R., Krylowicz, B., Barr, V. (2013). *The Association for University and College Counseling Center Directors Annual Survey: Reporting period: September 1, 2011 through August 31, 2012*. Indianapolis, IN: Association for University and College Counseling Center Directors.

http://files.cmccglobal.com/Monograph_2012_AUCCCD_Public.pdf

Ninety-five percent of college counseling center directors surveyed said the number of students with significant psychological problems is a growing concern in their center or on campus, according to the latest Association for University and College Counseling Center Directors (AUCCCD; 2013) survey of counseling center directors. Seventy

percent of directors believe that the number of students with severe psychological problems on their campus has increased in the past year. Anxiety continues to be the most predominant presenting concern among college students (41.6%), followed by depression (36.4%), and relationship problems (35.8%). Other common concerns are suicidal ideation (16.1%), alcohol abuse (9.9%), sexual assault (9.2), ADHD (8.9%), and self-injury (8.7%). On average, 24.5 percent of clients were taking psychotropic medications. However, 19 percent of directors report the availability of psychiatric services on their campus is inadequate. Directors report that 21 percent of counseling center students present with severe mental health concerns, while another 40 percent present with mild mental health concerns. Less than one percent (.3%) of directors reported that their center offered online counseling.

Mithoefer, M. C., Mithoefer, A. T., Feduccia, A. A., Jerome, L., Wagner, M., Wymer, J., Holland, J., Hamilton, S., Yazar-Klosinski, B., Emerson, A., & Doblin, R. (2018, May 1). 3, 4-methylenedioxymethamphetamine (MDMA)-assisted psychotherapy for post-traumatic stress disorder in military veterans, firefighters, and police officers: A randomised, double-blind, dose-response, phase 2 clinical trial. *The Lancet Psychiatry* [Online First]. [https://doi.org/10.1016/S2215-0366\(18\)30135-4](https://doi.org/10.1016/S2215-0366(18)30135-4)

Mitscherlich, A. (1970). *Society without the father: A contribution to social psychology* (Eric Mosbacher, Trans.). New York, NY: Schocken Books.

Alexander Mitscherlich (1908-1982) was a German neurologist and psychoanalyst who, along with his wife Margarete Mitscherlich, was a co-founder of the Sigmund-Freud-Institute at Frankfurt. The Mitscherlichs used psychoanalytic theory to explain the causes behind Nazi Germany and its aftermath in German society (e.g., pointing specifically to the Germans' inability to mourn their beloved leader, Adolf Hitler). In his now famous study, Mitscherlich states that since the rise of industrial mass society, the authority structures based on the image of the father have broken down, resulting in increasingly impersonal relationships between fathers and sons.

Mixon, K. (2020). *Micro droplets suspending in air* [Video]. Vimeo.

<https://vimeo.com/402577241>

Keywords: COVID-19, Coronavirus

This video provides a depiction of how micro droplets (0.1 micrometer = 1/10,000 millimeter) spread infections. The video is provided by courtesy of NHK World (Japan) with commentary by Kazuhiro Tateda, President, The Japanese Association for Infectious Diseases. Special thanks to Shin Nippon Air Technologies Company, LTD.

Moffatt, G. (2017, August). The difficulties of duty to warn. *Counseling Today*, 60(2), 8–9.

- Moffic, H. S., (2015, March 2). Gender identity, Bruce Jenner, and me. *Psychiatric Times*.
http://www.psychiatrytimes.com/couch-crisis/gender-identity-bruce-jenner-and-me?rememberme=1&elq_mid=4136&elq_cid=860775
- Mojtabai, R. (2011). Bereavement-related depressive episodes: Characteristics, 3-year course, and implication for the DSM-5. *Achieves of General Psychiatry*, 68(9), 920–928.
- Mokdad, A. H., Marks, J. S., Stroup, D. F., & Gerberding, J. L. (2004, March 10). Actual causes of death in the United States, 2000. *Journal of the American Medical Association*, 291(10), 1238–1245.
- Monahan, John. (1981). *Predicting violent behavior: An assessment of clinical techniques*. Beverly Hills, CA: Sage.
- Monroe, Doug. (2015, February 18). Asylum: Inside Central State Hospital, once the world’s largest mental institution. *Atlanta Magazine*. <https://www.atlantamagazine.com/great-reads/asylum-inside-central-state-hospital-worlds-largest-mental-institution/>
Central State Hospital in Milledgeville, Georgia has been in continuous operation since accepting its first patient in December 1842. Originally founded as the Georgia State Lunatic, Idiot, and Epileptic Asylum, the hospital’s name was changed to the Georgia State Sanitarium in 1898, then to the Milledgeville State Hospital in 1929, and finally to Central State Hospital in 1967. According to Monroe (2015), by the 1960s the facility had grown into the largest mental hospital in the world, contending with Pilgrim Psychiatric Center in New York. At its peak, the hospital had 200 buildings and sprawled across two thousand acres that housed nearly 13,000 patients.
- Moody, P. A. (1970). *Introduction to evolution* [3rd ed.]. New York, NY: Harper & Row.
Original book was published in 1953 and second edition was published in 1962.
- Moore, L. A., Aarons, G. A., Davis, J. H., & Novins, D. K. (2015). How do providers serving American Indians and Alaska Natives with substance abuse problems define evidence-based treatment? *Psychological Services*, 12(2), 92–100.
- Morgan, G. (n.d.). *Good vs. bad blue light*. Vision Service Plan. <https://www.vsp.com/eyewear-wellness/eye-health/blue-light-good-and-bad>
Gary Morgan, D.O. is a writer for 2020 Vision Service Plan.
- Moran, M. (2021, December 28). Updated *DSM-5* text revisions to be released in March. *Psychiatric News*. <https://doi.org/10.1176/appi.pn.2022.1.20>
Key words: DSM-5-TR (APA, 2022), text revision

Mark Moran, M.P.H., whose master's degree in public health was conferred by George Washington University School of Public Health, is a Senior Reporter for *Psychiatric News*.

Moran, M. (2022, January 1). Updated *DSM-5* text Revisions to be released in March. *Psychiatric News*, 57(1)11, 28. Available at this link:
<https://psychnews.psychiatryonline.org/doi/pdf/10.1176/pn.2022.57.issue-1>
Key words: DSM-5-TR (APA, 2022), text revision

Morina, N., Wincerts, J. M., Lobbrecht, J., & Priebe, S. (2014). Remission from post-traumatic stress disorder in adults: A systematic review and meta-analysis of long term outcome studies. *Clinical Psychology Review*, 34(3), 249–255. doi: 10.1016/j.cpr.2014.03.002
Morina and colleagues conducted the first systematic review and meta-analysis on spontaneous long-term remission rates (i.e., without specific treatment) of post-traumatic stress disorder in adults. Across all studies, remission rates varied between 8% and 89%, with an average of 44.0%. Publications on PTSD related to natural disaster reported the highest mean of remission rate (60.0%), whereas those on PTSD related to physical disease reported the lowest mean of remission rate (31.4%). The authors conclude that long-term remission from PTSD without specific treatment varies widely and is higher in studies with the baseline within five months following trauma.

Moffic, H. S. (2019, November 7). The Goldwater Rule: What would Freud and Frankl have done? *Psychiatric Times*. https://www.psychiatristimes.com/couch-crisis/goldwater-rule-what-would-freud-and-frankl-have-done?rememberme=1&elq_mid=9527&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

Keywords: Goldwater Rule, Narcissistic Personality, Paranoid Personality

Psychiatrist Steven Moffic, MD writes about the views of two European psychiatrists, Sigmund Freud and Viktor Frankl, in terms the rise to power of Adolf Hitler and the emerging genocidal policies that were being developed by the Nazis at that time. Dr. Moffic frames his article within the context of the Goldwater Rule, which refers to Paragraph 3 of Section 7 in the American Psychiatric Association's (APA) Principles of Medical Ethics: "On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement (APA, 2013, p. 9). This ethical standard originated as a consequence of events that transpired in 1964, when *Fact Magazine* published an article titled "The Unconscious of a Conservative: A Special Issue on the Mind of Barry Goldwater." The magazine polled

US psychiatrists about whether or not US Senator Barry Goldwater was fit to be president. At that time, criticism of 1964 Republican Presidential candidate Barry Goldwater ran from his being paranoid and a potential danger by that might lead to a nuclear war to his presumed homosexuality. Unfortunately, the concerns about homosexuality were something of psychiatric concern in that era of time. In response, Senator Goldwater sued *FACT Magazine* editor Ralph Ginzburg and managing editor Warren Boroson (*Goldwater v. Ginzburg*, July, 1969). Goldwater won the lawsuit and received damages totaling \$75,000.00, which would be approximately \$500,000.00 in today's dollars adjusted for inflation. As a consequence, the outspoken psychiatrists were publicly shamed. To avert future embarrassment and "wild analysis" (Freud's term for unfounded speculation), the so-called Goldwater Rule was adapted several years later as an annotation in the AMA principles of medical ethics for psychiatrists. The rule stated that it was unethical to provide any psychiatric analysis of a public figure without personal evaluation and permission of that person. In 2019, as concerns over the current President's mental health emerged, the rule was tightened and strengthened.

Molloy, H. & Vasil, L. (2002). The social construction of Asperger Syndrome: The pathologizing of difference? *Disability and Society*, 17(6), 659–669.

Moncher, F. L., Allison, R. L., & Bennett, A. A. (2008). *Coping with a suicide: Catholic teaching and pastoral response*. New Haven, CT: Knights of Columbus Supreme Council.

<https://www.archindy.org/crisis/documents/Catholic%20Response%20to%20Suicide.pdf>

Although not a comprehensive source on suicide, this 29-page booklet was written to help survivors and those who are concerned about them. It was written by Frank J. Moncher, Rosella L. Allison, and Arthur A. Bennett. The General Editor was Fr. Juan-Diego Brunetta, O.P. *Censor Deputatus* and *Nihil Obstat* was by Rev. Thomas J. Lehning. *Imprimatur* was by Fr. Frank J. Ready.

Moselhy, H. F. (1999). Lycanthropy: New evidence of its origin. *Psychopathology*, 32(4), 173–176. <https://doi:10.1159/000029086>

Keywords: Boanthropy, cow, lycanthropy, wolf, zoanthropy

The author describes two cases of clinical lycanthropy. In one case, there is clear evidence of an organic origin of the syndrome. *Lycanthropic intermetamorphosis* refers to rare cases of individuals who believe that other people have transformed into animals.

Motto, J. A. (1976) Suicide prevention for high-risk persons who refuse treatment. *Suicide and Life-Threatening Behavior*, 6, 223–230.

Motto, J. A., & Bostrom, A. G. (2001). A randomized controlled trial of postcrisis suicide prevention. *Psychiatric Services*, 52(6), 828–833.

Moutier, C. (2021, July 7). Concerning trends in suicide [Video]. *Psychiatric Times*.

<https://www.psychiatristimes.com/view/concerning-trends-in-suicide?>

Christine Moutier, MD, Chief Medical Officer at the American Foundation for Suicide Prevention, discusses the Centers for Disease Control and Prevention (CDC) report, Emergency department visits for suspected suicide attempts among persons Aged 12–25 years before and during the COVID-19 pandemic — United States, January 2019–May 2021. This suicide surveillance study revealed not only a relative increase but also 50% absolute increase in suicide attempt presentations at emergency departments in the first quarter (February–March) in 2021 for adolescent girls (ages 12 to 17), in contrast to data from the two years previously. This increase was not seen in adolescent boys nor in young men or women in the young adult range (18–25 years).

Mowrer, O. A. (1939). A stimulus-response analysis of anxiety and its role as a reinforcing agent. *Psychological Review*, 46, 553–565.

Mowrer's model provides the basis of the contemporary two-factor theory of how obsessive-compulsive cycle is maintained. Neutral stimuli become distress stimuli through their association with pain or fear. Escape and avoidance behaviors are learned in order to reduce distress (via negative reinforcement). Dollard and Miller (1950) used Mowrer's model to explain how, in obsessive compulsive disorder, the escape and avoidance takes the form of rituals and compulsions.

Mowrer, O. A. (1960). *Learning theory and behavior*. New York, NY: Wiley.

Moynihan, D. P. (1993, Winter). Defining deviancy down. *American Scholar*, 62(1), 17–30.

Mugado-Willard, K. (2024). *Neurodiverse couple therapy: A practical guide to brain-informed care*. New York, NY: Routledge.

Back Cover Review by William F. Doverspike, Ph.D.:

“Written with passion and intellectual rigor, this practical guide pulls readers into a unique approach that integrates the intersection of couple therapy and neurodiversity. With a foundation built on scientific evidence and theoretical rationale, Kelli Mugado-Willard offers a broad conceptual overview as well as specific techniques that can be implemented by therapists. Based on a decade of experience as a licensed marriage and family therapist, Kelli's innovative approach to neurodiverse couple therapy will appeal to graduate students expanding their base of knowledge as well as to seasoned clinicians seeking to continue their professional development.”

Multiple Disease Processes (2020, November/December). *Monitor on Psychology*, 51(8), 22.

Keywords: COVID-19, Coronavirus

See also Mercante, Ferreli, De Virgilio et al. (2020) and Majid, Ali, Somayeh, & Cyrus (2020).

Murphy, B., Jr. (2017, March 3). Science says parents of the most successful kids do these 10 things. *Inc.* <https://www.inc.com/bill-murphy-jr/science-says-parents-of-the-most-successful-kids-do-these-10-things.html>

Myers, K. J., & Lane, W. D. (2021). *Counseling veterans: A practical guide*. San Diego, CA: Cognella Academic Publishing.

Nagasawa, M., Mitsui, S., En, S., Ohtani, N., Ohta, M., Sakuma, Y., Onaka, T., Mogi, K., & Kikusui, T. (2015, April 17). Oxytocin-gaze positive loop and the coevolution of human-dog bonds. *Science*, 348(6232), 333–336. 10.1126/science.1261022

Abstract Summary: Human-like modes of communication, including mutual gaze, in dogs may have been acquired during domestication with humans. Nagasawa et al. show that gazing behavior from dogs, but not wolves, increased urinary oxytocin concentrations in owners, which consequently facilitated owners' affiliation and increased oxytocin concentration in dogs. Further, nasally administered oxytocin increased gazing behavior in dogs, which in turn increased urinary oxytocin concentrations in owners. These findings support the existence of an interspecies oxytocin-mediated positive loop facilitated and modulated by gazing, which may have supported the coevolution of human-dog bonding by engaging common modes of communicating social attachment.

Najam, N. & Malik, I. (2003). Psychological problems and dream content of nightmare sufferers in Pakistan. *Dreaming*, 13(3), 135–143.

Nasreddine, Z. S., Phillips, N. A., Bédirian, V., Charbonneau, S., Whitehead, V., Collin, I., Cummings, J. L., & Chertkow, H. (2005). The Montreal Cognitive Assessment, MoCA: A brief screening tool for mild cognitive impairment. *Journal of the American Geriatric Society*, 53(4), 695–599. doi:10.1111/j.1532-5415.2005.53221.x. PMID 15817019
Few people in the general public knew about this brief screening test until 2018. According to an NBC News report on January 17, 2018, President Donald Trump was administered the screening test, reportedly at his request, on or around January 16, 2018. According to the news report, President Trump insisted on taking the test and passed it with flying colors, Dr. Ronny Jackson, presidential physician, told reporters.

National Board of Certified Counselors. (2022). *No surprises act*.
https://nbcc.org/govtaffairs/newsroom/no-surprises-act?_zs=EP2kD1&_zl=iXQa6

Key words: No Surprise Act, No Surprises Act, Good Faith Estimate

National Center for Biotechnology Information, U.S. National Library of Medicine. (2012). Brief history of suicide prevention in the United States [Appendix C]. In *National strategy for suicide prevention: Goals and objectives for action: A report of the U.S. Surgeon*

General and of the National Action Alliance for Suicide Prevention. Bethesda, MD: Author.

National Center for Health Statistics, Centers for Disease Control and Prevention. (2013). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>

National Center for Health Statistics, Centers for Disease Control and Prevention. (2018, July 26). Deaths: Leading causes for 2016. *National Vital Statistics Reports*, 67(6), 1–77. Atlanta, GA: Author. <https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>

National Center for Health Statistics, Centers for Disease Control and Prevention. (2019). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>
Coding Note: The 2019 ICD-10-CM codes are to be used from October 1, 2018 through September 30, 2019.

National Center for Health Statistics, Centers for Disease Control and Prevention. (2020). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>
Coding Note: The 2020 ICD-10-CM codes are to be used from October 1, 2019 through September 30, 2020.

National Center for Health Statistics, Centers for Disease Control and Prevention. (2021). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>
Coding Note: The 2021 ICD-10-CM codes are to be used from October 1, 2020 through September 30, 2021.

National Center for Health Statistics, Centers for Disease Control and Prevention. (2022). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author. <http://www.cdc.gov/nchs/icd/icd10cm.htm>
Coding Note: The 2022 ICD-10-CM codes are to be used from October 1, 2021 through September 30, 2022.

National Center for Health Statistics, Centers for Disease Control and Prevention. (2023). *International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)*. Atlanta, GA: Author.
Coding Note: The 2023 ICD-10-CM codes are to be used from October 1, 2022 through September 30, 2023.

National Center for Posttraumatic Stress Disorder. (2018, April). Understanding posttraumatic stress disorder: A guide for family and friends. Washington, DC: U. S. Department of Veterans Affairs. <https://www.ptsd.va.gov/>

National Institute on Drug Abuse (2019, April). What is kratom? *National Institute on drug Abuse*. <https://www.drugabuse.gov/publications/drugfacts/kratom>
According to NIDA (2019, p. 1), “Kratom is a tropical tree (*Mitragyna speciosa*) native to Southeast Asia, with leaves that contain compounds that can have psychotropic (mind-altering) effects. Kratom is not currently an illegal substance and has been easy to order on the internet. It is sometimes sold as a green powder in packets labeled “not for human consumption. It is also sometimes sold as an extract or gum (NIDA, 2019). Kratom can cause effects similar to both opioids and stimulants. Two compounds in kratom leaves, *mitragynine* and *7- α -hydroxymitragynine*, interact with opioid receptors in the brain, producing sedation, pleasure, and decreased pain, especially when users consume large amounts of the plant. Mitragynine also interacts with other receptor systems in the brain to produce stimulant effects. When kratom is taken in small amounts, users report increased energy, sociability, and alertness instead of sedation. However, kratom can also cause uncomfortable and sometimes dangerous side effects.

National Resource Center on LGBT Aging. (2021). *How to be an ally to transgender older adults*. New York, NY: Author. Available: <https://forge-forward.org/wp-content/uploads/2021/07/trans-ally-older-adults-english-final.pdf>
This 32-page downloadable resource is provided by the National Resource Center on LGBT Aging, which is an organization self-described as the following: “The National Resource Center on LGBT Aging is the country’s first and only technical assistance resource center aimed at improving the quality of services and supports offered to lesbian, gay, bisexual, and/pr transgender adults. Established in 2010 through a federal grant from the U.S. Department of Health and Human Services, the National Resource Center on LGBT Aging provides training, technical assistance, and educational resources to aging providers, LGBT organizations, and LGBT older adults. The center is led by SAGE in collaboration with leading aging and LGBT organizations from around the country” (2021, ii). See cross reference to SAGE National Resource Center on LGBT (2021, p. ii).

Niese, M. (2018, August 14). *Without legal way to buy medical marijuana, Georgians turn to CBD*. Atlanta Journal Constitution. <https://www.ajc.com/news/state--regional-govt--politics/without-legal-way-buy-medical-marijuana-georgians-turn-cbd/gmEJwVDVFMfquI8h9gSQN/>

Neidhardt, G. W. (2015, May 5). *King Charles of New York City*. Bloomington, IN: AuthorHouse. Paperback: 424 pages. ISBN-10: 1504908678 ISBN-13: 978-1504908672

Gary W. Neidhardt is a retired software executive and American history enthusiast who has been interested in the history of recovery from alcohol and drugs for many years. He literally stumbled upon *Habits That Handicap* by Towns, which was Towns only work that remains in print. The book mainly gathered dust in Neidhardt's library until a friend had his picture taken in front of the building that used to be Towns Hospital in New York City. Eventually, that picture peaked Neidhardt's curiosity, which has led to this book and his ongoing research into the history of this fascinating personality. Many years as a software executive provided Neidhardt with enough expertise to patiently research numerous medical magazines and dozens of books regarding Towns' published writings. Three dozen magazine articles and a large collection of advertisements of Towns Hospital have been incorporated into Neidhardt's treatise.

