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California Society for Clinical Social Work



Volume XLV Number 1 September, 2013

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Thank you **Conrad Fuentes, LCSW** for being our guest editor for September.

If you are interested in being a guest editor, please contact



Welcome to California Society for Clinical Social Work's NEW Website

By Sara Gunion, Website Developer and Admin Asst clinicalsocialworksociety.org

You spoke and we listened! Our new and user-friendly website is up and running. We can now accept new member applications, ad submissions, JAF donations and much more via the website. Can't remember the date of the next district meeting and don't feel like searching your email? Just check the events and meetings calendar. No longer will you have to call CSCSW to place an ad; you can go to the advertising rates and deadlines page to see the cost of placing an ad and a link to submit your ad online. Want to make a donation to JAF? Not a problem! You can do that from the website. Even better, the website keeps track of the total donations made.

The member directory on the old site was difficult to keep current. With the new member directory you can search by name or click "advanced search" to search by city, therapy practices, website and more. A helpful hint - to ensure your website displays properly in the member directory search, make sure that you have your website listed as viewable to "Anybody" in your profile. You can check and change that setting within your profile. Here are the instructions on how to find that setting. Below your name in the sign in box click "View Profile," then click "Edit Profile," from there click "Privacy." Now you will be able to select what people can and cannot see.

If you selected to purchase Legal Services with your renewal this year, included on the website is our "legal forum." This is a place on the website where you can go if you have a legal question and want to get other members opinion's. You "post" your question on the website, and members will provide you with their experiences. This forum will be facilitated by Myles Montgomery, JD, LCSW, our Legal Counsel, who will review the posts and provide his own feedback. To utilize this "forum," go to the "Legal Services" link, click on "1 hour consultation," click "legal forum" and finally click "create topic." You can then input your question. To see responses to your question, subscribe to the forum and you will be notified of posts to your question or you can check back occasionally to see what responses have been generated.

Please check out the new site, and let us know what you think. clinicalsocialworksociety.org



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DISTRICT MEETINGS:

FRESNO DISTRICT

Coordinators: Gabriele Case and Anne Petrovich

Coordinator Phone: 559-237-9631

Coordinator E-mail: gh.caselcsw@sbcglobal.net
Date: Saturday, August 24, 2013
Time: 9:15 a.m. to 12 p.m.
Presenter: Patricia Carver, LMFT

Topic: Play Therapy: A Mind Building Experience Credits: 1.5 (1 CE credit per hour of instruction)

NEW LOCATION: Fresno Pacific University

Steinert Campus Center, Pioneer/Johanson

Conference Room 103.

Directions: Fresno Pacific University is located at 1717 S. Chestnut Street.

Travelling south on Chestnut, cross Butler, take a left on Hamilton Avenue and left into Hamilton parking lot. No permit is needed. From the parking lot, Steinert Campus Center to the west, just

north of the Amphitheater.

For many years play therapists have used the therapeutic powers of play to help young clients resolve emotional and behavioral difficulties. With the recent surge of information from trauma specialists, attachment theorists, and neuroscience, we now have a deeper understanding of why therapeutic play is effective and how, in fact, playful interactions are mind building. Understanding play therapy becomes an essential tool for all therapists, as increasingly stressful environments shape the brains of children and their emotional and behavioral responses.

Pat Carver, LMFT, has been an internationally registered play therapist and trainer for the past 20 years. Before maintaining a private practice specializing in child therapy, she taught child development courses at Fresno City College and California State University, Fresno. She has presented numerous workshops and trainings on all aspects of child development and play therapy.