Book Review: "For those interested in the origins of AA founder Bill Wilson's 1934 white-light experience at Towns Hospital in New York, Neidhardt shares an encyclopedic knowledge not only of the history that led up to this experience but also of the life of the man who laid the psychopharmacological foundation of Wilson's final detoxification. Charles B. Towns devoted most of his adult life to pre-AA treatment of alcoholism and, later, to advocating for the prohibition of narcotic drugs that had fueled an addiction epidemic. It is ironic that in the year 2015, which represents the 100th anniversary of U.S. federal law that implemented the control of narcotic drugs, the life of Charles B. Towns is a largely unknown name in a country that contains only 5% of the world's population yet consumes 80% of world's supply of pain medication. Neidhardt's biography of Charles B. Towns reflects meticulous attention to details while describing the larger perspective of pre-AA attempts at addictive disease recovery and the political forces that became associated with this almost forgotten movement."

William F. Doverspike, Ph.D.

Book Reviewer

Neidhardt, G. W. (2022, November 3). *Bobbie B. The untold story of A.A.'s "fantastic communicator": A window into the Alcoholic Foundation Office in the 1940s*. Lilburn, GA: Lilburn.

Available: <https://www.amazon.com/Bobbie-Untold-Story-Fantastic-Communicator/dp/B0BLFWBVD8>

How did it happen that one of the most devoted and loyal individuals in the formative years of Alcoholics Anonymous (AA) became an almost completely forgotten figure? Although probably best known for the role she played as the National Secretary of the new organization that was forming its own identity, Bobbie B. essentially functioned as AA's unofficial director of communications in much of its early years. During her tenure at the AA headquarters, she was the central nexus whose letters shaped autonomous groups across the country to become more unified by a common set of principles.

Bobbie's tireless replies to voluminous correspondence contributed immeasurably to the shaping of the Traditions, which took written form during her tenure. Notwithstanding the abundance of biographies that have been written about the founding fathers of AA, this story has never been fully told by anyone—until now. Had her letters throughout the fellowship ever been published, she would have arguably been one of AA's most prolific authors. In the pages that follow, historian Gary Neidhardt reveals the story of this pioneering woman whose guidance letters—at least in the thousands—would have filled more pages than the Big Book itself.

The history of any institution is filled with captivating characters, entertaining drama, and unsolved mysteries. The biographer's task of separating fact from fiction is not an easy one. Yet Neidhardt painstakingly explores uncharted territory with a balance of courage and scholarly rigor. In many instances, this biography uses Bobbie's own words to tell her story. Compellingly writing with a combination of curiosity and compassion, Neidhardt provides an enlightening examination of roughly a thousand letters that have never been published. The result of this effort is a meticulously researched and densely packed account of the woman who was AA's most steadfast correspondent: her early life, her relationships, her countless letters, and her ideals that helped shape the evolving organization into what has become an enduring American institution that has reached across the entire globe.

Many mysteries continue to shroud the life—and untimely death—of the enigmatic Bobbie B., but *The Untold Story of A.A.'s Fantastic Communicator* provides a complete and engaging account of a fascinating chapter in the history of AA. Reading this book is like walking a trail with a guide who is a literary archeologist. Neidhardt has unearthed a wealth of archival materials, documents, and photographs that until now have been hidden away for almost seventy years. Like all great journeys, this one begins with the first steps.

William F. Doverspike
Atlanta Counseling Center

Neukrug, E. (2018). *Counseling theory and practice* (2nd ed.). Belmont, CA: Brooks/Cole, Cengage Learning.

Edward Neukrug, Ed.D., Professor of Counseling and Human Services at Old Dominion University, is a licensed professional counselor and licensed psychologist. His book is organized into four primary sections, each of which addresses a theoretical orientation. Section 1 explores psychodynamic approaches, including psychoanalysis, Jungian therapy, and Adlerian therapy. Section 2 is devoted to existential-humanistic approaches such as existential therapy, Gestalt therapy, and person-centered counseling, while Section 3 discusses cognitive-behavioral approaches, including behavior therapy, cognitive behavior therapy, rational-emotive behavior therapy, and reality therapy. Section 4 describes post-modern therapies and examines the relatively new approaches of

narrative therapy, solution-focused brief therapy, and relational cultural therapy, a form of feminist therapy. The final chapter explores a number of more recent and emerging theories.

Newberger, D. S. (2000, August 15). Down syndrome: Prenatal risk assessment and diagnosis. *American Family Physician*, 62(4), 825–832, 837–838.

Newschaffer, C. J., Falb, M. D. & Gurney, J. D. (2005). National autism prevalence trends from United States special education data. *Pediatrics*, 115, e277-e282.
By 1992, 19 in every 10,000 six-year-old Americans were being diagnosed as autistic.

Newton, C. (2020, March 27). How to stop trolls from taking over your Zoom call.
<https://www.theverge.com/2020/3/27/21197090/zoombombing-zoom-stop-how-to-porn-trolls-video-chat-screen-sharing>

Noakes, C. (2018, August 2). *Georgia prisoners resist psychological torture*. Workers World.
<https://www.workers.org/2018/08/38451/>
Christian Noakes provides a perspective on The Georgia Diagnostic and Classification Prison in Jackson, otherwise known as Jackson Prison, which is describes as “subjecting inmates there to extremely dehumanizing conditions.”

Noesner, G. (2010). *Stalling for time: My life as an FBI hostage negotiator*. New York, NY: Random House.
Gary Noesner, the FBI’s chief hostage negotiator, recounts harrowing standoffs, including the Waco siege with David Koresh and the Branch Davidians, the siege at Waco, the Montana Freemen standoff, and the D.C. sniper attacks. As Noesner observed, “Listening is the cheapest concession we can ever make” (p. x). As an adage that can serve psychotherapists, when people are escalating, it’s better to deescalate.

Nolan, J. M., Ford, S., & Kress, V. E. (2005). A comprehensive model for depressive severe and persistent mental illness on campuses: The new diversity initiative. *Journal of College Counseling*, 8(2), 172–179.

Noonan, M., Rohloff, H., & Ginder, S. (2015, August). *Mortality in local jails and state prisons, 2000–2013 - Statistical tables*. Washington, DC: U.S. Department of Justice.
<https://assets.documentcloud.org/documents/2191181/mortality-in-local-jails-and-state-prisons.pdf>
According to the Bureau of Justice Statistics, suicide has been the leading cause of death in U.S. jails every year since 2000. In 2013, one third (34%) of jail inmate deaths were due to suicide. The suicide rate increased 14%, from 40 suicides per 100,000 jail inmates in 2012 to 46 per 100,000 in 2013.

- Norbury, C. F., & Sparks, A. (2013). Difference or disorder? Cultural issues in understanding neurodevelopmental disorders. *Developmental Psychology, 49*(1), 45–58.
- Norman, W. T. (1963). Toward an adequate taxonomy of personality attributes: Replicated factor structure in peer nomination personality rating. *Journal of Abnormal and Social Psychology, 66*, 574–583.
- Numabe, H. (2003). First meiotic division: prophase: Leptotene normal trisomy 21, chromosome 21, other chromosomes [PowerPoint slides]. <https://slideplayer.com/slide/9914219/>
- Nussbaum, A. M. (2013). *The pocket guide to the DSM-5™ diagnostic exam*. Washington, DC: American Psychiatric Publishing.
- Nutt, D., King, L.A., Saulsbury, W., & Blakemore, C. (2007). Development of a rational scale to assess the harm of drugs of potential misuse. *The Lancet, 369*, 1047–1053.
- Oates, W. E. (1987). *Behind the masks: Personality disorders in religious behavior*. Louisville, KY: The Westminster Press.
- Wayne Edward Oates, Ph.D. (1917-1999) was Psychology of Religion at Southern Baptist Theological Seminary. After graduating from Southern Baptist Theological Seminary (Louisville, Kentucky) with a Ph.D. in Psychology of Religion, Oates joined the School of Theology in 1947 as Professor of Psychology of religion and pastoral care. He held the post until he joined the University of Louisville Medical School in 1974. He coined the term “workaholic.”
- O’Brien C. P., Volkow, N., & Li, T-K. (2006, May). What’s in a word? Addiction versus dependence in DSM-V. *American Journal of Psychiatry, 163*(5), 764–765.
<https://ajp.psychiatryonline.org/doi/full/10.1176/ajp.2006.163.5.764>
- Charles P. O’Brien M.D., Ph.D. (University of Pennsylvania), Nora Volkow M.D. (Director of the National Institute on Drug Abuse; NIDA), and Ting-Kai Li, M.D. (School of Medicine, Indiana University Purdue University Indianapolis; IUPUI) have stated that the American Psychiatric Association committee responsible for revising the DSM-III in the 1980s favored the term “dependence” over “addiction” by a single vote. “The adaptations associated with drug withdrawal are distinct from the adaptations that result in addiction, which refers to the loss of control over the intense urges to take the drug even at the expense of adverse consequences.” These authors and other psychiatrists have argued that the DSM conflates addiction and dependence.
- O’Connor, N. (1989). The performance of the “idiot-savant”: Implicit and explicit. *International Journal of Language & Communication, 24*(1), 1–20.

O'Driscoll, C., & Flanagan, E. (2016). Sexual problems and post-traumatic stress disorder following sexual trauma: A meta-analytic review. *Psychology and Psychotherapy*, 89(3), 351–367. <https://doi.org/10.1111/papt.12077>

O'Leary, K. D., Heyman, R. E., & Jongsma, A. E. (2011). *The couples psychotherapy treatment planner*. New York, NY: John Wiley and Sons.

Okamoto, A., Dattilio, F. M., Dobson, K. S., & Kazantzis, N. (2019). The therapeutic relationship in cognitive–behavioral therapy: Essential features and common challenges. *Practice Innovations*, 4(2), 112–123. <http://dx.doi.org/10.1037/pri0000088>

The authors discuss the therapeutic relationship in cognitive–behavioral therapy (CBT) and ways of using relational tools to overcome common challenges encountered by CBT therapists. Despite an emphasis on techniques and quantifying change mechanisms, the therapeutic relationship is the context within which interventions occur and is itself a critical aspect of treatment. The authors discuss various aspects of the client–therapist relationship, including the concepts of collaboration, empiricism, and Socratic dialogue.

Olson, K. R., Durwood, L., Horton, r., Gallagher, N. M., & Devor, A. (2022, July 13). Gender identity 5 Years after social transition. *Pediatrics*, 150(2), e2021056082. <https://doi.org/10.1542/peds.2021-056082>

Authors: Kristina R. Olson, Ph.D., Lily Durwood, Ph.D., Rachel Horton, B.S., Natalie M. Gallagher, Ph.D., & Aaron Devor, Ph.D. Results: 5 years after their initial social transition, 7.3% of youth had retransitioned at least once. At the end of this period, most youth identified as binary transgender youth (94%), including 1.3% who retransitioned to another identity before returning to their binary transgender identity. A total of 2.5% of youth identified as cisgender and 3.5% as nonbinary. Later cisgender identities were more common among youth whose initial social transition occurred before age 6 years; their retransitions often occurred before age 10 years. These results suggest that retransitions are infrequent. More commonly, transgender youth who socially transitioned at early ages continued to identify that way.

Omer, S. B. (2020, October 27). The discredited doctor hailed by the anti-vaccine movement. *Nature*. <https://www.nature.com/articles/d41586-020-02989-9>

Keywords: Autism, debunk, vaccines, vaccination, retract

Saad Omer provides insights into a compelling question: “How an English physician from a long line of medics become one of the most prominent faces of the global anti-vaccine movement?” (para. 6).

O'Toole, M. E., & Bowman, A. (2011, October 13). *Dangerous instincts: How gut feelings betray us*. New York, NY: Hudson Street Press.

Written alone with co-author Alisa Bowman, this book is largely based on the work of a former FBI Supervisory Special Agent Mary Ellen O'Toole, Ph.D. (2000), who was one of the most senior profilers until her retirement in 2009.

O'Toole, M. E., & Bowman, A. (2012, October). *Dangerous instincts: How gut feelings betray us*. New York, NY: Plume, a Penguin Group.

This edition was previously published by Hudson Street Press.

Oates, W. E. (1987). *Behind the masks: Personality disorders in religious behavior*. Louisville, KY: The Westminster Press.

Orr-Andrews, A. (1987). The case of Anna O.: A neuropsychiatric perspective. *Journal of the American Psychoanalytic Association*, 35(2), 387–419.

Osman, A., Barrios, F. X., & Osman, J. R. (1994). Behavioral assessment review: The Reason for Living Inventory. *The Behavior Therapist*, 17, 112–113.

The *Reasons for Living Inventory* (RFL-48) is available online:

<http://tools.farmacologiaclinica.info/index.php>

Osser, D. N. (2019, February 2020). The neuroprotective effects of lithium. *Psychiatric Times*, 36(2), 21.

Keywords: neuroprotective effects of lithium in bipolar disorder

David N. Osser, M.D. discusses the neuroprotective effects of lithium. Osser (p. 21) states, “Bipolar disorder seems to be characterized by a gradual progressive shrinkage in some areas of cortical gray matter as well as some tracks of white matter. These losses are associated with increased neurocognitive impairment.” Osser cites Giakoumatos et al. (2015), whose research suggests that there may be better preservation of white matter structural integrity in patients who have had long-term treatment with lithium. Osser notes that reduction of gray matter volume has been shown to be arrested or even reversed to some degree by long-term lithium treatment of bipolar patients. Adding that no other mood stabilizers have been shown to have this neurocognitive protective effect, Osser (2020, p. 21) observes, “Some ambivalent patients have been persuaded to accept lithium after reading the article by Giakoumatos and colleagues. (See also Giakoumatos et al., 2015).

Othmer, E., & Othmer, S. C. (1989). *The clinical interview, using DSM-III-R*. Washington, DC: American Psychiatric Press.

Othmer, E., & Othmer, S. C. (1994). *The clinical interview, using DSM-IV, Volume I: Fundamentals*. Arlington, VA: American Psychiatric Publishing.

- Othmer, E., & Othmer, S. C. (1994). *The clinical interview using DSM-IV, Volume 2: The difficult patient*. Arlington, VA: American Psychiatric Publishing.
- Othmer, E., & Othmer, S. C. (2002). *The clinical interview, using DSM-IV-TR, Volume 1: Fundamentals* [2nd ed.]. Arlington, VA: American Psychiatric Publishing.
- Othmer, E., & Othmer, S. C. (2002). *The clinical interview using DSM-IV-TR, Volume 2: The difficult patient* [2nd ed.]. Arlington, VA: American Psychiatric Publishing.
- Overwhelmed. (2016, July 18). *The adolescent trans trend: 10 influences* [Blog post]. <https://4thwavenow.com/>
4thWaveNow is a self-described as “a community of people who question the medicalization of gender-atypical youth.” The post titled “The Adolescent Trans Trend” was written by Overwhelmed, a 4thWaveNow contributor and the mother of a teen daughter who insisted she was transgender, but who subsequently changed her mind. Other parents in the same situation have shared their experiences on 4thWaveNow, and a new research study (currently recruiting) is the first to systematically examine the phenomenon of “trans trending” amongst tweens and teens. The post is available at this link: <https://4thwavenow.com/tag/alice-dreger/>
- Owen, D., & Davidson, J. (2009, May 1). Hubris syndrome: An acquired personality disorder? A study of US Presidents and UK Prime Ministers over the last 100 years. *Brain*, 132(5), 1396–1406. <https://doi.org/10.1093/brain/awp008>
- Ozonoff, S., Dawson, G., & McPartland, J. C. (2014, November 14). *A parent’s guide to high-functioning autism spectrum disorder: How to meet the challenges and help your child thrive*. New York, NY: Guilford Publications.
- Palmer, C. (2019, December). The top 10 journal articles. *Monitor on Psychology*, 50(11), 44–47. <http://www.apamonitor-digital.org/apamonitor/201912/MobilePagedReplica.action?pm=1&folio=44#pg47>
APA staff writer Chris Palmer provides a summary of the 10 most downloaded APA articles in 2019, a year in which more than 4,500 articles were published in APA’s 89 journals.
- Parker, G. (Ed.). (2019). *Bipolar II disorder: Modelling, measuring, and managing* (3rd ed.). Cambridge, UK: Cambridge University Press.
Psychiatrist Gordon Parker surveyed 18 international experts regarding their treatment of bipolar II disorder. Based on the opinions of these 18 experts, the results can be summarized as follows: (1) Ten experts agreed that antidepressants are helpful in bipolar

II but are best used with a mood stabilizer to avoid hypomania, whereas six experts agreed that antidepressants are best avoided or used with a mood stabilizer as a last resort in bipolar II. Only one expert held the opinion that antidepressants are helpful in bipolar II and do not cause hypomania, and only one expert held that antidepressants should almost always be avoided in bipolar II because of the risk of hypomania and cycling. SSRIs and bupropion were viewed as the preferred antidepressants in bipolar II treatment, because these drugs have the lowest risk of inducing mania. Because the SNRIs carry a higher risk of mania, the respondents were more split in their opinions on SNRIs. Nearly all of the experts agreed that the tricyclic antidepressants and monoamine oxidase inhibitors (MAOs) were associated with the highest risk of mania.

Patel, K. S., & Hughes, A. J. (2019). Assessment and treatment of hoarding behavior. *Journal of Health Service Psychology, 45*(1), 11–16.

Using a cognitive-behavioral model applied to hoarding disorder, the authors address information processing deficits, dysfunctional beliefs about possessions, behavioral avoidance, and emotional attachment to possessions.

Pederson, T. (2021, October 14). All about amygdala hijack. *PsychCentral*.

<https://psychcentral.com/health/amygdala-hijack#symptoms>

Keywords: amygdala hijacking, emotional regulation, emotional dysregulation
Traci Pedersen is a freelance author with more than 15 years' experience writing on themes of psychology, science, and alternative health for a variety of publications. She also has written 14 science chapter books and numerous teacher resource books for the elementary classroom.

Pediaditakis, N. (2019). The dog that did not bark. *Psychiatric Times, 36*(1), 5. Perlin, M. L. (2000). *The hidden prejudice: Mental disability on trial*. Washington, DC: American Psychological Association.

Nicholas Pediaditakis, M.D. shares some thoughts on the pathogenesis and persistence of prevalence of schizophrenia and bipolar affective disorder in view of current genetic discoveries. Dr. Pediaditakis speculates that the “lopsided asocial” traits in a pool of vulnerable individuals in whom schizophrenia and bipolar disorder may develop may be offset by an evolutionary advantage related to some of these same individuals being able to think in alternative ways, discern mathematical and artistic patterns, and so forth. This advantageous evolutionary trade-off may help explain the persistence of the 4% prevalence for both disorders worldwide in spite of the evolutionary disadvantages (i.e., early onset, low fertility, early death).

Pelham, W. E., Page, T. F., Altszuler, A. R., Gnagy, E. M., Molina, B. S. G., & Pelham, W. E. (2020, February). The long-term financial outcome of children diagnosed with ADHD. *Journal of Consulting and Clinical Psychology, 88*(2), 160–171. doi: 10.1037/ccp0000461. Epub 2019 Dec 2.

The authors drew data from a prospective case-control study (PALS) by following participants with a rigorous diagnosis of ADHD during childhood (N = 364) and demographically matched controls (N = 240) for nearly 20 years. Participants and their parents reported on an array of financial outcomes when participants were 25 and 30 years old. At age 30, adults with a history of ADHD exhibited substantially worse outcomes than controls on most financial indicators, even when they and their parents no longer endorsed any DSM symptoms of ADHD. Between ages 25 and 30, probands had exhibited considerably slower growth than controls in positive financial indicators (e.g., monthly income) and substantially less reduction than controls in indicators of financial dependence (e.g., living with parents), indicating worsening or sustained deficits on nearly all measures. When earnings trajectories from age 25 to age 30 were extrapolated using matched census data, male probands were projected to earn \$1.27 million less than controls over their working lifetime, reaching retirement with up to 75% lower net worth. The authors concluded that the financial deficit of adults with history of childhood ADHD grows across early adulthood. Projections based on early financial trajectories suggest very large cumulative differences in earnings and savings.

Perls, F. S. (1969). *Gestalt therapy verbatim*. Moab, UT: Real People Press.

Frederick S. Perls, M.D., Ph.D. was the originator and developer of Gestalt Therapy, which emerged partially as a reaction to what he saw as the over-intellectualization of psychoanalysis. Perls believed the chief neurotic characteristic of our age and culture is that we live too much in our heads, we are desensitized to our bodies, and thus we are often unaware and ineffective in meeting our organismic needs.

Pettit, C. (2006). *Empty: A story of anorexia* (Rev. ed.). Grand Rapids, Michigan: Fleming R. Revell. Original edition was published in 2003.

As a college student with a tennis scholarship, Christie Pettit found herself engaged in compulsively exercising, eating less and less, and spiraling downward in a battle against anorexia. More than five million adolescent girls struggle with eating disorders, and more than 80 percent of American women are unhappy with their bodies. Christie Pettit knows these statistics firsthand because she was one of them. In her revised edition of *Empty*, Christie shares her experience of the spiritual dimension of eating disorders and describes how she turned to the Bible as a source of strength and encouragement to help her overcome anorexia.

Phillips, D. P. (1974). The influence of suggestion on suicide: Substantive and theoretical Implications of the Werther Effect. *American Sociological Review*, 39, 340–354.

Professor David P. Phillips, Ph.D. (Department of Sociology at the University of California in San Diego, California) coined the term “media contagion” (Phillips, 1980, 1986), which was an extension of cultural contagion and behavioral contagion theories.

Phillips groundbreaking research published in 1974 revealed how highly publicized stories of deviant and dangerous behavior influences so-called copycat incidents. He showed how suicide rates spike in the week following an inappropriately-publicized celebrity suicide, in contrast to the trend of no increase in suicides in the week following a media strike that unintentionally suppresses such coverage. Of historical interest, the Werther Effect was named after the protagonist in Goethe's novel, *The Sorrows of Young Werther*, in which the hero kills himself. Because of a rash of suicides by young men who had read it, the novel was banned in some European countries after its publication nearly 200 years ago. Some had even dressed like Werther or had left the book open to the passage detailing his death when they killed themselves.

Phillips, D. P. (1980). Airplane accidents, murder, and the mass media: Towards a theory of imitation and suggestion. *Social Forces*, 58(4), 1001–1024.

Phillips, D. P. (1986). Natural experiments on the effects of mass media violence on fatal aggression: Strengths and weaknesses of a new approach. *Advances in Experimental Social Psychology*, 19, 207–250. [https://doi.org/10.1016/S0065-2601\(08\)60215-4](https://doi.org/10.1016/S0065-2601(08)60215-4)

Phillips, R. T. M. (2012, June). Predicting the risk of future dangerousness. *American Medical Association Journal of Ethics*, 14(6), 462–476. 10.1001/virtualmentor.2012.14.6.hlaw1-1206

Robert T. M. Phillips, M.D., Ph.D. is an adjunct professor of law at the University of Maryland School of Law in Baltimore and the 2011 Yochelson Distinguished Professor of Forensic Psychiatry at the Yale University School of Medicine in New Haven, Connecticut. In this article, he argues for “competent and reliable comprehensive clinical psychiatric risk assessment that is rooted in evidence-based practice standards for medical evaluation and that considers all relevant clinical and historical information including data from standardized risk assessment tools” (p. 476).

Picker, J. (2005, August 1). The role of genetic and environmental factors in the development of schizophrenia. *Psychiatric Times*, 22(9).

Jonathan Picker, M.D. directs the Metabolic Neurobehavioral Genetics Clinic at Children's Hospital Boston where he holds appointments in genetics and child psychiatry. He also has a research post at McLean Hospital.

Pickett, D. Classifications and Public Health Data Standards. Centers for Disease Control and Prevention. National Center for Health Statistics. ICD-10 Coordination and Maintenance Committee (2018, September 12). *Update on ICD-11: The WHO launch and implications for U.S. implementation*. Atlanta, GA: Author. <https://www.cdc.gov/nchs/data/icd/ICD-11-WHOV-CM-2018-V3.pdf>

- Pies, R. W. (2019, August 16). The misplaced media focus on Jeffrey Epstein's death. *Psychiatric Times*. <https://www.psychiatrytimes.com/couch-crisis/beyond-jeffrey-epsteins-death>
- This article, formerly titled "Beyond Jeffrey Epstein's Death," dated August 13, 2019, has since been updated by the author, psychiatrist Ronald W. Pies, M.D., who discusses the scandal of incarcerating those with serious mental illness. Citing Bureau of Justice Statistics, Dr. Pies points out that suicide has been the leading cause of death in U.S. jails every year since 2000.
- Pinker, S. (2012, September 25). *The better angels of our nature: Why violence has declined*. New York, NY: Penguin Books.
- Steven Pinker argues that there has been a decline in all forms of violence over time and that this has corresponded to an ever increasing sensitivity to harm. His arguments have implications for concepts ranging from trigger warnings to microaggressions.
- Pinto-Wagner, A. (2002). *Worried no more: Help and hope for anxious children*. Rochester, New York, NY: Lighthouse Press.
- Psychologist Aureen Pinto-Wagner, Ph.D. described the vicious cycle of avoidance (p. 49) in her book that is designed for parents of anxious children.
- Poland, S., & McCormick, J. S. (1999). *Coping with a crisis: A resources for schools, parents, and communities*. Longmont, CO: Sopris West.
- Pope, K. S., & Vasquez, M. J. T. (2016). *Ethics in psychotherapy and counseling: A practical guide* (5th ed.). New York, NY: John Wiley & Sons.
- Among other topics addressed in their book, Pope and Vasquez (2016) provide a list of 26 logical fallacies that can slide into the background of psychotherapy and blend in with a therapist's best reasoning. Of particular interests to diagnosticians is the "Nominal Fallacy" (i.e., the mistake of assuming that because we have given a name to something, therefore we have explained it). For a review of "Common Logical Fallacies in Psychology: 26 Types and Examples," see this link: <https://kspope.com/fallacies/fallacies.php>
- Popescu, A. (2021). Trauma-based energy psychology treatment is associated with client rehabilitation at an addiction clinic. *Energy Psychology Journal*, 13(1). doi 10.9769/EPJ.2021.13.1.AP
- Abstract: Energy Psychology (EP) comprises a set of innovative and powerful techniques that can be used to enhance treatment progress and outcomes for addiction and co-occurring disorders, particularly posttraumatic stress disorder (PTSD). This article identifies the limitations of the current addiction treatment paradigm and presents a variety of ways in which one dual diagnosis treatment program for women addresses

these limitations with the EP approach. Research on EP and its mechanism of action is presented, along with specific examples of how the tools are used at the treatment facility, case studies, client and therapist feedback, treatment guidelines, and outcome data. Data for 123 clients in the program collected over a 3.5-year period include reductions in mental health symptomology during treatment as follows: depression scores from 79% at intake to 16% at last survey, $p < .001$; anxiety scores from 73% to 8%, $p < .001$; trauma symptoms from 76% to 30%, $p < .001$; suicidality from 53% to 11%, $p < .001$; binge eating from 33% to 11%, $p = .01$; and compensatory eating disorder behaviors from 41% to 11%, $p = .074$. The evidence presented indicates that EP can be a very empowering and effective adjunct to treatment for co-occurring disorders, particularly for emotional self-regulation, cognitive restructuring, and trauma processing. The data and clinical results from Avery Lane are consistent with those derived from meta-analyses, clinical trials, and experiences at other treatment centers. This body of literature demonstrates that EP is a powerful, evidence-based approach that sets the standard for effective addiction treatment.

Porges, S.W., & Carter, C. S. (2011). Neurobiology and evolution: Mechanisms, mediators, and adaptive consequences of caregiving. In S. L. Brown, R. M. Brown, & L. A. Penner (Eds.). *Self interest and beyond: Toward a new understanding of human caregiving* (pp. 53–71). New York, NY: Oxford University.

Porges, S. W., & Furman, S. A. (2011). The early development of the autonomic nervous system provides a neural platform for social behavior: A polyvagal perspective. *Infant and Child Development*, 20, 106–118.

Porges, S.W., & Lewis, G. F. (2009). The polyvagal hypothesis: Common mechanisms mediating autonomic regulation, vocalizations, and listening. In S. M. Brudzynski (Ed.). *Handbook of mammalian vocalizations: An integrative neuroscience approach* (pp. 255–264). Amsterdam: Academic Press.

Porges, S. W., Macellaio, M., Stanfill, S. D., McCue, K., Lewis, G. F., Harden, E. R., Handelman, M., Denver, J., Bazhenova, O. V., & Heilman, K. J. (2013). Respiratory sinus arrhythmia and auditory processing in autism: Modifiable deficits of an integrated social engagement system? *International Journal of Psychophysiology*, 88, 261–270.

Porges, S.W. (1992). Vagal tone: A physiological marker of stress vulnerability. *Pediatrics* 90, 498–504.

Porges, S. W. (1995). Cardiac vagal tone: A physiological index of stress. *Neuroscience and Biobehavioral Reviews*, 19, 225–233.

- Porges, S. W. (1995). Orienting in a defensive world: Mammalian modifications of our evolutionary heritage. A polyvagal theory. *Psychophysiology*, *32*, 301–318.
- Porges, S. W. (1996). Physiological regulation in high-risk infants: A model for assessment and potential intervention. *Development and Psychopathology*, *8*, 43–58.
- Porges, S. W. (1998). Love: An emergent property of the mammalian autonomic nervous system. *Psychoneuroendocrinology*, *23*, 837–861.
- Porges, S. W. (2001). The polyvagal theory: Phylogenetic substrates of a social nervous system. *International Journal of Psychophysiology*, *42*, 123–146.
- Porges, S. W. (2003). Social engagement and attachment: A phylogenetic perspective. Roots of mental illness in children. *Annals of the New York Academy of Sciences*, *1008*, 31–47.
- Porges, S. W. (2003). The polyvagal theory: Phylogenetic contributions to social behavior. *Physiology and Behavior*, *79*, 503–513.
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- Porges, S. W. (2005). The vagus: A mediator of behavioral and visceral features associated with autism. In M. L. Bauman & T. L. Kemper (Eds.). *The neurobiology of autism* (pp. 65–78). Baltimore, MD: Johns Hopkins University Press.
- Porges, S. W. (2006). Asserting the role of biobehavioral sciences in translational research: The behavioral neurobiology revolution. *Developmental Psychopathology*, *18*, 923–933.
- Porges, S. W. (2007). The polyvagal perspective. *Biological Psychology*, *74*, 116–143.
- Porges, S. W. (2009). Reciprocal influences between body and brain in the perception and expression of affect: A polyvagal perspective. In D. Fosha, D. Siegel, & M. Solomon (Eds.). *The healing power of emotion: Affective neuroscience, development, and clinical practice* (pp. 27–54). New York, NY: Norton.
- Porges, S. W. (2009). The polyvagal theory: New insights into adaptive reactions of the autonomic nervous system. *Cleveland Clinic Journal of Medicine*, *76*, S86-90.
- Porges, S. W. (2011). *The polyvagal theory: Neurophysiological foundations of emotions, attachment, communication, and self-regulation*. New York, NY: WW Norton.

Porges, S. W., & Coles, M. G. H. (Eds.) (1976). *Psychophysiology*. Stroudsburg, PA: Dowden, Hutchinson & Ross.

Premack, D. (1959). Toward empirical behavior laws: I. Positive reinforcement. *Psychological Review*, 66(4), 219–233.

Premack, D. (1963). Rate differential reinforcement in monkey manipulation. *Journal of the Experimental Analysis of Behavior*, 6, 81–90.

The Premack principle was originally derived from a study of Cebus monkeys by Professor David Premack, who observed that a monkey would perform a less desirable activity to have an opportunity to perform a more desirable activity. In other words, activities may themselves be positive reinforcers. This principle has been widely used by therapists practicing Applied Behavior Analysis. In behavioral terms, if high-probability behaviors (more desirable behaviors) are made contingent upon lower-probability behaviors (less desirable behaviors), then the lower-probability behaviors are more likely to occur. Operationally defined, more desirable behaviors are simply those behaviors that individuals spend more time doing if permitted, whereas less desirable behaviors are those that individuals spend less time doing when acting freely. The principle is a restatement of the wisdom of “Grandma’s rule” (i.e., “Work before play”).

Prichard, J. R., Cunningham, B., Broek, L., & Hartman, M. (2016, November). The importance of college sleep: Connections to mental health, retention and academic success. Program presentation at the NASPA – Student Affairs Administrators in Higher Education Region IV-W/E Conference. St. Louis, MO.

Prochaska, J. O. (1979). *Systems of psychotherapy: A transtheoretical analysis*. Oxford, England: Dorsey.

Prochaska, J. O., DiClemente, C. C., & Norcross, J. C. (1992, September). In search of how people change: Applications to addictive behaviors. *American Psychologist*, 47(9), 1102–1114.

Prochaska, J. O., Norcross, J. C., & DiClemente, C. C. (1994). *Changing for good: A revolutionary six-stage program for overcoming bad habits and moving your life positively forward*. New York, NY: Avon Books.

Prochaska, J. O., Redding, C. A., & Evers, K. (2002). The transtheoretical model and stages of change. In K. Glanz, B. K. Rimer, & F. M. Lewis, (Eds.) *Health behavior and health education: Theory, research, and practice* (3rd ed.). San Francisco, CA: Jossey-Bass, Inc.

Pryor, K. (1984). *Don't shoot the dog: The new art of teaching and training*. New York, NY: Simon and Schuster. [A paperback version of this book was also published in by Bantam Books in 2006.]

Karen Pryor, who is one of the early proponents of clicker training and the use of operant principles to train dolphins, provides an insightful and practical discussion of operant techniques and schedules of reinforcement that are used by professional dog trainers as well as by psychologists treating behavioral problems.

PSYPACT Commission. (2022, June 29). *Statement of the Psychology Interjurisdictional Compact Commission regarding emotional support animal letters issued by American Service Pets*. https://psypact.site-ym.com/resource/resmgr/commission/esa_statement_from_psypact_c.pdf

Psychology Interjurisdictional Compact (PSYPACT). (2019, September 9). *Understanding how PSYPACT works*. www.psypact.org

According to PSYPACT (2019, p. 1), here is how the process works:

- (1) Psychology Interjurisdictional Compact (PSYPACT) legislation is enacted by a state legislature. Upon enactment, the state officially joins PSYPACT.
- (2) Each state appoints a representative to serve as that state's Commissioner. The PSYPACT Commission is the governing body of PSYPACT and is responsible for writing the Bylaws and Rules of PSYPACT.
- (3) Psychologists licensed in their Home State can obtain authorization to practice under PSYPACT from the PSYPACT Commission. A psychologist's practice under PSYPACT can occur in two ways (which are not mutually exclusive):
 - (1) **Authority to Practice Interjurisdictional Telepsychology (APIT)**, requires the ASPPB E.Passport to practice telepsychology into a *Receiving State*, which is a Compact state that has enacted PSYPACT legislation, and
 - (2) **Temporary Authorization Practice (TAP)** requires the ASPPB Interjurisdictional Practice Certificate (IPC) to conduct temporary practice (i.e., temporary practice that must be in-person and face-to-face) in a *Distant State*, which is a Compact state that has enacted PSYPACT legislation.

Psychology Interjurisdictional Compact (PSYPACT) Commission. (2020, February 27). *Compact temporary authorization to practice*. <https://psypact.site-ym.com/page/GovernanceDocuments>

Section 5 (Compact temporary authorization to practice) of Article V (Compact temporary authorization to practice) was drafted November 21, 2019, introduced at public meeting on November 21-22, 2019, and became effective February 27, 2020.

Psychology Interjurisdictional Compact (PSYPACT) Commission. (2020, February 27). *Conditions of telepsychology practice into a receiving state*. <https://psypact.site-ym.com/page/GovernanceDocuments>

Section 6 (Conditions of Telepsychology Practice into a Receiving State) of Article VI (Psychology Interjurisdictional Compact (PSYPACT), was drafted November 21, 2019, introduced at public meeting on November 21-22, 2019, and became effective February 27, 2020.) was drafted November 21, 2019, introduced at public meeting on November 21-22, 2019, and became effective February 27, 2020.

Section 6.2 Initiation of Psychological Services: A psychologist must initiate a client/patient contact in a psychologist's Home State via telecommunications technologies when treating a client/patient in a Receiving State.

Section 6.3 Provision of Psychological Services: For the purposes of this Compact, the provision of psychological services is deemed to take place at the physical location of the psychologist.

Section 6.4 Scope of Practice: For the purposes of this Compact, a psychologist practices under the scope of practice of the State Psychology Regulatory Authority of the Receiving State.

IMPORTANT: For the practice of telepsychology under PSYPACT, Home State is the PSYPACT state where you are licensed to practice and physically located when telepsychological services are delivered.

Psychology Interjurisdictional Compact (PSYPACT) Commission. (2022, June 29). *Statement of the Psychology Interjurisdictional Compact Commission regarding emotional support animal letters issued by American Service Pets*. https://psypact.site-ym.com/resource/resmgr/commission/esa_statement_from_psypact_c.pdf

Puhan, M. A., Suarez, A., Cascio, C. L., Zahn, A., Heitz, M., & Braendli, O. (2006). Didgeridoo playing as alternative treatment for obstructive sleep apnoea syndrome: Randomised controlled trial. *British Journal of Medicine*, 332, 266–270. doi: 10.1136/bmj.38705.470590.55 (published December 23, 2005). <http://www.bmj.com/cgi/content/full/332/7536/266>

Putts, M. R. (2014). Recognizing trauma and posttraumatic stress disorder symptoms in individuals with psychotic disorders. *Journal of Counseling and Development*, 92(1), 83–89.

Quay, H. C. (1993). The psychobiology of undersocialized aggressive conduct disorder: A theoretical perspective. *Development and Psychopathology*, 5, 165–180.

Herbert Quay discusses how an imbalance between the behavioral inhibition system (BIS) and the reward system (RS) may make negative feelings (i.e., fear and anxiety) produced by the BIS less apparent, while making the positive feelings (i.e., euphoria) produced by the RS more prominent in individuals with antisocial personality disorder.

Radhakrishnan, R., Ranganathan, M., & D'Souza, D. C. (2019, May 7). Medical marijuana: What physicians need to know. *Journal of Clinical Psychiatry*, 80(5), pii: 18ac12537. doi: 10.4088/JCP.18ac12537.

Rajiv Radhakrishnan, MBBS, MD, Department of Psychiatry, Yale University School of Medicine, and colleagues found that schizophrenia or bipolar disorder developed in 47% of patients who became psychotic on cannabis over the next four years. This incidence was the highest incidence of conversion after initial psychosis following use of various substances; the second highest was with amphetamine (32%). More patients converted to schizophrenia than bipolar disorder.

Ramirez-Moya, L. (2022, July 7). Telehealth's calming effect on autism. *Psychiatric Times*. <https://www.psychiatristimes.com/view/telehealths-calming-effect-on-autism>

Keywords: Autism, Telehealth, Telepsychology

Lorerky Ramirez-Moya, M.D., a board-eligible child and adolescent psychiatrist with Mindpath Health, discusses some of the benefits and drawbacks of using telehealth with people with autistic spectrum disorders. While pregnant with her son, she completed a child and adolescent psychiatry fellowship in 2011 at the University of Mexico. She focused on learning about autism and other neurodevelopmental disabilities at the Center of Developmental Disabilities, UNM. Two years later, her son was diagnosed with autism and a rare genetic disease. Since that time, she has been working and advocating for the developmental disability community. As a mother, she understands the struggles of dealing with insurance, schools, and community services for a child with a developmental disability. As a physician, she understands the difficulties in managing medications for individuals who could have unique responses to psychopharmacology.

Rare. (2015, April 2). *The elephant, the rider, and the path: A tale of behavior change* [Video]. YouTube. <https://www.youtube.com/watch?v=X9KP8uiGZTs>

This animated video illustrates the behavior change process using social psychologist Jonathan Haidt's analogy of an elephant, a rider, and a path. Whereas a commonly held belief is that human behavior is the result of rational decision making based on available information, a closer look into the science of behavior reveals the powerful role our emotions play in our decision making process.

Reardon, S. (29 March 2016). Largest ever study of transgender teenagers set to kick off. *Nature*, 531(7596), 1. <http://www.nature.com/>

Reid, W. H., & Simpson, S. (2020, September). The right way to avoid malpractice lawsuits. *Psychiatric Times*, 37(9), 16–23.

Keywords: Liability, malpractice, risk management, suicide

William H. Reid, M.D., PPH and Skip Simpson provide practical tips for helping patients, decreasing the chance of lawsuits, and increasing the likelihood of winning if a practitioner is sued. Reid and Simpson emphasize that suicide is by far the most common factor leading to psychiatric malpractice lawsuits. Recognizing and managing risk, not “predicting suicide,” is the relevant concern. There are specific measures that are effective in reducing risk and keeping the clinician within the standard of care.