GREATER LOS ANGELES DISTRICT

Coordinator: Lynette Sim, MSW, BCD

Coordinator Phone: (310) 394-7484
Coordinator Email: simlcsw@verizon.net
Date: Sat. September 21, 2013

Time: 10:30 to 1:00

Topic: Borderline Personality Disorder-Current Thinking and Practice

including Dialectical Behavioral Therapy

Presenter: Wendy Douglas, LCSW, MSPH Location: 3267 Corinth Ave., L.A. 90066

Credit: 1.5 (1 credit per hour of instruction)

RSVP: Judy Messinger 310.478.0560 or messingerlcsw@yahoo.com

Participants will receive an overview of treatment strategies for working with difficult clients in individual therapy. This includes specific interventions for those diagnosed with Borderline Personality Disorder (BPD), severe depression and those struggling with self-harming behaviors, chronic interpersonal

(Continued Next Page)

DISTRICT MEETINGS: (Cont'd)

GREATER LOS ANGELES DISTRICT: (Cont'd)

difficulties and emotional dysregulation. A brief history of Dialectical Behavioral Therapy (DBT) and an overview of how it is used will be presented. This includes the four modules used in DBT, mindfulness, interpersonal effectiveness, emotion regulation and distress tolerance. Interventions and techniques from each module will be briefly covered for therapists and their clients who do not have access to the full DBT program.

MID-PENINSULA DISTRICT:

Coordinator: Virginia Frederick LCSW

Coordinator Phone: 650-324-8988

Date: Friday, October 18, 2013

Time: 12:20-2:00PM
Presenter: Gordon Wong MD

Topic: Sleep Issues As Seen Through the Eyes of a Psychopharmacologist Location: Stanford Department of Psychiatry, 401 Quarry Road, Room #1206

RSVP: Virginia Frederick, LCSW

Credits: 1.5 (1 credit for each hour of instruction)

Dr Gordon Wong will present a comprehensive look at sleep issues. As a psychopharmacologist, he looks at sleep problems as the first step in treatment. This program will cover normal sleep physiology as well as common abnormal sleep disorders illustrated through clinical examples. Dr. Wong will discuss identifying sleep issues diagnostically, the various interventions with medications, their advantages and disadvantages. Please bring clinical questions for discussion. Sleep is very basic to our well being but some treatments can be addictive over the long haul. Dr. Wong is a psychopharmacologist in Menlo Park and has given dynamic presentations to our group in the past. Join us in this first program in our new series.

Program this year – November 15 – Stephanie Brown PhD – "SPEEEEED! Wired up and Hooked on Fast" (part of a new book coming out in January, January 17 – TBA, February 21 – Sharon Covington LCSW – "Reproductive Loss, Suffering and Resiliency" (a presentation she made at NIH), March 21 – Clara Kwun LCSW – "Clinical Sensibilities as Seen by A Social Work Analyst," April 18 – TBA, May 16 – Greg Bellow PhD and Elise Miller PhD – "Clinician's Challenges of Writing for Publication"

NAPA/SONOMA DISTRICT:

What: Potluck

When: September 20, 2013

Where: 3809 Clear Ridge, Santa Rosa, CA

Time: 6:00 PM

Please join us for socializing, networking and learning about California Society for Clinical Social Work. There will also be a short presentation by Mary Ann Swengon, ACSW about the MSW program offered at Sonoma State University.

Please RSVP to Kathy Frishberg – 707-321-3147 to get directions and discuss contributions to the Pot Luck.

(Continued Next Page)

SACRAMENTO/DAVIS DISTRICT:

Coordinator: Nathan Stuckey

Co-coordinator(s): Leilani Buddenhagen, Nancy White

Coordinator Phone: (951) 285-6322 Date: September 21, 2013

Time: 9:30 Networking, 10:00 – 12:00 Presentation

Topic: **Motivational Interviewing**Presenter: Karen Brockopp, LCSW

Location: Friends Meeting House, between H & J St, 890 57th Street, Sacramento, CA

Motivational Interviewing is a communication style which focuses on exploring and resolving ambivalence and centers on motivational processes within the individual that facilitate change. The method is collaborative and person-centered, supporting change in a manner congruent with the person's own values and concerns.

Karen Brockopp, LCSW is a Member of the Motivational Interviewing Network of Trainer (MINT) and have been providing this training in a variety of venues, mostly mental health providers, for 12 years.