Reilly, P. M., Shopshire, M. S., Durazzo, T. C., & Campbell, T. A. (2002). *Anger management for substance abuse and mental health clients: Participant workbook*. HHS Pub. No. (SMA) 12-4210. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration.
<https://store.samhsa.gov/system/files/sma12-4210.pdf>

Redlich, F. (1998). *Hitler: Diagnosis of a destructive prophet*. New York, NY: Oxford University Press.

Reed, G. M., Roberts, M. C., Keeley, J., Hooppell, C., Matsumoto, C., Sharan, P., Robles, R., ...Medina-Mora, M. E. (2013). Natural taxonomies of mental disorders: Implications for the clinical utility of the ICD-11 and the DSM-5. *Journal of Clinical Psychology*, 69(12), 1191–1212.

Regents of the University of California, Davis campus. (2018). LGBTQIA resource center glossary. <https://lgbtqia.ucdavis.edu/educated/glossary.html>

Reitan, R. M., & Wolfson, D. (1995). Influence of age and education on neuropsychological test results. *Clinical Neuropsychologist*, 9(2), 151–158.
<https://doi.org/10.1080/13854049508401597>

Reitan et al. evaluated attribute variables of age and education in relation to the General Neuropsychological Scale (GNDS), a comprehensive measure of neuropsychological functions. The study included a brain-damaged group (mean age 36.64 years) and an age-matched control group, with each group composed of 50 research participants. The GNDS clearly differentiated the two groups, and was significantly related to age and education among controls. However, the effects of age and education were minimal among brain-damaged individuals. The authors suggest that adjusting raw scores according to age and education may not be a clinically valid procedure for brain-damaged

individuals, and it may only tend to invalidate the raw scores of neuropsychological tests. See also the reply by Vanderploeg, Axelrod, Sherer, Scott, and Adams (1997).

Resnick, B. (2018, August 16). 100 million Americans have chronic pain. Very few use one of the best tools to treat it. <https://getpocket.com/explore/item/100-million-americans-have-chronic-pain-very-few-use-one-of-the-best-tools-to-treat-it>

Brian Resnick discusses some of the most common etiological factors involved with pain (e.g., catastrophizing, central sensitization, “kinesthetic hallucination”). He discusses some of the most common cognitive behavioral therapy tools used by psychologists when helping people manage their pain. Some of these tools include reducing catastrophic thinking, using somatic tracking exercises, pain processing therapy, encouraging physical exercise, and so forth.

Richmont Graduate University. (2020). *CED 6143: Psychopathology* [Syllabus]. Atlanta, GA: William F. Doverspike. <https://ecams.richmont.edu/>

Riecher-Rössler, A. (2017). Comment: Sex and gender differences in mental disorders. *Lancet Psychiatry*, 4, 63–72.

Riecher-Rössler, A., Butler, S., & Kulkarni, J. (2018, December). Sex and gender differences in schizophrenic psychosis: A critical review. *Archives of Women's Mental Health*, 21(6), 627–648. doi: 10.1007/s00737-018-0847-9 May 16, 2018; E-pub ahead of print.

Anita Riecher-Rössler, Surina Butler, and Jayashri Kulkarni begin their discussion by reaffirming the consistent finding that schizophrenia has a later age of onset for women compared to men. There is increasing evidence for estrogens being psychoprotective in women and for hypothalamic-pituitary-gonadal dysfunction in both sexes.

Riecher-Rössler, A. (2018, November 30). Introduction: Gender-specific issues relative to mental illness. *Psychiatric Times*, 35(11). http://www.psychiatrictimes.com/special-reports/introduction-gender-specific-issues-relative-mental-illness?rememberme=1&elq_mid=4652&elq_cid=860775

Riehm, K. E., Feder, K. A., Tormohlen, K. N., Crum, R. M., Young, A. S., Green, K. M., Pacek, L. R., La Flair, L. N., & Mojtabai, R. (2019, September 11). Associations between time spent using social media and internalizing and externalizing problems among U.S. youth. *JAMA Psychiatry*, 76(12), 1266–1273. doi:10.1001/jamapsychiatry.2019.2325

Is time spent using social media associated with mental health problems among adolescents? In this cohort study of 6,595 U.S. adolescents, increased time spent using social media per day was prospectively associated with increased odds of reporting high levels of internalizing and comorbid internalizing and externalizing problems, even after adjusting for history of mental health problems. Adolescents who spend more than 3

hours per day on social media may be at heightened risk for mental health problems, particularly internalizing problems.

Rimland, B. (1978). Savant capabilities of autistic children and their cognitive implications. *Cognitive defects in the development of mental illness*. New York, NY: Brunner/Mazel.

Ritchie, M. H. (1994). Cultural and gender biases in definitions of mental and emotional health and illness. *Counselor education and supervision*, 33(4), 344.

Roberson, B., Arrieux, J., Russell, K., & Cole, W. (2018). Differences in reaction time latency error on the ANAM4 across three computer platforms. *Archives of Physical Medicine and Rehabilitation*, 99(11), e160.

Robinson, J. (2020, December 03, 2020). Bad habits that can hurt your brain. WebMD. <https://www.webmd.com/alzheimers/ss/slideshow-bad-brain-habits>
Jennifer Robinson, M.D. provides eight lifestyle factors and poor health habits that can contribute to dementia.

Robinson, F. P. (1978). *Effective study* (6th ed.). New York, NY: Harper & Row
Francis P. Robinson, an American education philosopher, introduced the SQRRR or SQ3R method. It is a reading comprehension method named for its five steps: survey, question, read, recite, and review. It offers an active and efficient approach to studying textbook material. Although it was originally created for college students, it is also useful for younger students.

Robison, J. E. (2007). *Look me in the eye: My life with Asperger's*. New York, NY: Crown Publishers, Random House.

Robison, J. E.. (2016). *Switched on: A memoir of brain change and emotional awakening*. New York, NY: Spiegel & Grau.

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 21, 95–102.

Abstract: For constructive personality change to occur, it is necessary that these conditions exist and continue over a period of time: (1) Two persons are in psychological contact. (2) The first, whom shall be termed the client, is in a state of incongruence, being vulnerable or anxious. (3) The 2nd person, whom shall be termed the therapist, is congruent or integrated in the relationship. (4) The therapist experiences unconditional positive regard for the client. (5) The therapist experiences an empathic understanding of the client's internal frame of reference and endeavors to communicate this experience to

the client. (6) The communication to the client of the therapist's empathic understanding and unconditional positive regard is to a minimal degree achieved.

Rogers, C. R. (1992). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology*, 60(6), 827–832. <https://doi.org/10.1037/0022-006X.60.6.827>

This reprinted article originally appeared in the *Journal of Consulting Psychology*, 1957, Vol 21, 95–203.

Rose, G. (1981). Strategy of prevention: Lessons from cardiovascular disease. *British Medical Journal*, 282, 1847–1851.

British epidemiologist Geoffrey Rose (1981) was the first person to describe a phenomenon that he termed the *prevention paradox*. Rose observed the seemingly contradictory situation in which the majority of cases of a disease occur in people who are at low or moderate risk of a disease, whereas only a minority of cases of the same disease occur in high risk segments of a population. This statistical phenomenon occurs because the number of people at high risk is small, whereas the number of people at lower risk is large. In the field of substance use disorders, the implication is that greater societal benefit will occur by achieving a small reduction in substance abuse within a far larger group of “at-risk” users with less serious problems than by trying to reduce problems among a smaller number of substance dependent drinkers. The reasoning is statistical. For example, most alcohol problems are found among substance abusers rather than substance dependent people.

Rosen, M. (2023, July 14). Elyse G.'s brain is fabulous. It's also missing a big chunk. *Science News*. <https://www.sciencenews.org/article/brain-missing-chunk-neuroplasticity>

Meghan Rosen describes a case in which Elyse G. found out she lacked most of her left temporal lobe when she was 25 years old. The brain region is typically crucial for speech and language — but until her brain was scanned (three views shown in the article), no one knew Elyse was missing this part of her brain. What started as a single case study has now snowballed into the Interesting Brains Project.

Rosekind, M. R., Smith, R. M., Miller, D. L., Co, E. L., Gregory, K. B., Webbon, L. L., Gander, P.H., & Lebacqz, J. V. (1995). Alertness management: Strategic naps in operational settings. *Journal of Sleep Research*, 4(S2), 62–66.

<https://www.ncbi.nlm.nih.gov/pubmed/10607214>

Clinical psychologist Mark Rosekind, Ph.D. and colleagues at the NASA Ames Research Center, Moffett Field, California found that “26-minute nap improved performance 34% and alertness 54%. Pilots in the Rest Group were provided a 40-minute, planned, in-flight nap opportunity during cruise over water. The 40-minute nap duration was designed to

minimize the opportunity for the occurrence of slow wave sleep and its duration. In 93% of the nap opportunities, the rest group crewmembers fell asleep in 5.6 minutes and slept for 25.8 minutes. Despite NASA recommendations that astronauts sleep 8 hours a day, they typically sleep 0.5 to 2.5 hours less in space than they do on Earth—making naps more important in terms of maintaining mental efficiency and overall health. The article can also be found at this link: <http://human-factors.arc.nasa.gov/zteam/fcp/pubs/jsr.art.html>

Rosenhan, D. L. (1973, January 19). On being sane in insane places. *Science*, 179(70), 250–258. doi: 10.1126/science.179.4070.250.PMID 4683124

Rosenthal, M. (2015, March 30). Trauma and addiction: 7 reasons your habit makes perfect sense. *Behavioral Health, Living in Recovery, Living with Addiction*.
<http://www.recovery.org/pro/articles/trauma-and-addiction-7-reasons-your-habit-makes-perfect-sense/>

Rosenzweig, S. (1936). Some implicit common factors in diverse methods of psychotherapy. *American Journal of Orthopsychiatry*, 6, 412–415.
Available: <https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1939-0025.1936.tb05248.x>

Rothbaum, B. O., Hodges, L. F., Kooper, R., Opdyke, D., Williford, J. S., North, M. (1995, April). Effectiveness of computer-generated (virtual reality) graded exposure in the treatment of acrophobia. *American Journal of Psychiatry*, 152(4), 626–628.
Keywords: Military, Virtual Reality (VR), Posttraumatic Stress Disorder (PTSD), Trauma
Barbara Rothbaum, Ph.D., who at the time of her early research was affiliated with the College of Computing, Georgia Institute of Technology, is sometimes cited as the researcher who first demonstrated the use of virtual reality to treat a psychological condition (fear of heights). She and her colleagues studied the efficacy of computer-generated (virtual reality) graded exposure in the treatment of acrophobia (fear of heights). In this landmark study, 20 college students with acrophobia were randomly assigned to virtual reality graded exposure treatment (N = 12) or to a waiting-list comparison group (N = 8). Seventeen students completed the study. Sessions were conducted individually over 8 weeks. Outcome was assessed by using measures of anxiety, avoidance, attitudes, and distress associated with exposure to heights before and after treatment. Significant differences between the students who completed the virtual reality treatment (N = 10) and those on the waiting list (N = 7) were found on all measures. The treatment group was described as significantly improved after 8 weeks, but the comparison group was unchanged.

Rothbaum, B. O., Price, M., Jovanovic, T., Norrholm, S. D., Gerardi, M., Dunlop, B., Davis, M., Bradley, B., Duncan, E. J., Rizzo, A., Ressler, K. J. (2014, June). A randomized, double-blind evaluation of D-cycloserine or alprazolam combined with virtual reality exposure therapy for posttraumatic stress disorder in Iraq and Afghanistan War veterans. *American Journal of Psychiatry*, *171*(6), 640–648. doi: 10.1176/appi.ajp.2014.13121625
Keywords: Virtual Reality (VR), Posttraumatic Stress Disorder (PTSD), Trauma
The authors examined the effectiveness of virtual reality exposure augmented with D-cycloserine or alprazolam, compared with placebo, in reducing posttraumatic stress disorder (PTSD) due to military trauma. After an introductory session, five sessions of virtual reality exposure were augmented with D-cycloserine (50 mg) or alprazolam (0.25 mg) in a double-blind, placebo-controlled randomized clinical trial for 156 Iraq and Afghanistan war veterans with PTSD. The authors found that PTSD symptoms significantly improved from pre- to posttreatment across all conditions and were maintained at 3, 6, and 12 months. There were no overall differences in symptoms between D-cycloserine and placebo at any time. Alprazolam and placebo differed significantly on the Clinician-Administered PTSD Scale score at posttreatment and PTSD diagnosis at 3 months posttreatment; the alprazolam group showed a higher rate of PTSD (82.8%) than the placebo group (47.8%). Between-session extinction learning was a treatment-specific enhancer of outcome for the D-cycloserine group only. At posttreatment, the D-cycloserine group had the lowest cortisol reactivity and smallest startle response during virtual reality scenes.

Rotondaro, V. (2013, October 17). *Nick Brown smelled bull*. Narratively.

<https://narratively.com/nick-brown-smelled-bull/>

Keywords: Self-care, self care

The author, Vinnie Rotondaro, was Editor at Large for Narratively. This article was edited by Brendan Spiegel and illustrated by Kevin Huizenga.

RSA. (2010, November 22). *Iain McGilchrist: The divided brain and the making of the Western world* [Video]. YouTube. <https://www.youtube.com/watch?v=SbUHxC4wiWk>

See also McGilchrist (2012) book titled *The Master and His Emissary: The Divided Brain and the Making of the Western World*.

RSA. (2011, October 21). *Iain McGilchrist: The divided brain* [Video]. YouTube.

<https://www.youtube.com/watch?v=dFs9WO2B8uI>

RSA Short. (2013, December 10). *Brené Brown on empathy* [Video]. YouTube.

<https://www.youtube.com/watch?v=1Evwgu369Jw>

Brené Brown, Ph.D., LCSW explains how we can only create a genuine empathic connection if we are aware of our own feelings. See also cross-reference to Brown (2013).

Rudd, M. D., Mandrusiak, M., & Joiner, T. E., Jr. (2006). The case against no-suicide contracts: the commitment to treatment statement as a practice alternative. *Journal of Clinical Psychology*, 62(2), 243–251. First published: 09 December 2005.

<https://doi.org/10.1002/jclp.20227>

M. David Rudd, Ph.D., Michael Mandrusiak, Ph.D., and Thomas E. Joiner Jr. review the literature on the use of “no-suicide contracts” in clinical practice, including conceptual discussions, patient and clinician surveys, and a few empirical studies on clinical utility. The primary conclusion of the authors is that no-suicide contracts suffer from a broad range of conceptual, practical, and empirical problems. Most significantly, they have no empirical support for their effectiveness in the clinical environment. Rudd, Mandrusiak, and Joiner provide and illustrate the commitment to treatment statement as a practice alternative to the no-suicide contract. See also Simon (1999).

Ruffalo, M. L., & Morehead, D. (2022, May 6). Psychotherapy: A core psychiatric treatment.

Psychiatric Times. <https://www.psychiatristimes.com/view/psychotherapy-a-core-psychiatric-treatment?>

Mark L. Ruffalo, MSW, DPsa and Daniel Morehead, MD discuss the importance of psychotherapy in contemporary psychiatric practice.

Ruscio, J. (2004, Spring-Summer). Diagnosis and the behaviors they denote: A critical evaluation of the labeling theory of mental illness. *The Scientific Review of Mental Health Practice* 3(1).

Rutkow, Ira (2022, March 9). *Empire of the scapel: The history of surgery*. New York, NY: Scribner.

Ira Rutkow, M.D. is a renowned surgeon and historian with five decades of experience that he draws upon to describe a remarkable history of surgery’s development—spanning the Stone Age to the present day—blending meticulous medical studies with lively and skillful storytelling. The story includes three major paradigm shifts throughout history, including the 16th-century saga of Andreas Vesalius and his crusade to accurately describe human anatomy while appeasing the conservative clergy who clamored for his burning at the stake, the hard-to-believe story of late-19th century surgeons’ apathy to Joseph Lister’s innovation of antisepsis and how this indifference led to thousands of unnecessary surgical deaths, and the development of anesthesia.

SAGE National Resource Center on LGBT Aging. (2021). *How to be an ally to transgender older adults*. New York, NY: Author. Available: <https://forge-forward.org/wp-content/uploads/2021/07/trans-ally-older-adults-english-final.pdf>

This 32-page downloadable resource is provided by the National Resource Center on LGBT Aging, which is an organization self-described as the following: “The National Resource Center on LGBT Aging is the country’s first and only technical assistance resource center aimed at improving the quality of services and supports offered to lesbian, gay, bisexual, and/or transgender adults. Established in 2010 through a federal grant from the U.S. Department of Health and Human Services, the National Resource Center on LGBT Aging provides training, technical assistance, and educational resources to aging providers, LGBT organizations, and LGBT older adults. The center is led by SAGE in collaboration with leading aging and LGBT organizations from around the country” (2021, ii). See cross reference to National Resource Center on LGBT (2021, p. ii).

Saks, E. R., with Stephen H. Behnke. (1997). *Jekyll on trial: Multiple personality disorder and criminal law*. New York, NY: New York University Press.

Saks, E. R. (1999). *Interpreting interpretation: The limits of hermeneutic psychoanalysis*. New Haven, CT: Yale University Press.

Saks, E. R. (2002). *Refusing care: Forced treatment and the rights of the mentally ill*. Chicago, IL: University of Chicago Press.

Saks, E. R. (2008). *The center cannot hold: My journey through madness*. New York, NY: Hyperion. Copyright © 2007 Elyn R. Saks.

Elyn Saks is Orrin B. Evans Distinguished Professor of Psychology, and Psychiatry and the Behavioral Sciences at the Gould School of Law; Director of the Saks Institute for Mental Health Law, Policy, and Ethics, Adjunct Professor of Psychiatry at the UC San Diego, School of Medicine; and Faculty at the New Center for Psychoanalysis. She was first in her class at Vanderbilt, won a Marshall Scholarship to Oxford, was editor of the *Yale Law Journal*, and has published several books and many articles. She also suffers from a severe chronic psychiatric illness with recurrent psychotic episodes diagnosed as schizophrenia or schizoaffective disorder and treated by hospitalization, medication, psychotherapy, and psychoanalysis. In this extraordinary autobiography, this gifted individual describes her struggles and how she has lived with her achievements and her suffering.

Saks, E. R. (author), with Shahrokh Golshan, S. (2013). *Informed consent to psychoanalysis: The law, the theory, and the data*. Bronx, NY: Fordham University Press.

Dr. Elyn Saks (author) and Shahrokh Golshan shed psychoanalytic light on a concept— informed consent—that has transformed the delivery of health care in the United States. The discussion raises many questions: Is informed consent required as a matter of positive law? Apart from statutes and cases, what do the professional organizations say about this? What would be the elements of a robust informed consent in psychoanalysis? Is informed consent even possible here? Can patients really understand, say, transference or regression before they experience them, and is it too late once they have? Is informed consent therapeutic or countertherapeutic? Can a “process view” of informed consent make sense here?

Salas-Humara, C., Sequeira, G. M., Rossi, W., & Dhar, C. P. (2019). Gender affirming medical care of transgender youth. *Current problems in pediatric and adolescent health care*, 49(9), 100683.

Sammons, M. T., VandenBos, G. R., Martin, J. N., & Elchert, D. M. (2020). Psychological practice at six months of COVID-19: A follow-up to the first national survey of psychologists during the pandemic. *Journal of Health Service Psychology*, 46(4), 133—140.

Keywords: COVID-19, Coronavirus, Telehealth, Telepsychology

Morgan T. Sammons, Ph.D., ABPP, Gary R. VandenBos, Ph.D., Jana N. Martin, Ph.D., and Daniel M. Elchert, Ph.D. report a follow-up to the First National Survey of Psychologists During the Pandemic. Respondents were more senior practitioners, although a somewhat bimodal distribution. Approximately 32% of respondents reported being in practice for fewer than 15 years and 49% reported being in practice for more than 26 years. An overwhelming majority (64%) of respondents reported that they were in private individual or group practice, with only 22% reporting employment in an agency, clinical, other organized healthcare setting, or primary or secondary school.

San Francisco Suicide Prevention. (2021). *History*. <https://www.sfsuicide.org/about-sfsp/history/>

Sanson, M., Strange, D., & Garry, M. (2019, March 4). Trigger warnings are trivially helpful at reducing negative affect, intrusive thoughts, and avoidance. *Clinical Psychological Science*. <https://doi.org/10.1177/2167702619827018>

Students are requesting and professors are issuing *trigger warnings* which are warnings cautioning that some content of college course material may cause distress to students. Trigger warnings are meant to alleviate distress of students who may otherwise experience. However, multiple lines of research suggest trigger warnings could either increase or decrease symptoms of distress. Mevagh Sanson, Deryn Strange, and Garry Maryanne designed a study to assess whether or not trigger warnings are useful in reducing distress. Across six experiments, the authors gave some college students and Internet users a trigger warning but not others, exposed everyone to one of a variety of

negative materials, and then measured symptoms of distress. To better estimate trigger warnings' effects, the authors conducted mini meta-analyses on the data, revealing trigger warnings had trivial effects. People reported similar levels of negative affect, intrusions, and avoidance regardless of whether they had received a trigger warning. These patterns were similar among people with a history of trauma. The authors conclude that these results suggest a trigger warning is neither meaningfully helpful nor harmful.

Saulsman, L. M., & Page, A. C. (2004). The five-factor model and personality disorder empirical literature: A meta-analytic review. *Clinical Psychology Review, 23*, 1055—1085.

Sawyer, C. (2018, February 24). Symbols and notation in behavior analysis. *Behavioral Inquiry*. <https://behavioralinquiry.com/2018/02/24/symbols-and-notation-in-behavior-analysis/>
Chris Sawyer, M.Ed. provides a description of notation and symbols that are often encountered in journals such as *The Journal of Applied Behavior Analysis* (JABA) and *The Journal of the Experimental Analysis of Behavior*.

Sapolsky, R. M. (1990, January). Stress in the wild. *Scientific American, 262*(1), 116—123.
Robert Sapolsky, Ph.D. holds a doctoral degree in neuroendocrinology. He is a professor of biology, neurology, and neurosurgery at Stanford University.

Sapolsky, R. M. (1994). *Why zebras don't get ulcers*. New York, NY: W. H. Freeman.
This book's second edition was published in 1998 and third edition was published in 2004. Dr. Sapolsky proposes that for animals such as zebras, stress is generally episodic (e.g., running away from a lion), whereas for humans, stress is often chronic (e.g., worrying about losing a job). For this reason, proposes Sapolsky, many wild animals are less susceptible than humans to stress-related disorders such as ulcers, hypertension, decreased neurogenesis, and increased hippocampal neuronal atrophy. Based on Sapolsky's research with baboons, chronic stress is common for some social primates who are in the lower level of the social dominance hierarchy.

Sapolsky, R. M. (2002). *A primate's memoir*. New York, NY: Simon & Schuster.

Sapolsky, R. M. (2016, November 10). To understand Facebook, study Capgras Syndrome. *Nautilus*. <http://nautil.us/issue/42/fakes/to-understand-facebook-study-capgras-syndrome>

Sarkar, S. (2018, June 19). 'Gaming disorder' Classified as a mental health condition, but is the move premature? <https://www.polygon.com/2018/6/19/17475632/video-game-addiction-gaming-disorder-who-icd-11>
Keywords: Gaming disorder

Sauter, M. B., Stebbins, S., & Frohlich, T. C. (2016, September 27). The most dangerous cities in America. *24/7 Wall St.* <http://247wallst.com>

Sax, P. E. (2021). Covid-19 vaccine: Frequently asked questions. *New England Journal of Medicine.* <https://www.nejm.org/covid-vaccine/faq>

Keywords: COVID-19, Coronavirus, Vaccine, Vaccination

Paul Sax, M.D., Professor of Medicine at Harvard Medical School and an infectious disease specialist, provides concise answers to questions about COVID-19 vaccination.

Schachter, S., & Singer, J. (1962). Cognitive, social, and physiological determinants of emotional state. *Psychological Review*, *69*(5), 379–399. <https://doi.org/10.1037/h0046234>
Stanley Schachter, Ph.D. and Jerome Singer, Ph.D. conducted one of the landmark studies in psychology. Abstract: “It is suggested that emotional states may be considered a function of a state of physiological arousal and of a cognition appropriate to this state of arousal. From this follows these propositions: (a) Given a state of physiological arousal for which an individual has no immediate explanation, he will label this state and describe his feelings in terms of the cognitions available to him... . (b) Given a state of physiological arousal for which an individual has a completely appropriate explanation, no evaluative needs will arise and the individual is unlikely to label his feelings in terms of the alternative cognitions available. (c) Given the same cognitive circumstances, the individual will react emotionally or describe his feelings as emotions only to the extent that he experiences a state of physiological arousal. An experiment is described which, together with the results of other studies, supports these propositions.”

Schildkrout, B. (2017, August). Frontotemporal dementia: A brain disease that challenges definitions of mental illness. *Psychiatric Times*, *34*(8), 26–28.

Schmidt, J., Lu, T., Boyle, T., & Vedantam, S. (2018). When everything clicks: The power of judgment-free learning [Podcast]. <https://www.npr.org/2018/06/04/616127481/when-everything-clicks-the-power-of-judgment-free-learning>

Shankar Vedantam, journalist and science correspondent for NPR, narrates a podcast describing the history of operant conditioning, including brief excerpts from interviews with animal behavioral trainer and clicker trainer, Karen Pryor, and voice-recordings from Harvard Psychology Professor and behaviorist, B. F. Skinner. The podcast also includes an interview with Border collie enthusiast and orthopedic surgeon Martin Levy, M.D. on how he uses operant conditioning with the clicker to teach Frisbee throwing and surgical techniques to incoming surgical residents at a teaching hospital in New York.

Schnall, E., Kalkstein, S., Gottesman, A., Feinberg, K., Schaeffer, C. B., Feinberg, S. S. (2014, July). Barriers to mental health care: A 25-year follow-up study of the Orthodox Jewish community. *Journal of Multicultural Counseling & Development*, 42(3), 161–173.

Schreier, H. A., & Libow, J. A. (1993). *Hurting for love: Munchausen by proxy syndrome*. New York, NY: Guilford Press.

Scott, S., & Duncan, C. (2004, June 7). *Return of the Black Death: The world's greatest serial killer*. New York, NY: Wiley.

Christopher Duncan, Ph.D. is Emeritus Professor of Zoology at Liverpool University. He has written over 200 published papers and seven books. Susan Scott, Ph.D. is a social historian specializing in demography. She has written 30 published papers and three books. Around 1900, historians spread the idea that the plagues of Europe were not a directly infectious disease but were outbreaks of bubonic plague, overturning an accepted belief that had stood for 550 years. Drs. Scott and Duncan argue that this long held idea is incorrect and that the plagues of Europe (1347-1660) were in fact a continuing series of epidemics of a lethal, viral, haemorrhagic fever that used the CCR5 as an entry port into the immune system. They argue that the 14th century plague known as the bubonic plague was spread by direct human contact (not from rat fleas) and was, in fact, a virus perhaps similar to AIDS and Ebola. Using computer modeling, Scott and Duncan demonstrate how this disease provided the selection pressure that forced up the frequency of the CCR5-Δ32 mutation from 1 in 20,000 at the time of the Black Death to values today of 1 in 10. Noting the periodic occurrence of plagues throughout history, Scott and Duncan predict the inevitable re-emergence of this virus sometime in the future, with mass mobility likely to contribute to pandemic proportions and the possibility of bioterrorism transforming the virus into an even more devastating killer. See also “Reappraisal of the historical selective pressures for the CCR5-Δ32 mutation” (Duncan, Scott, & Duncan, 2005).

Shneidman, E. S. (1996). *The suicidal mind*. New York, NY: Oxford University Press.

Edwin Schneidman, Ph.D. is Professor of Thanatology Emeritus at the University of California at Los Angeles School of Medicine. He is the founder of the American Association of Suicidology. In this book, he presents a bold and simple premise: the main cause of suicide is psychological pain or “psychache.” He offers this advice, “Reduce the pain; remove the blinders; lighten the pressure—all three, even just a little bit” (p. 139).

Schwarcz, J. (2015, July-August). *Opium and laudanum history's wonder drugs*. <https://www.cheminst.ca/magazine/article/opium-and- Laudanum-historys-wonder-drugs/>
Joseph A. (“Joe”) Schwarcz, Ph.D. is the director of McGill University’s Office for Science and Society.

Simon, R. I., (1999). The suicide prevention contract: clinical, legal, and risk management issues. *Journal of the American Academy of Psychiatry and the Law*, 27(3), 445–450. PMID: 10509943

Mental health professionals increasingly rely upon suicide prevention contracts in the management of patients at suicide risk. Although asking a patient if he or she is suicidal and obtaining a written or oral contract against suicide can be useful, these measures by themselves are insufficient. “No harm” contracts cannot take the place of formal suicide risk assessments. Obtaining a suicide prevention contract from the patient tends to be an event whereas suicide risk assessment is a process. The suicide prevention contract is not a legal document that will exculpate the clinician from malpractice liability if the patient commits suicide. The contract against self-harm is only as good as the underlying soundness of the therapeutic alliance. The risks and benefits of suicide prevention contracts must be clearly understood. See also Rudd et al. (2006).

Scheff, T. (2014, June 1). The ubiquity of hidden shame in modernity. *Cultural Sociology*, 8(2), 129–141. <https://doi.org/10.1177/1749975513507244>

Article first published online: February 17, 2014 Research Article

Thomas Scheff, Ph.D., Professor Emeritus of Sociology at the University of California Santa Barbara, makes this observation, “In modernity, “shame is the most obstructed and hidden emotion, and therefore the most destructive. Emotions are like breathing—they cause trouble only when obstructed.”

Schofield, William. (1964). *Psychotherapy: The purchase of friendship*. Englewood Cliffs, NJ: Prentice Hall.

YAVIS is an acronym introduced by University of Minnesota professor William Schofield, Ph.D., who claimed to have demonstrated that mental health professionals often have a positive bias towards clients exhibiting these traits. In other words, individuals with these characteristics are assumed to represent a psychotherapist’s “ideal patient.” Schofield explained that such a bias may, in turn, predispose the psychotherapist to work harder to help these clients. Such an inclination, although presumed to be mostly unconscious, was thought to be driven by an expectation that clients with such traits would be motivated to work harder in psychotherapy, thereby increasing the therapist’s hope that the treatment would be effective. Furthermore, this process would work to enhance the therapist’s experience of himself or herself as competent, which may help explain why YAVIS clients are unconsciously seen as more desirable.

Schönenberg, M., Wiedemann, E., Schneidt, A., Scheef, J., Logemann, A., Keune, P. M., & Hautinger, M. (2017, September). Neurofeedback, sham neurofeedback, and cognitive-behavioural group therapy in adults with attention-deficit hyperactivity disorder: A triple-blind, randomised, controlled trial. *The Lancet Psychiatry*, 4(9), 673–684.

[https://doi.org/10.1016/S2215-0366\(17\)30291-2](https://doi.org/10.1016/S2215-0366(17)30291-2)

The authors examined the efficacy (compared with sham neurofeedback) and efficiency (compared with meta-cognitive therapy) of a standard EEG neurofeedback protocol in adults with ADHD. The findings suggest that neurofeedback training is not superior to a sham condition or group psychotherapy. All three treatments were equivalently effective in reducing ADHD symptoms. This first randomized, sham-controlled trial did not show any specific effects of neurofeedback on ADHD symptoms in adults.

Schafer, J., & Karlins, M. (2015). *The like switch: An ex-FBI agent's guide to influencing, attracting, and winning people over*. New York, NY: Atria Paperback, An imprint of Simon & Schuster.

Keywords: Charm, charisma, body language, affective presence

Co-author Jack Schafer, Ph.D. is a psychologist, retired FBI special agent, and self-styled “likeability coach” who describes techniques that can improve one’s Likeability Quotient (LQ). As a Special Agent for the FBI’s National Security Division’s Behavioral Analysis Program, Dr. Schafer developed strategies for profiling terrorists and detecting deception. As he discloses in the introduction of his book, “I can do this because it turns out that the same social skills I developed to befriend and recruit spies are equally effective in developing successful friendships at home, at work, or anywhere else that personal interactions take place (Schafer, 2015, p. xi). Schafer maintains that there are three major things we do (when we approach someone) that signal we are not a threat to the other person: (1) an eyebrow flash—a quick up and down movement of the eyebrow that lasts about a sixth of a second—(2) a slight head tilt, and (3) a smile. Schafer describes four nonverbal “friend signals” such as (1) increasing eye contact, (2) raising one’s eyebrows, (3) tilting one’s head, and (4) jutting out one’s chin. Schafer provides a friendship formula: friendship = proximity + frequency + duration + intensity. *Proximity* defines the distance between you and another person and your exposure to that person over time. *Frequency* is the number of contacts you have with another person over time. *Duration* is the length of time you spend with another person over time. *Intensity* is how strongly you are able to satisfy another person’s psychological and/or physical needs through the use of verbal and nonverbal behaviors.

Schenk, P. W. (2002). *Great ways to sabotage a good conversation*. Tucker, GA: Author.

Schoenberger, K., Raake, A., & Koeppel, J. (2014, May). Why are you so slow? Misattribution of transmission delay to attributes of the conversation partner at the far-end. *International Journal of Human-Computer Studies*, 72(5), 477–487.

<https://doi.org/10.1016/j.ijhcs.2014.02.004>

Keywords: Zoom fatigue

This study addresses the question of how transmission delay affects user perception during speech communication over telephone systems. It aims to show that the occurrence of pure delay should not be neglected when planning a telephone or

conferencing system even if no impact on the perceived quality of the call can be found. It is, for instance, known that, the communication surface structure changes dramatically when transmission delay is inserted by the communication system. Even delays of 1.2 seconds made people perceive the responder as less friendly or focused. With high delays, interlocutors (i.e., people who take part in a dialogue or conversation) are perceived less attentive, extraverted, and conscientious.

Schwartz, R. C., & Feisthmet, K. P. (2009). Disproportionate diagnosis of mental disorder among African American versus European American clients: Implications for counseling theory. *Journal of Counseling & Development, 87*(3), 295–301.

Schwitzer, A. M., & Choate, L. H. (2007). College student needs and counseling responses. *Journal of College Counseling, 10*(1), 3–5.

Seeman M. V. (2012). Menstrual exacerbation of schizophrenia symptoms. *Acta Psychiatrica Scandinavica, 125*, 363–371

Mary V. Seeman, M.D.C.M., D.Sc. author discusses the estrogen hypothesis of schizophrenia, including observations related to premenstrual (low estrogen) exacerbation of psychotic symptoms in women, postpartum exacerbations, and the significant improvement brought about when estrogens or selective estrogen receptor modulators (SERMS) are added to the medication regimen.

Seeman, M. V. (2018, November). Clinical implications of gender differences in schizophrenia. *Psychiatric Times, 35*(11), 9–11. <http://www.psychiatrictimes.com/special-reports/clinical-implications-gender-differences-schizophrenia>

The author discusses the estrogen hypothesis, which holds that estrogens have neuroprotective actions in delaying the onset of schizophrenia in women. The hypothesis is that female hormones delay the onset of schizophrenia, allowing women to finish their schooling and to acquire substantial interpersonal skills before the onset of schizophrenia impairs socialization. Estrogens also seem to assist the antidopaminergic action of antipsychotics so that dosages can stay relatively low in women, preventing adverse effects and, thus, permitting steady employment and the development of personal relationships. At menopause, however, these advantages are lost, which seems to account for the relative increased incidence of schizophrenia in women (compared to men) during middle age.

Seeman, M. V. (2019, October). Celebrity suicide. *Psychiatric Times, 36*(10), 10.

Seligman, M. E. P., & Maier, S. F. (1967). Failure to escape traumatic shock. *Journal of Experimental Psychology, 74*, 1–9. <http://dx.doi.org/10.1037/h0024514>

Seligman, M. E. P. (1972). Learned helplessness. *Annual Review of Medicine*, 23(1), 407–412.
doi:10.1146/annurev.me.23.020172.002203

Psychologist Martin Seligman, Ph.D. initiated research on learned helplessness in 1967 at the University of Pennsylvania. Beginning with some of the first experiments conducted with Steven F. Maier, Seligman's research began in part as an extension of his interest in depression. See also Seligman and Maier (1967).

Seligman, M. E. P. (1998). *Learned optimism* (2nd ed.). New York, NY: Simon & Schuster.

Seligman, M. E. P. (2011). *Flourish: A visionary new understanding of happiness and well-being*. New York, NY: Free Press.

Keywords: Self-care, self care

This popular book provides some inspiring stories of Positive Psychology in action, including how the U.S. Army is now trained in emotional resilience; how innovative schools can educate for fulfillment in life and not just for workplace success; and how corporations can improve performance at the same time as they raise employee well-being. With interactive exercises to help readers explore their own attitudes and aims. Here is an example of a typical positive psychology exercise that has been around for many years: "Every night for the next week, set aside ten minutes before you go to sleep. Write down three things that went well today and why they went well" (Seligman, 2011, p. 33).

Selvaggi, G., Dhejne, C., Landen, M., & Elander, A. (2012, May 14). The 2011 WPATH standards of care and penile reconstruction in female-to-male transsexual individuals. *Advances in Urology*, 2012 (2012). Article ID 581712. doi: 10.1155/2012/581712.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3359659/>

Semkovska, M., & McLoughlin, D. M. (2010). Objective cognitive performance associated with electroconvulsive therapy for depression: A systematic review and meta-analysis. *Biological Psychiatry*, 68(6), 568–577. <https://doi.org/10.1016/j.biopsych.2010.06.009>

Semkovska, M., Keane, D., Babalola, O., & McLoughlin, D. M. (2011). Unilateral brief-pulse electroconvulsive therapy and cognition: Effects of electrode placement, stimulus dosage and time. *Journal of Psychiatric Research*, 45(6), 770–780.
<https://doi.org/10.1016/j.jpsychires.2010.11.001>

Semkovska et al. (2011) have conducted very good meta analyses at Trinity College in Dublin, Ireland. Although there are some short term differences in cognitive functioning following ECT, there do not appear to be any significant long-term differences in the impact of electrode placement or other treatment variables. ECT has not been found to

cause any lasting cognitive impairment. Most people improve back to baseline within 2-weeks and then sometimes improve beyond that point.

Semrad, E. (1967). The operation of ego defenses in object loss. In D. M. Moriarity (Ed.), *The Loss of Loved Ones*. Springfield, IL: Charles C Thomas.

Keywords: Defensive Functioning Scale (DFS)

Sersen, J. S. (2014, December 15). *The trouble with teaching rape law*. The New Yorker.

<https://www.newyorker.com/news/news-desk/trouble-teaching-rape-law>

Shakow, D. (1938). An interneship [sic] year for psychologists (with special reference to psychiatric hospitals). *Journal of Consulting Psychology*, 2(3), 73–76. doi:10.1037/h0055488

David Shakow, Ph.D., who proposed the scientist-practitioner model of training that eventually became known as the Boulder mode, proposed a system clinical training for psychologists similar to the model used for medical students. The model included an internship year, particularly at a psychiatric hospital, that would serve several purposes: (1) competence in the use of acquired techniques, (2) saturation of the student with experience in the practical aspects of psychopathology, (3) the development of the experimental-objective attitude, and (4) acquaintance with the thinking and attitudes of colleagues, such as psychiatrists and social workers.

Shakow, D. (1942). The training of the clinical psychologist. *Journal of Consulting Psychology*, 6(6), 277–288. doi:10.1037/h0059917

Originating from his 1941 American Association for Applied Psychology Report, Shakow advocates for the emerging profession of clinical psychologists to have a breadth of training in order to be competent to perform diagnosis, research, and therapy. His article presents details of the undergraduate and graduate educational programs, including a didactic analysis and an internship. The clinical psychologist, according to Shakow, “besides meeting certain basic personality requirements and having a breadth of educational background” should be competent to perform diagnosis, research, and therapy (p. 277). In this article, Shakow describes the undergraduate and graduate educational programs for the training of clinical psychologists. He recommends a “didactic” analysis and clinical internship.

Shakow, D. (1978). Clinical psychology seen some 50 years later. *American Psychologist*, 33(2), 148–158. doi:10.1037/0003-066x.33.2.148.

Shapiro, D. S. (2002). Renewing the scientist-practitioner model. *The Psychologist*, 15(5), 232–234.

[This periodical is published by with The British Psychological Society, and is not meant to be confused with the *American Psychologist*, which is published by the American Psychological Association].

David S. Shapiro, Ph.D. reviews the core tenets of the contemporary scientist-practitioner model (i.e., the current Boulder model): (1) giving psychological assessment, testing, and intervention in accordance with scientifically based protocols, (2) accessing and integrating scientific findings to make informed healthcare decisions for patients, (3) questioning and testing hypotheses that are relevant to current healthcare, (4), building and maintaining effective cross-disciplinary relationships with professionals in other fields, (5), research-based training and support to other health professions in the process of providing psychological care, and (6) contributing to practice-based research and development to improve the quality of health care. For a review of the origin of the scientist-practitioner model (i.e., the Boulder model), see Baker and Benjamin (2000).

Shen, M. D., Swanson, M. R., Wolff, J. J., Elison, J. T. et al. (2022, March 25). Subcortical brain development in Autism and Fragile X Syndrome: Evidence for dynamic, age- and disorder-specific trajectories in infancy. *The American Journal of Psychiatry*. Published online March 25, 2022. <https://doi.org/10.1176/appi.ajp.21090896>

The amygdala—a brain structure enlarged in 2-year old children diagnosed with autism spectrum disorder (ASD)—begins its sped-up growth between 6 and 12 months, suggesting that interventions to reduce ASD symptoms may be most successful in the first year of life. Shen et al. (2022) conducted three MRI scans of 408 U.S. infants, including 270 who were at higher risk because they had an older sibling with ASD 109 typically developing infants, and 29 infants with fragile X syndrome. The scans were taken at 6, 12, and 24 months of age. The researchers found that the 58 infants who went on to develop ASD had a normal-size amygdala at 6 months but an enlarged amygdala at 12 months and 24 months. Furthermore, the faster the amygdala overgrowth, the more severe ASD symptoms were at 24 months. The infants with fragile X syndrome showed no amygdala overgrowth, but at 6 months they did show enlargement of the caudate, which was linked to increased repetitive behaviors.

Shneidman, E. S. (1996). *The suicidal mind*. New York, NY: Oxford University Press.

Silberman, S. (2016, August 23). *Neurotribes: The legacy of autism and the future of neurodiversity*. New York, NY: Avery, an imprint of Penguin House.

Keywords: Autism, Spectrum, Neurodiversity

Wired Steve Silberman asks questions such as whether autism is a lifelong mental disability or a naturally occurring form of cognitive difference that is similar to certain forms of genius? Silberman reveals some of the secret history of autism and offers answers to the question of why the number of diagnoses has soared in recent years. Reviewing some of the earliest years of clinical research related to autism, Silberman

provides Leo Kanner and Hans Asperger, who defined the scope of autism in profoundly different ways. He explores the more contemporary concept of neurodiversity. He argues that neurodiversity in the form of autism, dyslexia, and ADHD are not errors of nature or products of the toxic modern world, but are the result of natural variations in the human genome.

Silver, E., Cirincione, C., & Steadman, H. J. (1994). Demythologizing inaccurate perceptions of the insanity defense, *Law and Human Behavior*, 18, 63–70.

The public's perception that the insanity defense is used in 37% of all felony cases is a gross overestimate, because the actual figure is 1%. Prior to the Hinckley case (1982), the insanity defense had been used in less than 2% of all felony cases in the U.S. and was unsuccessful in almost 75% of those tried.

Silverstein, S. (1981). *The missing piece meets the big O*. New York, NY: Harper & Row.

Shel Silverstein's children's book is wonderful allegory that with pictures and a few sentences shares the universal truth true love does not complete us, even though at first it might appear to do that, but instead it lets us grow and become more fully ourselves.

Skelly, M. K., Wattengel, B. A., Starr, K. E., Sellick, J. A., Jr, & Mergenhagen, K. A. (2019, November 29). Psychiatric adverse effects of antibiotics. *Psychiatric Times*.

<https://www.psychiatrictimes.com/special-reports/psychiatric-adverse-effects-antibiotics>

Skinner, B. F. (1935). Two types of conditioned reflex and a pseudo-type. *Journal of General Psychology*, 12, 66–77.

The author discusses Type 1 and Type 2 conditioning.

Skinner, B. F. (1938). *The behavior of organisms: An experimental analysis*. New York, NY: Appleton-Century-Crofts.

Skinner, B. F. (1983). Intellectual self-management in old age. *American Psychologist*, 38(3), 239–244. <https://doi.org/10.1037/0003-066X.38.3.239>

Abstract: Asserts that old age is only partly a biological condition. The author records personal techniques that have proved helpful in offsetting some of the physiological limitations of old age and particularly in making it possible to continue to engage in intellectual work. Problems dealt with include sensory and motor deficiencies, memory loss, motivational changes, mental fatigue, and the disruptive effects of the social environment of the aged. Emphasis is on constructing a world in which the behavior of old people will continue to be abundantly reinforced.

Sklar, J. (2020, April 24). 'Zoom fatigue' is taxing the brain: Here's why that happens. *National Geographic*. <https://www.nationalgeographic.com/science/2020/04/coronavirus-zoom-fatigue-is-taxing-the-brain-here-is-why-that-happens/>

Sloat, S. (2016, December, 6). *Evolution made really smart people long to be loners*. Inverse. <https://www.inverse.com/article/24819-intelligent-people-friendships-satisfaction-savanna-theory>

Sarah Sloat, a writer based in Brooklyn, provides a summary of Li and Kanazawa's (2016) paper in which the authors provide a theory of why highly intelligent people experience lower life satisfaction when they socialize with friends more frequently.

Smagula, S. F., Zhang, G., Gujral, S. (2022, August 31). Association of 24-hour activity pattern phenotypes with depression symptoms and cognitive performance in aging. *JAMA Psychiatry*. Published online August 31, 2022. doi:10.1001/jamapsychiatry.2022.2573
In a cross-sectional study of 1800 older adults (65 and older), 4 subgroups were identified defined by earlier rising/robust patterns (37.6%), shorter activity duration/less modelable (32.6%), shorter active periods/very weak (9.8%), had later activity offset/very weak (20.0%). Compared with the early rising/robust group, both groups with weak rhythms had 2-fold odds of clinically significant depression symptoms and cognitive performance deficits. According to the lead author, Stephen Smagula, Ph.D., Assistant Professor of Psychiatry and Epidemiology at Pittsburgh, "There's something about getting going early, staying active all day and following the same routine each day that seems to be protecting older adults." As Smagula continues, "What's exciting about these findings is that activity patterns are under voluntary control, which means that making intentional changes to one's daily routine could improve health and wellness." Authors on the study included Stephen F. Smagula, Ph.D., Gehui Zhang, B.S., Swathi Gujral, Ph.D., Charles F. Reynolds III, M.D., and Gehui Zhang, B.S., all of University of Pittsburgh or University of Pittsburgh Medical Center; Naima Covassin, Ph.D., of the Mayo Clinic; Jingen Li, M.D., Ph.D., of the Mayo Clinic and Beijing University of Chinese Medicine; Warren D. Taylor, M.D., of Vanderbilt University Medical Center; and Robert T. Krafty, Ph.D., of Emory University.

Smith, A. (2020, October 5). *FBI background checks for gun sales have hit an annual record already, fueled by Covid-10*. Forbes.

<https://www.forbes.com/sites/aaronsmith/2020/10/05/fbi-background-checks-for-gun-sales-have-hit-an-annual-record-already-fueled-by-covid-19/?sh=19d01bc15360>

Keywords: Trigger effect, Weapons effect

Aaron Smith is a Forbes contributing reporter who covers the firearms industry, including sales, FBI background checks, manufacturers, politics, the NRA, types of firearms, gun control laws, and legislation. See also Federal Bureau of Investigation (2020).

Smith, S., Robinson, L., & Segal, J. (2018, March). Preventing Alzheimer's disease. *HelpGuide*. <https://www.helpguide.org/articles/alzheimers-dementia-aging/preventing-alzheimers-disease.htm>

The authors discuss six pillars of prevention of dementia: (1) regular exercise, (2) social engagement, (3) healthy diet, (4) mental stimulation, (5) quality sleep, and (6) stress management. The authors also discuss some supplements that may help prevent dementia. Folic acid, vitamin B12, vitamin D, magnesium, and fish oil may help to preserve brain health. Studies of vitamin E, ginkgo biloba, coenzyme Q10, and turmeric have yielded less conclusive results, but may also be beneficial in preventing or delaying Alzheimer's and dementia symptoms. Also see Cleveland Clinic (2021) Six Pillars of Brain Health.

Smith, Z. (2016, January 29). I was 35 when I discovered I'm on the autism spectrum: Here's how it changed my life. *Get Pocket*. <https://getpocket.com/explore/item/i-was-35-when-i-discovered-i-m-on-the-autism-spectrum-here-s-how-it-changed-my-life-1177955032>

Smith-Christopher, D. L. (1996). Daniel. In *The New Interpreter's Bible* (Vol. VII; pp. 17-156). Nashville, TN: Abingdon Press.

Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

In his analysis of history's most famous sufferer of boanthropy (i.e., the delusional belief and corresponding behaviors that one is a bovine animal such as an ox or cow) may have been Nebuchadnezzar II, who in the Book of Daniel "was driven from men, and did eat grass as oxen" (Daniel 4:33), Daniel Smith-Christopher (1996) provides a caution: "Although to see in this some form of recognizable mental illness (e.g., lycanthropy) push the sense of the story beyond the more common motifs of reversal of fortune and the bringing down of the proud" (p. 74).

Snowden, D. A., Kemper, S. J., Mortimer, J. A., Greiner, L. H., Wekstein, D. R., & Markesbery, W. (1996). Linguistic ability in early life and cognitive function and Alzheimer's disease in late life: Findings from the nun study. *Journal of the American Medical Association*, 275(7), 528–532.

Sommers-Flanagan, J. (2018). Conversations about suicide: Strategies for detecting suicide risk. *Journal of Health Service Psychology*, 44, 33–45.

Spitzer, R. L., & Robins, E. (1978). Research diagnostic criteria: Rationale and reliability. *Archives of General Psychiatry*, 35(6), 773–782.

Spitzer, R. L., Forman, J. B. W., & Nee, J. (1979). Initial interrater diagnostic reliability. *American Journal of Psychiatry*, 136, 815–817.

Stanford, M. S. (2008). *Grace for the afflicted*. Downers Grove, IL: InterVarsity Press.
Keywords: boanthropy, cow, lycanthropy, wolf, zoanthropy

Matthew S. Stanford describes examples of how boanthropy “still occurs today when a person, in a delusional state, believes themselves to be an ox or cow...and attempts to live and behave accordingly” (pp. 122-123).

St. Clare, T., Menzies, R. G., & Jones, M. K. (2008). *Danger ideation reduction therapy (DIRT) for obsessive compulsive washers: A comprehensive guide to treatment* (General Edition). Samford Valley, Queensland: Australian Academic Press.

DIRT is an evidence-based treatment program designed to specifically reduce expectancies of danger or threat in OCD washers. Unlike many traditional OCD treatments, DIRT is based on the rationale that the therapist should provide as much factual information as possible to decrease the expectancy of illness or disease and thus reduce the high dropout rate seen in conventional OCD exposure and response prevention programs.

Stanciu, C. N. (2020, January 15). *An overview of cannabis use in pregnancy*. Psychiatric Times. https://www.psychiatrictimes.com/substance-use-disorder/overview-cannabis-use-pregnancy?elq_mid=10445&elq_cid=860775

Psychiatrist Cornel N. Stanciu, M.D., M.R.O., provides a brief summary, supported by citations from peer-reviewed publications, of some of the effects of cannabis: Consumption of cannabis during pregnancy results in cannabinoid placental crossing and accumulation in the fetal brain, and other organs, where it interferes with neurodevelopment and the endocannabinoid system. Use during the postnatal period can also lead to secretion in breast milk for extended periods (up to a week) after last use. From retrospective studies, cannabis ingestion has been associated with anemia in the mothers as well as low birth weights, greater risk of preterm and stillbirths, as well as increased need for neonatal intensive care unit admissions. Although there is no phenotypic syndrome and no overt birth defects, a review of two longitudinal studies indicates the majority of the teratogenicity translates later in life, beyond the infant developmental stage. Children born to mothers who used during pregnancy have higher rates of impulsivity, delinquency, learning and memory impairment, as well as executive function deficits. There is also an increased association with psychosis proneness during middle childhood. Dr. Stanciu points out that in 2018, the American College of Obstetricians and Gynecologists (ACOG) released guidelines advising physicians to screen for cannabis use in pregnant and breastfeeding women and encourage them to quit.

Stasiewicz, P. R., Nochajski, T. H., & Homish, L. D. (2007). Assessment of alcohol use disorders among court-mandated DWI offenders. *Journal of Addictions and Offender Counseling*, 27(2), 102–112.

Stein, R. (2015, November 5). *Powerful 'gene drive' can quickly change an entire species*. NPR. <https://www.npr.org/sections/health-shots/2015/11/05/451216596/powerful-gene-drive-can-quickly-change-an-entire-species>

Biologist Ethan Bier, Ph.D., University of California, San Diego, had a graduate student, Valentino Gantz, who found a way to get brown fruit flies to produce blond-looking offspring most of the time. Gantz demonstrated a new technique that could create this effect, known as *gene drive*, almost every time. *Gene drive* refers to a sequence of DNA that can cause a mutation to be inherited by the offspring of an organism with nearly 100 percent efficiency, regardless of whether it's beneficial for that organism's survival. By combining it with new genetic editing techniques such as CRISPR, scientists are able to drive changes they make quickly through an entire species. In other words, this technology makes the organisms that carry the gene have the specified characteristic, and it also causes them to have all their offspring have the same characteristic.

Stein, R. (2019, February 20). *Scientists release controversial genetically modified mosquitoes in high-security lab*. NPR. <https://www.npr.org/sections/goatsandsoda/2019/02/20/693735499/scientists-release-controversial-genetically-modified-mosquitoes-in-high-security-lab>

Using CRISPR technology to engineer mosquitoes with a *gene drive*, entomologist Ruth Müeller, Dr. rer. nat., and a team of researchers have launched a major new phase in the testing of a controversial genetically modified organism: a mosquito designed to quickly spread a genetic mutation lethal to its own species. The hope is that the technology will help eliminate or reduce the *Anopheles gambiae*, the main species of mosquito that spreads malaria, an infectious disease that affects probably two-thirds of the world's population. Critics and environmentalists warn that gene-drive organisms could spread uncontrollably and cause unintended consequences, such as having a negative effect on crops (e.g., by eliminating important pollinators) or causing a species' population crash, i.e., which could also lead to other mosquitoes coming with other diseases.

Stilo, S. A., Di Forti, M., & Murray, R. M. (2011). Environmental risk factors for schizophrenia: Implications for prevention. *Neuropsychiatry*, 1(5), 457–466.

Stokowski, L. A. (2018, February 3). Bipolar disorder and ADHD in children: Confusion and comorbidity. *Medscape*. https://www.medscape.com/viewarticle/711223_4

Stromberg, J. (2015, April 23). *Scientists agree: Coffee naps are better than coffee or naps alone*. Get Pocket. <https://getpocket.com/explore/item/scientists-agree-coffee-naps-are-better-than-coffee-or-naps-alone>

This blog provides a short explanation of how a 20-minute coffee nap restores alertness better than a short nap or a cup of coffee alone. A coffee nap helps clear adenosine from the brain, without resulting in sleep inertia that is associated with a longer sleep period.

- Stone, A. V. (2000). *Fitness for duty: Principles, methods, and legal issues*. Washington, DC: CRC Press.
- Stone, A. V. (2002). Evaluations and assessments for fitness for duty. Continuing education workshop presented attended at the Midwinter Conference of the Georgia Psychological Association, Renaissance Asheville, NC. January 19, 2002.
- Strachey, J. (1960). *The Standard Edition of the Complete Psychological Works of Sigmund Freud* (Volume VI) (1901): *The Psychopathology of Everyday Life*, i-ix. London: The Hogarth Press and the Institute of Psychoanalysis.
- Sundel, M., & Sundel, S. S. (2018). *Behavior change in the human services: behavioral and cognitive principles and applications*. Thousand Oaks, CA: SAGE Publications, Inc.
- Swaab, D. F., Chung, W. C. J., Kruijver, F. P. M., Hofman, M. A., & Ishunina, T.A. (2002). Sexual differentiation of the human hypothalamus. *Advances in Experimental Medicine and Biology*, 511, 75–105.
- Sykes, B. (2001). *The seven daughters of Eve*. New York, NY: W. W. Norton & Company.
In 1994 Bryan Sykes was called in as an expert to examine the frozen remains of a man trapped in glacial ice in northern Italy for over 5000 years—the Ice Man. Sykes succeeded in extracting DNA from the Ice Man, but even more important, writes *Science News*, was his “ability to directly link that DNA to Europeans living today.” In this groundbreaking book, Sykes reveals how the identification of a particular strand of DNA that passes unbroken through the maternal line allows scientists to trace our genetic makeup all the way back to prehistoric times—to seven primeval women, the “seven daughters of Eve.”
- Szasz, T. S. (1971). The sane slave. An historical note on the use of medical diagnosis as justificatory rhetoric. *American Journal of Psychotherapy*, 25(2), 228–239.
- Tamaki, M., Bang, J. W., Watanabe, T., & Sasaki, Y., (2016, May 9). Night watch in one brain hemisphere during sleep associated with the first-night effect in humans. *Current Biology*, 26(9), 1190–1194.
Highlights: Interhemispheric asymmetry in sleep depth occurs for the first night in a new place. This interhemispheric asymmetry occurs in the default-mode network. The less-asleep hemisphere shows increased vigilance in response to deviant stimuli. One brain hemisphere may work as a night watch during sleep in a novel environment.

Tang, Z., Wu, C., Li, X., Song, Y., Yao, X., Duan, Y., Zhang, H., Wang, Y., Qian, Z., Cui, J., & Lu, J. (2020, March 3). On the origin and continuing evolution of SARS-CoV-2. *National Science Review*, nwaa036. <https://doi.org/10.1093/nsr/nwaa036>

Keywords: COVID-10, Coronavirus

The SARS-CoV-2 epidemic started in late December 2019 in Wuhan, China, and has since impacted a large portion of China and raised major global concern. Xiaolu Tang and colleagues investigated the extent of molecular divergence between SARS-CoV-2 and other related coronaviruses. Although we found only 4% variability in genomic nucleotides between SARS-CoV-2 and a bat SARS-related coronavirus (SARSr-CoV; RaTG13), the difference at neutral sites was 17%, suggesting the divergence between the two viruses is much larger than previously estimated. The results suggest that the development of new variations in functional sites in the receptor-binding domain (RBD) of the spike seen in SARS-CoV-2 and viruses from pangolin SARSr-CoVs are likely caused by mutations and natural selection besides recombination. Population genetic analyses of 103 SARS-CoV-2 genomes indicated that these viruses evolved into two major types (designated L and S), that are well defined by two different SNPs that show nearly complete linkage across the viral strains sequenced to date. Although the L type (~70%) is more prevalent than the S type (~30%), the S type was found to be the ancestral version. Whereas the L type was more prevalent in the early stages of the outbreak in Wuhan, the frequency of the L type decreased after early January 2020. Human intervention may have placed more severe selective pressure on the L type, which might be more aggressive and spread more quickly. On the other hand, the S type, which is evolutionarily older and less aggressive, might have increased in relative frequency due to relatively weaker selective pressure.

Taran, R. (2019, June 4). *Emotional advantage: Embracing all your feelings to create a life you love*. New York, NY: St. Martin's Essentials.

Keywords: Shame, guilt, happiness

Randy Taran is founder of the Happiness Project. The forward in this book was written by His Holiness the Dalai Lama.

Tarr, P. (2018, November 18). *Brain and homelessness and mental illness: A challenge to our society*. Brain and Behavior Research Foundation.

<https://www.bbrfoundation.org/blog/homelessness-and-mental-illness-challenge-our-society>

Peter Tarr, Ph.D. cites a 2015 assessment by the U.S. Department of Housing and Urban Development, revealing that 564,708 people were homeless on a given night in the U.S. At a minimum, 25% (i.e., approximately 140,000) were seriously mentally ill, and 45% (i.e., 250,000) had some form of mental illness. By comparison, a 2016 study found that 4.2 percent of U.S. adults have been diagnosed with a serious mental illness.

Tarsha, A. A., Xantus, A., & Arana, R. (2016). Can sex partner therapy treat sexual distress and dysfunction in transgender patients after gender confirmation surgery? *Journal of Sex & Marital Therapy*, 42(7), 573–575.

Taquet, M., Geddes, J. R., Husain, M., Luciano, S., & Harrison, P. J., (2021, May 01). 6-month neurological and psychiatric outcomes in 236 379 survivors of COVID-19: A retrospective cohort study using electronic health records. *Lancet*, 8(5), 416-427. Open Access Published: April 06, 2021 DOI: [https://doi.org/10.1016/S2215-0366\(21\)00084-5](https://doi.org/10.1016/S2215-0366(21)00084-5)
Among 236,379 patients diagnosed with COVID-19, the estimated incidence of a neurological or psychiatric diagnosis in the following 6 months was one-third (33.62%).

Taylor, L. B. (2016). *Shattering masks: Affirming my identity. Transitioning my faith*. Charleston, SC: Create Space.

Taylor, L. B. (2015, September 13). *Three lenses (overview)*. Sophia's Journal. Retrieved September 13, 2015 from <http://sophiasojourn.com/three-lenses-overview/>

Taylor, J. Y., Caldwell, C. H., Baser, R. E., & Jackson, J. S. (2007, November). Prevalence of eating disorders among Blacks in the National Survey of American Life. *International Journal of Eating Disorders*, 40(Suppl), S10-S14. Doi10.1002/eat.20451

Tedeschi, R. G., & Calhoun, L. G. (1995). *Trauma and transformation*. Thousand Oaks, CA: Sage.

Tedeschi, R. G., Shakespeare-Finch, J., Taku, K., & Calhoun, L. G. (2018). *Posttraumatic growth: Theory, research and application*. New York, NY: Routledge.

Tedeschi, R. G., & Moore, B. A. (2016). *The posttraumatic growth workbook*. Oakland, CA: New Harbinger.

Telephone psychotherapy: Ensuring patients have access to effective care. (2020, April 2).

<https://www.apaservices.org/practice/legal/technology/telephone-psychotherapy>

The COVID-19 pandemic has led to a rapid transition where meetings, conferences and psychological appointments are conducted virtually, by telephone, video and over the web. Long before video teleconferencing was an option, psychologists and other health-care providers connected with patients over the telephone and provided support and intervention as needed. Years of research support the efficacy of providing psychological interventions over the telephone. (See Varker, Brand, Ward, Terhaag, & Phelps, 2019).

The 50 most commonly prescribed drugs in America and their average price. (2020, March 23). Drug Report. <https://www.drugreport.com/50-commonly-prescribed-drugs-in-america/>

Thibaut, F. (2018). Gender differences in addiction: Clinical implications. *Psychiatric Times*, 35(11), 17–18, 26.
http://www.psychiatrictimes.com/sites/default/files/legacy/mm/digital/media/psy1118_ezine.pdf
The Thibaut (2018) article is available at <http://www.psychiatrictimes.com/special-reports/gender-differences-addiction-clinical-implications>

Thibault, R. T., & Raz, A. (2017). The psychology of neurofeedback: Clinical intervention even if applied placebo. *American Psychologist*, 72(7), 679–688.
<http://dx.doi.org/10.1037/amp0000118>

Keywords: Brain mapping, neurofeedback

Abstract: Advocates of neurofeedback make bold claims concerning brain regulation, treatment of disorders, and mental health. Decades of research and thousands of peer-reviewed publications support neurofeedback using electroencephalography (EEG-nf); yet, few experiments isolate the act of receiving feedback from a specific brain signal as a necessary precursor to obtain the purported benefits. Moreover, while psychosocial parameters including participant motivation and expectation, rather than neurobiological substrates, seem to fuel clinical improvement across a wide range of disorders, for-profit clinics continue to sprout across North America and Europe. Here, we highlight the tenuous evidence supporting EEG-nf and sketch out the weaknesses of this approach. We challenge classic arguments often articulated by proponents of EEG-nf and underscore how psychologists and mental health professionals stand to benefit from studying the ubiquitous placebo influences that likely drive these treatment outcomes.

Thigpen, C. H., & Cleckley, H. M. (1954). A case of multiple personality. *Journal of Abnormal and Social Psychology*, 49, 135-151.

Psychiatrists Corbett Thigpen, M.D. and Hervey Cleckley, M.D. wrote a classic article on multiple personality disorder, which is known by its contemporary name of dissociative identity disorder.

Thigpen, C. H., & Cleckley, H. M. (1957). *The three faces of Eve*. New York, NY: McGraw Hill.
Augusta, Georgia Psychiatrists Corbett H. Thigpen, M.D. (1919–1999) and Hervey Cleckley, M.D. (1903–1984) published this classic book about the multiple personalities of “Eve” who was later identified as Christine “Chris” Costner Sizemore (1927–2016). For much of the 1940s and 1950s, these two psychiatrists comprised the Departments of Psychiatry and Neurology at the Medical College of Georgia while also maintaining their private practice. They were pioneers in treatments that included coma therapy, electroshock therapy (ECT), deep sleep therapy, and lobotomy.

Thigpen, C. H. (1984). On the incidence of multiple personality disorder: A brief communication. *International Journal of Clinical and Experimental Hypnosis*, 32(2), 63–66.

This article cautions against over-use of the diagnosis of multiple personality disorder.

Thomas, A. G., Jonason, J. K., Blackburn, J. D., Kennair, L. E. O., Lowe, R., Malouff, J., Stewart-Williams, S., Sulikowski, D., & Li, N. P. (2019, September 8). Mate preference priorities in the East and West: A cross-cultural test of the mate preference priority model. *Personality*. <https://doi.org/10.1111/jopy.12514>

Thomas et al. (2019) asked 2,477 college students from Australia, Hong Kong, Malaysia, Norway, Singapore, and the United Kingdom to allocate points to eight attributes in a potential partner: chastity, creativity, desire for children, humor, good financial prospects, kindness, physical attractiveness, and religiosity. Eastern and Western participants differed in their ranking for almost every trait, suggesting that culture influences prioritization. Despite these differences, traits fundamental for the reproductive success of each sex in the ancestral environment were prioritized by both Eastern and Western participants. Overall, the most desired trait was kindness. After this trait, men favored physical attractiveness, whereas women favored good financial prospects. The least important characteristics across all countries were creativity, chastity, and religiosity.

Thomas, M. E. (2013). *Confessions of a sociopath: A life spent hiding in plain sight*. New York, NY: Crown Publishers.

Thome, J., Terpou, B. A., McKinnon, M. C., & Lanius, R. A. (2020). The neural correlates of trauma-related autobiographical memory in posttraumatic stress disorder: A meta-analysis. *Depression and Anxiety*, 37(4), 321–345. <https://doi.org/10.1002/da.22977>

Thorn, B.E. (2004). *Cognitive therapy for chronic Pain: A step-by-step approach*. New York, NY: Guilford Publications.

Thorn, B. E. (2017). *Cognitive therapy for chronic pain: A step-by-step approach* (2nd ed.). New York, NY: Guilford Publications.

Thorn, B. E. (2018). Cognitive behavioral therapy for chronic pain. *Journal of Health Service Psychology*, 44, 25–32.

Thorndike, E. L. (1911). *Animal intelligence*. New York, NY: Macmillan.

Thorndike, E. (1913). *Educational psychology: The psychology of learning*. New York, NY: Teachers College Press.

Tierney, J., & Baumeister, R. F. (2019, December 31). *The power of bad: How the negativity effect rules us and how we can rule it*. New York, NY: Penguin Press.

Science writer John Tierney and research psychologist Roy F. Baumeister discuss the *negativity effect*, which they define as the tendency of people to respond more strongly to negative events and emotions than to positive ones. Baumeister unexpectedly stumbled upon this fundamental aspect of human nature. To find out why financial losses mattered more to people than financial gains, Baumeister looked for situations in which good events made a bigger impact than bad ones, yet his research team could not find any such situations. Instead, they found that bad outcomes had a stronger impact than good ones. The authors speculate that the human brain has a “negativity bias” that makes sense from an evolutionary perspective because it kept our ancestors alert to fatal dangers. In contemporary times, however, this bias toward negativity can distort our perspective in a modern media environment. The steady barrage of bad news and crisis mongering makes people feeling needlessly angry, fearful, and helpless. Tierney and Baumeister argue that once this negativity bias is recognized, the rational brain can overcome the power of bad when it’s harmful and employ that power when it’s beneficial. In reality, bad breaks and bad feelings often create the most powerful incentives to become smarter and stronger. Properly understood, it is as if bad outcomes can be put to good use in the future.

Tierney, J., & Baumeister, R. F. (2020, January 9). *How negativity can kill a relationship*. *The Atlantic*. https://www.theatlantic.com/family/archive/2020/01/negativity-can-ruin-relationships/604597/?utm_source=pocket-newtab

Science writer John Tierney and research psychologist Roy F. Baumeister discuss how successful marriages are often defined not by improvement but by avoiding decline related to the *negativity effect*. This short article is taken from Tierney and Baumeister’s (2019) book, *The Power of Bad*.

Tienari, P., Wynne, L. C., Moring, J., Nieminen, P., & Sorri, A., ...Moring, J. (1994). The Finnish adoptive family study of schizophrenia: Implications for family research. *British Journal of Psychiatry*, 23(Suppl. 164), 20–26.

Tippett, P. (2020, April 7). *Saving your health, one mask at a time*. LinkedIn.

https://www.linkedin.com/pulse/saving-your-health-one-mask-time-peter-tippett-md-phd/?fbclid=IwAR2LFO8YfoBknffkBC1688pCZsSMK5ScnwXVTmkWb72WfvfX2Rp_r_5GE4I

Keywords: COVID-19, Coronavirus, Masking, Masks, Self-care, Self care

Peter Tippett, M.D., Ph.D. is an Internal Medicine-certified, Emergency Room physician with a Ph.D. in Biochemistry. Dr. Tippett explains how personal protection from a virus like SARS-CoV-2 (the formal name of the virus that causes CoV-2) works, how any

given measure individually lowers risk, how various countermeasures work together, and how some simple guidelines can offer protection.

Todorov, A. (2017). *Face value: The irresistible influence of first impressions*. Princeton, NJ: Princeton University Press.

Keywords: Charm, charisma, body language, affective presence

Princeton Professor Alexander Todorov, Ph.D. describes research that shows how people can make judgements about someone's likeability, trustworthiness and competence after seeing someone's face for less than a tenth of a second. Dr. Todorov's own research suggests that, as a face becomes happier in appearance, it is also perceived as being more trustworthy. People typically perceive smiling faces as warmer, sociable, and more trustworthy.

Tolin, D. F., Stevens, M. C., Villavicencio, A. L., Norberg, M. M., Calhoun, V., Frost, R. O., Steketee, G., Raunch, S. L., & Pearlson, G. D. (2012). Neural mechanisms of decision making in hoarding disorder. *Archives of General Psychiatry*, 69(8), 832–841.

Torous, J. (2019, December 11). 7 trends in digital mental health in 2020. *Psychiatric Times*.
https://www.psychiatristimes.com/telepsychiatry/7-trends-digital-mental-health-2020?rememberme=1&elq_mid=10063&elq_cid=860775&GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA

John Torous, M.D., Digital Editor of *Psychiatric Times*, discusses some trends in digital care. Among the more interesting trends discussed in his article, one is a graph showing that, in most real world cases, most mental health apps are rarely opened for no more than a few days after they are installed.

Torrey, E. F., & Dailey, L. (2017, November 15). Treating the sickest: Why does the U.S. lag behind? *Psychiatric Times*, 34(11), 1.
<http://www.psychiatristimes.com/schizophrenia/treating-sickest-why-does-us-lag-behind?GUID=D1247D8F-99A3-42AE-AA11-04774AAE7EEA&rememberme=1&ts=28112017>

Towers S., Mubayi, A., & Castillo-Chavez, C. (2018). Detecting the contagion effect in mass killings: A constructive example of the statistical advantages of unbinned likelihood methods. *PLoS ONE* 13(5): e0196863. <https://doi.org/10.1371/journal.pone.0196863>
According to the a statistical analysis by the authors, the rate of mass shootings in the U.S. has escalated to an average of one every 12.5 days, and one school shooting on average every 31.6 days, compared to a pre-2000 level of about three events per year.

Traveling by Air With Service Animals; 14 CFR Part 382 (Dec. 10, 2020).

Keywords: Service animal, support animal, service dog, emotional support animal (ESA)

The Final Rule of the Office of the Secretary (OST), U.S. Department of Transportation (DOT) was published on page 79742 of Volume 85, Number 238 of the Federal Rules and Regulations. The Final Rule is available at this link:

<https://www.govinfo.gov/content/pkg/FR-2020-12-10/pdf/2020-26679.pdf>

See also Ensminger and Thomas (2013).

Treatment Advocacy Center, Office of Research and Public Affairs. (2016). *Figure 1.*

Percentage of jail and prison inmates with serious mental illness. Arlington, VA: Author.

<http://tacreports.nonprofitsoapbox.com/jail-study-figures>

Tufekci, Z. (2012, December 19). *The media needs to stop inspiring copycat murders: Here's how.* The Atlantic. <http://www.theatlantic.com/national/archive/2012/12/the-media-needs-to-stop-inspiring-copycat-murders-heres-how/266439/>

Zeynep Tufekci, Ph.D., a fellow at the Center for Information Technology Policy at Princeton University and an assistant professor at the School of Information and Department of Sociology at the University of North Carolina, discusses the media contagion effect. She offers four initial recommendations for stopping this contributor to mass shootings: (1) Law enforcement should not release details of the methods and manner of the killings, and those who learn those details should not share them. (2) If and when social media accounts of the killers are located, law enforcement should work with the platforms to immediately pull them. (3) The name of the killer should not be revealed immediately. (4) The intense push to interview survivors and loved ones in their most vulnerable moments should be stopped.

Tupes, E. C., & Christal, R. E. (1961). Recurrent personality factors based on trait ratings.

Technical Report ASD-TR-61-97. Lackland Air Force Base, TX: Personnel Laboratory, Air Force Systems Command.

Turban, J. L., Loo, S. S. , Almazan, A. N., & Keuroghlian, A. S. (2021, March 31). Factors leading to “detransition” among transgender and gender diverse people in the United States: A mixed-methods analysis. *LGBT Health*. doi: 10.1089/lgbt.2020.0437. Online ahead of print.

Jack Turban, Stephanie Loo, Anthony Almazan, and Alex Keuroghlian begin their discussion by pointing out that there is a paucity of information about transgender and gender diverse (TGD) people who “detransition,” or go back to living as their sex assigned at birth. Using data from the U.S. Transgender Survey, a survey of 27,715 TGD adults in the U.S., the participants were asked if they had ever detransitioned and to report driving factors. A total of 17,151 (61.9%) participants reported that they had ever pursued gender affirmation, broadly defined. Of these respondents, 2,242 (13.1%) reported a history of detransition. Of those who had detransitioned, 82.5% reported at

least one external driving factor, including frequently-endorsed external factors such as pressure from family and societal stigma. The top five reasons that the study participants cited for detransitioning are significant: “pressure from a parent” (35.6%), “it was just too hard for me” (33.6%), “pressure from community or societal stigma” (32.5%), “I had trouble getting a job” (26.9%), and “pressure from other family members” (25.9%). A history of detransition was associated with having been assigned male sex at birth, nonbinary gender identity, bisexual sexual orientation, and having a family unsupportive of one’s gender identity. A total of 15.9% of respondents reported at least one internal driving factor, including fluctuations in or uncertainty regarding gender identity. Only 2.4% cited “uncertainty or doubt around gender” as a factor for detransitioning. Turban et al. concluded that, among TGD adults with a reported history of detransition, the vast majority reported that their detransition was driven by external pressures.

Turknett, R. L., & Turknett, C. N. (2005). *Decent people, decent company: How to lead with character at work and in life*. Mountain View, CA: David-Black Publishing.

Robert Turknett, Ph.D. and Carolyn Turknett, M.A. describe their original Leadership Character Model that includes the core qualities of leadership character. Drawing on more than many years of experience with hundreds of CEOs, managers, and teams, the Turknetts provide examples of how to help people move from asking “Why don’t they?” to asking the more useful question, “What can I?” Using Leadership Character Model, the authors identify eight essential traits of leadership character that are divided into two overarching dimensions: **respect** (empathy, lack of blame, emotional mastery, humility) and **responsibility** (self-confidence, accountability, focus on the whole, and courage).

Twenge, J. M. (2017, August 22). *iGen: Why today’s super-connected kids are growing up less rebellious, more tolerant, less happy--and completely unprepared for adulthood.** New York, NY: Atria Paperback. An imprint of Simon & Schuster.

**and what that means for the rest of us*

Jean Twenge, Ph.D., Professor of Psychology at San Diego State University, describes how the internet generation (iGen) suffers from far higher rates of anxiety, depression, and suicide than did Millennials at the same age. Professor Twenge argues that smartphones are the most likely cause behind the sudden increases in mental health concerns among teens after 2012. For example, teens who spend three hours a day or more on electronic devices are 35 percent more likely to have a risk factor for suicide, such as making a suicide plan. Since 2007, as teens started spending less time together and became more isolated, they also became less likely to kill one another, and more likely to kill themselves.

Twenge, J. M. (2017, September). Have smartphones destroyed a generation? *The Atlantic*.

<https://www.theatlantic.com/magazine/archive/2017/09/has-the-smartphone-destroyed-a-generation/534198/>

Jean Twenge describes how the post-Millennial iGeneration have been more comfortable scrolling online than out partying and socializing with others, and they are on the brink of a mental-health crisis in terms of prevalence rates of anxiety, depression, and suicide.

Twenge, J. M. (2020, September 09). Increases in depression, self-harm, and suicide among U.S. adolescents after 2012 and links to technology use: Possible mechanisms. *Psychiatric Research and Clinical Practice*, 2(1), 19–25.

<https://doi.org/10.1176/appi.prcp.20190015>

Tyrer S. P. (2020, September 23). 10 factors leading to pain complaints in the absence of a medical diagnosis. *Psychiatric Times*. <https://www.psychiatrictimes.com/view/10-factors-leading-pain-complaints-absence-medical-diagnosis?page=7>

Stephen P. Tyler, M.D. provides a list of factors that contribute to symptom amplification in people with chronic pain conditions.

United Nations Office on Drugs and Crime (UNODC) (2014). *Global Study on Homicide 2013*.

New York, NY: United Nations. ISBN 978-92-1-054205-0. Sales No. 14.IV.1.

https://www.unodc.org/documents/gsh/pdfs/2014_GLOBAL_HOMICIDE_BOOK_web.pdf

Between 2005 and 2012, the average homicide rate in the U.S. was 4.9 per 100,000 inhabitants compared to the average rate globally, which was 6.2. However, the U.S. had much higher murder rates compared to other countries identified in the report as “developed,” which all had average homicide rates of 0.8 per 100,000. For example, in 2004, there were 5.5 homicides in the U.S. for every 100,000 persons, which was almost three times higher as Canada (1.9) and six times as high as Germany and Italy (0.9).

United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2012, November). Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings. Page 26.

http://archive.samhsa.gov/data/NSDUH/2k11MH_FindingsandDetTables/2K11MHFR/NSDUHmhfr2011.pdf

United States Department of Homeland Security, Cybersecurity and Infrastructure Agency (CISA). (2020, March 23). Guidance on the essential critical infrastructure workforce: Ensuring community and national resilience in COVID-19 response [Version 1.1].

https://www.cisa.gov/sites/default/files/publications/CISA_Guidance_on_the_Essential_Critical_Infrastructure_Workforce_508C_0.pdf

Keywords: COVID-10, Coronavirus

As the Nation comes together to slow the spread of COVID-19, on March 16th, the President issued updated Coronavirus Guidance for America. This guidance states that: “If you work in a critical infrastructure industry, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule.” Under Healthcare/Public Health, the following are listed on page 3: “Caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists).” See also Krebs (2020).

United States Department of Justice, Federal Bureau of Investigation, Criminal Justice Criminal Services Division. (2015). *Crime in the United States, 2014. Table 8. Murder Victims by Weapon: 2010-2014*. https://ucr.fbi.gov/crime-in-the-u.s/2014/crime-in-the-u.s.-2014/tables/expanded-homicide-data/expanded_homicide_data_table_8_murder_victims_by_weapon_2010-2014.xls

United States Department of Justice, Federal Bureau of Investigation, Criminal Justice Information Services Division. (2015). Table 8. Offenses Known to Law Enforcement by City, 2015. In *2015 Crime in the United States*. Washington, DC.: Author. <https://ucr.fbi.gov>

United States Department of Justice, Federal Bureau of Investigation, Criminal Justice Criminal Services Division. (2018, Fall). *January-June Preliminary Semiannual Uniform Crime Report: 2018 Crime in the United States*. <https://ucr.fbi.gov/crime-in-the-u.s/2018/preliminary-report>

Based on preliminary analysis of data for 2018, murder rates for a few U.S. cities are as follows (listed in ascending order): Boston (26), Atlanta (42), New Orleans (90), Baltimore (135), Los Angeles (133), New York (148), Chicago (253). For comparison purposes, urban areas generally have higher rates than rural and suburban areas in the U.S. The overall U.S. homicide rate appears to fluctuate between 4.7 and 5.3 per 100,000 people over the past 10 years or so.

United States Department of Justice, Federal Bureau of Investigation, Criminal Justice Criminal Services Division. (2018, Fall). *January-June Preliminary Semiannual Uniform Crime Report: 2018 Crime in the United States*. Table 4: January to June 2017–2018 Offenses Reported to Law Enforcement by State by City 100,000 and over in population, Colorado through Hawaii. <https://ucr.fbi.gov/crime-in-the-u.s/2018/preliminary-report/tables/table-4/state-cuts/table-4-colorado-through-hawaii.xls>

United States Department of Veterans Affairs. (2016, March 4). PTSD: National Center for PTSD. <http://www.ptsd.va.gov/>

Vaillant, G. E. (1977). *Adaptation to life*. Boston, MA: Little Brown.

Keywords: Defensive Functioning Scale (DFS)

van der Loss, M. A., Hannema, S. E., Klink, D. T., den Heijer, M., & Wiepjes, C. M. (2022, October 20). Continuation of gender-affirming hormones in transgender people starting puberty suppression in adolescence: A cohort study in the Netherlands. *The Lancet: Child and Adolescent Health*, 6(12), P869–875. [https://doi.org/10.1016/S2352-4642\(22\)00254-1](https://doi.org/10.1016/S2352-4642(22)00254-1)

Authors: Maria Anna Theodora Catharina van der Loos, M.D., Sabine Elisabeth Hannema, Ph.D., Daniel Tatting Klink, Ph.D., Prof Martin den Heijer, Ph.D., and Chantal Maria Wiepjes, Ph.D.

Findings: 720 people were included, of whom 220 (31%) were assigned male at birth and 500 (69%) were assigned female at birth. At the start of GnRHα treatment, the median age was 14·1 (IQR 13·0–16·3) years for people assigned male at birth and 16·0 (14·1–16·9) years for people assigned female at birth. Median age at end of data collection was 20·2 (17·9–24·8) years for people assigned male at birth and 19·2 (17·8–22·0) years for those assigned female at birth. 704 (98%) people who had started gender-affirming medical treatment in adolescence continued to use gender-affirming hormones at follow-up. Age at first visit, year of first visit, age and puberty stage at start of GnRHα treatment, age at start of gender-affirming hormone treatment, year of start of gender-affirming hormone treatment, and gonadectomy were not associated with discontinuing gender-affirming hormones. In summary, 98% of 720 pre-18 year olds continued 4-5 years later with Gender Affirming Hormone Therapy after puberty blocking.

Vandenbussche, E. (2021) Detransition-related needs and support: A cross-sectional online survey. *Journal of Homosexuality*, 68(8). doi: 10.1080/00918369.2021.1919479

Keywords: Detransition

Elie Vandenbussche, BA conducted a cross-sectional online survey and gathered a sample of 237 male and female detransitioners. Detransition can involve either returning to one's natal gender assignment or to a less binary gender expression. The results of the survey showed important psychological needs in relation to gender dysphoria, comorbid conditions, feelings of regret, and internalized homophobic and sexist prejudices.

Vandenbussche also found that many detransitioners need medical support notably in relation to stopping/changing hormone therapy, surgery/treatment complications and reversal interventions.

VanDercar, A., & Resnick, P. J. (2020, September 30). Tips for testifying in court. *Psychiatric Times*, 37(9), 26–27. <https://www.psychiatrictimes.com/view/tips-for-testifying-in-court>

Keywords: Court, expert witness, forensic, testimony, subpoena

Ashley VanDercar, M.D., J.D. and Phillip J. Resnick, M.D. discuss strategies to help clinicians remain calm under pressure, to be clear and concise in their testimony, and to know what is expected in courtroom battles.

Varker, T., Brand, R. M., Ward, J., Terhaag, S., & Phelps A. (2019, November). Efficacy of synchronous telepsychology interventions for people with anxiety, depression, posttraumatic stress disorder, and adjustment disorder: A rapid evidence assessment. *Psychological Services*, 16(4), 621–635. doi: 10.1037/ser0000239. Epub 2018 May 28. Abstract summary: The goal of this study was to assess evidence for synchronous telepsychology interventions for four common mental health conditions (depression, anxiety, posttraumatic stress disorder, and adjustment disorder). Randomized controlled trials published between 2005 and 2016 that investigated synchronous telepsychology (i.e., telephone delivered, video teleconference delivered, or Internet delivered text based) were identified through literature searches. From an initial yield of 2,266 studies, 24 were included in the review. Ten studies investigated the effectiveness of telephone-delivered interventions, 11 investigated the effectiveness of video teleconference (VTC) interventions, 2 investigated Internet-delivered text-based interventions, and 2 were reviews of multiple telepsychology modalities. The authors concluded that there was sufficient evidence to support VTC and telephone-delivered interventions for mental health conditions. The evidence for synchronous Internet-delivered text-based interventions was ranked as “unknown.” Telephone-delivered and VTC-delivered psychological interventions provide a mode of treatment delivery that can potentially overcome barriers and increase access to psychological interventions.

Velligan, D. I., & Alphas, L. D. (2014, November 24). Negative symptoms in schizophrenia: An update on identification and treatment. *Psychiatric Times*, 31(11).

<https://www.psychiatrictimes.com/view/negative-symptoms-schizophrenia-update-identification-and-treatment>

Dawn I. Velligan, Ph.D. and Larry D. Alphas, Ph.D. discuss several options for treatment of negative symptoms depending on the etiology.

Velligan, D. I., & Alphas, L. D. (2018, June 7). 5 domains of negative symptoms of schizophrenia. *Psychiatric Times*, 36(5).

http://www.psychiatrictimes.com/schizophrenia/5-domains-negative-symptoms-schizophrenia?rememberme=1&elq_mid=1798&elq_cid=860775

Vontress, C. E. (1980). Problems in counseling older minorities. *Counseling and Values*, 24(2), 118–126.

van der Kolk, B.A., & D'Andrea, W. (2010). *Towards a developmental trauma disorder diagnosis for childhood interpersonal trauma*. In R. Lanius, E. Vermetten, & C. Pain (Eds). *The impact of early life trauma on health and disease: The hidden epidemic*. London: Cambridge University Press.

van der Miesen, A., & de Vries, A. (2019, December). Special issues in treating adolescents with gender dysphoria. *Psychiatric Times*, 36(12), 15–16.

Vanderploeg, R. D., Axelrod, B. N., Sherer, M., Scott, J. & Adams, R.L. (1997) The importance of demographic adjustments on neuropsychological test performance: A response to Reitan and Wolfson (1995), *The Clinical Neuropsychologist*, 11(2), 210–217.

doi:[10.1080/13854049708407054](https://doi.org/10.1080/13854049708407054)

Abstract: Recently, Reitan and Wolfson (1995) questioned the validity of using age and education adjustments in the clinical practice of neuropsychology based on a study of the effects of age and education on the General Neuropsychological Deficit Scale (GNDS) score. We critique their findings and conclusions on both theoretical and methodological grounds. We then present the results of a similar investigation on the effects of age and education on three different neuropsychological summary scores. In contrast to Reitan and Wolfson's findings, in the present study age and education had similar effects on neuropsychological summary scores (GNDS, HII, and AIR) whether or not subjects were brain-damaged. Younger or more educated subjects consistently performed better than did older or less educated subjects. This was true even though correlations between age and education with neuropsychological summary scores were low and often statistically nonsignificant in both brain-damaged and pseudoneurologic samples. In addition, the present study demonstrated that the use of demographically adjusted neuropsychological summary scores results in consistently higher diagnostic classification accuracy than the use of nonadjusted scores.

van Doremalen, N., Morris, D. H., Holbrook, M. G., Gamble, A., Williamson, B. N., Tamin, A., Harcourt, J. L., Thornburg, N. J., Gerber, S. I., Lloyd-Smith, J. O., de Wit, E., & Munster, V. J. (2020, April 16). Aerosol and surface stability of SARS-CoV-2 as compared with SARS-CoV-1. *New England Journal of Medicine*, 382, 1564–1567. DOI: 10.1056/NEJMc2004973

Article published online March 17, 2020. Downloadable PDF available at the link below:

<https://www.nejm.org/doi/pdf/10.1056/NEJMc2004973?articleTools=true>

Keywords: COVID-19, Coronavirus

This study was conducted by the National Institute of Allergy and Infectious Diseases' Laboratory of Virology in the Division of Intramural Research in Hamilton, Montana.

The researchers used a nebulizer to blow coronaviruses into the air. There were of 10 experimental conditions involving two viruses (SARS-CoV-2 and SARS-CoV-1) in five

environmental conditions (aerosols, plastic, stainless steel, copper, and cardboard). SARS-CoV-2 remained viable in aerosols for approximately 3 hours. SARS-CoV-2 was more stable on plastic and stainless steel than on copper and cardboard, and viable virus was detected up to 72 hours after application to these surfaces. On copper, no viable SARS-CoV-2 was measured after 4 hours and no viable SARS-CoV-1 was measured after 8 hours. On cardboard, no viable SARS-CoV-2 was measured after 24 hours and no viable SARS-CoV-1 was measured after 8 hours.

Van Orden, K. A., Witte, T. K., Cukrowicz, K. C., Braithwaite, S. R., Selby, E. A., & Joiner, T. E., Jr. (2010, April). The interpersonal theory of suicide. *Psychological Review*, *117*(2), 575–600.

Vontress, C. E., Woodland, C. E., & Epp, L. (2007). Cultural dysthymia: An unrecognized disorder among African Americans? *Journal of Multicultural Counseling and Development*, *35*(3)130-141.

Wagner, C., & Safran, J. (2010). Donald J. Kiesler: Interpersonal manifesto. In L. G. Castonguay, J. C. Muran, L. Angus, J. A. Hayes, N. Ladany, & T. Anderson (Eds.), *Bringing psychotherapy research to life: Understanding change through the work of leading clinical researchers* (pp. 211–220). Washington, DC: American Psychological Association. <https://doi.org/10.1037/12137-018>
https://www.researchgate.net/publication/275214820_Donald_J_Kiesler_Interpersonal_Manifesto

Wagner, P., & Sawyer, W. (2018, June). *States of incarceration: The global context 2018*. Prison Policy. <https://www.prisonpolicy.org/global/2018.html>

Wakefield A. J., Murch, S. H., & Anthony, A. (1998). **[Retracted]** Ileal-lymphoid-nodular hyperplasia, non-specific colitis, and pervasive developmental disorder in children. *Lancet*, *351*(9103), 637–641.

Keywords: Autism, debunk, vaccines, vaccination, retract

Andrew Wakefield and colleagues published a now-infamous and retracted paper in *The Lancet*. In 2010, the United Kingdom's (UK) General Medical Council removed Wakefield from the United Kingdom medical register for misconduct. The fraudulent work on 12 children promoted a non-existent connection between autism and the measles, mumps, and rubella (MMR) vaccine. Typically, children should get two doses of MMR vaccine, starting with the first dose at 12 to 15 months of age, and the second dose at 4 through 6 years of age. Although Wakefield's expulsion from the UK's General Medical Council propelled him to notoriety, it also had the effect of energizing the anti-vaccine movement (see Omer, 2020). As diseases once vanquished return because of falling rates of immunization, Wakefield continues to be a social media headliner among

the international vaccine-sceptic believers. Many large epidemiological studies have found no difference in risk of developmental delays between children who receive the MMR vaccine and those who don't (e.g., see

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- Paul Watzlawick, Ph.D. (1921–2007) was an Austrian-American psychologist, psychotherapist, communication theorist and philosopher. He was Research Associate and Principal Investigator at the Mental Research Institute in Palo Alto, California, and Clinical Associate Professor, Department of Psychiatry and Behavioral Sciences, Stanford University Medical Center.
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<http://www.psychiatrictimes.com/psychopharmacology/prescribing-substances-abuse-psychiatric-care>
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Weir, K. (2016). The science of naps. *Monitor on Psychology*, 47(7), 48.

<https://www.apa.org/monitor/2016/07-08/naps>

APA staff writer Kirsten Weir provides a summary of several studies that suggest the benefits—and possible drawbacks—of daytime naps.

Weiss, H. (2019, June 17). *Dogs' eyes have changed since humans befriended them: Two specialized muscles give them a range of expression that wolves' eyes lack*. The Atlantic. https://www.theatlantic.com/science/archive/2019/06/domestication-gave-dogs-two-new-eye-muscles/591868/?utm_source=pocket-newtab

Haley Weiss, Science correspondent for *The Atlantic*, provides a summary of research conducted by a team at the University of Portsmouth's Dog Cognition Centre in the United Kingdom. The researchers (i.e., Kaminski et al., 2019) looked at two muscles that work together to widen and open a dog's eyes, causing them to appear bigger, droopier, and objectively cuter. The retractor anguli oculi lateralis (RAOL) muscle and the levator anguli oculi medialis (LAOM) muscle form two short, straight lines, which connect the ring of muscle around a dog's eye to either end of the brow above.

Weller, Philip T. (Translator). (1964). *The Roman ritual*.

<http://www.ewtn.com/library/prayer/roman2.txt>

Wen, T. (2017, June 27). The tricks to make yourself effortlessly charming. *BBC Worklife*.

<https://www.bbc.com/worklife/article/20170627-the-tricks-to-make-yourself-effortlessly-charming>

Keywords: Charm, charisma, body language, affective presence

Citing some of the research that led to Princeton Professor Alexander Todorov's (2017) book, *Face Value*, BBC journalist Tiffanie Wen describes a few evidence-based strategies that can be useful for those who wish to act with more charm. Some of these ideas include putting on a happy face, raising your eyebrows, finding a common ground, watching the other person's body language, and so forth. Wen also draws from the ideas of Olivia Fox Cabane, in whose book *The Charisma Myth*, the so-called "charisma myth" is replaced with the idea that charisma and charm can be broken down into component behavioral expressions that can be learned. Wen summarizes some key points found in the book *The Like Switch*, whose co-author, Jack Schafer, Ph.D. is a psychologist and retired FBI special agent, Schafer (2015) maintains that the three major things we do when we approach somebody that signal we are not a threat are: an eyebrow flash - a quick up and down movement of the eyebrow that lasts about a sixth of a second - a slight head tilt, and a smile.

Westreich, L. (2019, February 21). Coaching families to address addiction. *Psychiatric Times*, 36(2). <https://www.psychiatristimes.com/addiction/coaching-families-address-addiction>

Weuve, J., Hebert, L., Scherr, P., & Evans, D. (2015). Prevalence of Alzheimer disease in U.S. states. *Epidemiology*, *26*, e4–e6.

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Wisniewski, A. B. et al. (2000). Complete androgen insensitivity syndrome: Long-term medical, surgical, and psychosexual outcome. *Journal of Clinical Endocrinology and Metabolism*, *85*(8), 2664–2669.

Wolf, M. (2018). *Fire and fury. Inside the Trump White House*. New York, NY: Henry Holt & Company.

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World Health Organization. (1965). *International classification of diseases and related health problems* (8th rev.). Geneva, Switzerland: Author.

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<http://apps.who.int/classifications/icd10/browse/2010/en#V>

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<http://apps.who.int/classifications/icd11/browse/f/en>

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<https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf>

Keywords: COVID-10, Coronavirus

See also report of the Chinese Center for Disease Control and Prevention (2020).

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<https://www.who.int/standards/classifications/classification-of-diseases>

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This is the seventh version of the Standards of Care (SOC). The original SOC were published in 1979. Previous revisions were in 1980, 1981, 1990, 1998, and 2001.

World Health Organization. (2017). *Genetic components of sex and gender*. World Health Organization. <http://www.who.int/genomics/gender/en/>

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As of announcement by the American Psychological Association on January 18, 2022, the *Journal of Abnormal Psychology* is now the *Journal of Psychopathology and Clinical Science*.

Xu, J. Q., Murphy, S. L., Kochanek, K. D., Arias, E. (2020, January). *Mortality in the United States, 2018*. NCHS Data Brief, no 355. Hyattsville, MD: National Center for Health Statistics.

Jiaquan Xu, M.D., Sherry L. Murphy, B.S., Kenneth D. Kochanek, M.A., and Elizabeth Arias, Ph.D. are the authors of NCHS Data Brief No. 355, January 2020, which contains Data from the National Vital Statistics System. Here is a summary of the findings: Life expectancy for the U.S. population in 2018 was 78.7 years, an increase of 0.1 year from 2017. The age-adjusted death rate decreased by 1.1% from 731.9 deaths per 100,000 standard population in 2017 to 723.6 in 2018. The 10 leading causes of death in 2018 remained the same as in 2017. From 2017 to 2018, age-adjusted death rates decreased for 6 of 10 leading causes of death and increased for 2. Age-specific death rates decreased from 2017 to 2018 for age groups 15–24, 25–34, 45–54, 65–74, 75–84, and 85 and over. The infant mortality rate decreased 2.3% from 579.3 infant deaths per 100,000 live births in 2017 to 566.2 in 2018. The 10 leading causes of infant death in 2018 remained the same as in 2017.

Yarhouse, M. A., Butman, R. E., & McRay, B. W. (2012). *Modern psychopathologies: A comprehensive Christian appraisal*. Downers Grove, IL: InterVarsity Press.

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Ziegler, J. S. (August, 1993). *The actuarial prediction of violence in a psychiatric population*. Paper presented at the annual meeting of the American Psychological Association.

Zimmer, K. (2021, January 20). COVID-19's effects on the brain. *The Scientist*.
<https://www.the-scientist.com/news-opinion/covid-19s-effects-on-the-brain-68369>

Keywords: COVID-19, Coronavirus

Katarina Zimmer's article describes how autopsy studies have yet to find clear evidence of destructive viral invasion into patients' brains, pushing researchers to consider alternative explanations of how SARS-CoV-2 causes neurological symptoms.

Zimmerman, M. (2019, December). Borderpolar: Patients with borderline personality disorder and bipolar disorder. *Psychiatric Times*, 36(12), 17–18.

Zinermon v. Burch, 494 US 113, 110, 975 (1990).

The U.S. Supreme Court addressed the issue of informed consent when it held that a psychiatric patient's constitutional rights were violated when he was allowed to sign into the hospital voluntarily—yet he was incompetent to give informed consent to do so.

Zisook, S., & Shear, K. (2009, June). Grief and bereavement: What psychiatrists need to know, *World Psychiatry*, 8(2), 67–74.

The authors define and differentiate the terms bereavement, grief, and mourning, as well as among the terms uncomplicated grief, complicated grief, and grief-related major depression.

Zmigrod, L., Rentfrow, P. J., & Robbins, T. W. (2019). The partisan mind: Is extreme political partisanship related to cognitive inflexibility? *Journal of Experimental Psychology: General*. Advance online publication. <https://doi.org/10.1037/xge0000661>

The rise of partisan animosity, ideological polarization, and political dogmatism has reignited important questions about the relationship between psychological rigidity and political partisanship. Two competing hypotheses have been proposed: One hypothesis argues that mental rigidity is related to a conservative political orientation, whereas the other hypothesis suggests that mental rigidity reflects partisan extremity across the political spectrum. In a sample of 743 U.S. citizens, partisan extremity was related to lower levels of cognitive flexibility, regardless of political orientation, across three independent assessments of cognitive flexibility. Zmigrod et al. found that participants who were extremely attached to either the Democratic Party or the Republican Party displayed greater mental rigidity on the cognitive tests than those who were moderately or weakly attached to a political party. The research team also found that self-described Independents displayed greater cognitive flexibility than Democrats and Republicans

who were extremely attached to their respective party. The authors suggest that the rigidity with which individuals process and respond to nonpolitical information may be related to the extremity of their partisan identities.

Zorrilla I., Aguado, J., Haro, J. M., Barbeito, S., López Zurbano, S., Ortiz, A., López, P., & Gonzalez-Pinto, A. (2015, February). Cannabis and bipolar disorder: Does quitting cannabis use during manic/mixed episode improve clinical/functional outcomes? *Acta Psychiatrica Scandinavica*, *131*(2), 100–110. doi: 10.1111/acps.12366. Epub 2014 Nov 28.

The purposes of this study was to examine whether bipolar disorder patients who stop cannabis use during a manic/mixed episode have better clinical and functional outcomes than continued use or never use. The three cannabis use groups were (1) current use (between 12-week and 24-month visits), (2) no current but previous use (during first 12 weeks), and (3) never use. Of 1,922 patients analyzed, 6.9% were current users, 4.6% previous users, and 88.5% never users. Previous users had highest rates of remission (68.1%) and recovery (38.7%), and lowest rates of recurrence (42.1%) and relapse (29.8%). Previous users had similar outcomes to never users, whereas current users had lower recovery, lower remission, higher recurrence, greater work impairment, and were more likely not to be living with partner than never users. The authors concluded that bipolar patients who stop using cannabis during manic/mixed episode have similar clinical and functional outcomes to never users, while continued use is associated with higher risk of recurrence and poorer functioning.

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