She is currently the Associate Director for Program Services at Transitional Living & Community Support, Sacramento, CA.

CE Units free to members. Credits for non-members are \$10.00 per unit. Non-members are welcome and may attend at no charge (no CEU certificate). MSW students are encouraged to attend. Course meets the qualifications for 2 hours of continuing education credit for MFTs, LPCCs, and/or LCSWs as required by the California Board of Behavioral Sciences.

SAN DIEGO DISTRICT:

Coordinator: Ros Goldstein
Coordinator Number: 619-692-4038 Ext 3
Coordinator Email: goldsiegel@gmail.com

Date: Thursday, September 12, 2013

Time: 5:30 – 7:30 pm

Topic: Mentalization-Based Therapy

Presenter: Roseann Larson, LCSW

Location: Jewish Family Services of San Diego, 8804 Balboa Ave, San Diego, CA 92123

RSVP: Ros Goldstein – 619-692-4038 Ext 3

This presentation will provide an overview of Mentalization-Based Therapy (MBT). MBT is an evidence-based treatment developed by Peter Fonagy PhD and Anthony Bateman MA, FRCPsych, for people suffering from Borderline Personality Disorder. The term "mentalization" refers to the ability to think and feel at the same time, about what takes place in oneself, in others, and between people. The capacity for mentalizing is often compromised in certain interpersonal contexts for people with borderline personality traits.

CE Units free to members. Credits for non-members are \$10.00 per unit. Non-members are welcome and may attend at no charge (no CEU certificate). MSW students are encouraged to attend. Our meetings begin with a half hour for people to mingle, network, and build community. Bring your flyers and business cards. Course meets the qualifications for 1.5 hours of continuing education credit for MFTs, LPCCs, and/or LCSWs as required by the California Board of Behavioral Sciences

Future Programs:

October 3: "Dialectical Behavior Therapy: Philosophy, Skills & Strategies"



Groupthink and the Military By Michael Metal, M.S.W.

It is understood that those in the military are required to adapt to a culture fraught with hardship and danger and that successful adaptation is required for a successful term of service (Rubin, 2011). Adaptation to military culture allows the service member to more successfully endure the frequent deployments away from loved ones or home. The experiences and acculturation to military culture often changes a service member's view of society as well as their approach to many aspects of life. These worldviews can be difficult to understand for the civilian practitioner when treating an active duty service member, whether male or female (Coll, Weiss & Metal 2011). These service members will invariably return to civilian – or nonmilitary life. In California alone, a state with over 38 million inhabitants (UC Census Bureau n.d.) this constitutes over 1.6 million veterans (Va.gov n.d.). These numbers are significant because they inform clinical social workers that they will come into contact with clients who are, are related to, or work with veterans.

In applying Irving Janis' theory of groupthink (Esser, 1998) the author will identify some of the differences that may be witnessed in working with veteran clients. The groupthink theory posits that individuals in professional groups will begin to take on the ideals or mannerisms of that group as well as their world view. This theory can help clinicians and others to more completely understand why the veteran views things in such a manner. In stating this, the author does not mean to infer that these views will be negative nor problematic, simply outside of cultural norms.

Groupthink Development in the Military

Groupthink is a theory from social psychology that supports the idea that people within an organization will develop a group paradigm in which a view supported by the majority becomes a uniform belief or outlook (Janis, 1972). Those within the group do not necessarily internalize these views or absolutely believe in them but will remain passively compliant. Military culture is an example of organizational groupthink in the ways that traditions are promulgated from the time a service member enters boot camp. A service member

in boot camp will be taught of time honored heroes and tales of sacrifice and be introduced to the timeless honor held for those that have sacrificed (Rubin,2013). These values are taught and honors demonstrated until they become the cultural norm.

These values are continued throughout the service member's time in the military, becoming a world view that is largely internalized, becoming key beliefs or values and traditions in a veteran's life (Coll, Weiss & Metal, 2012). These world views, the paradigm through which an individual views the world and behaviors, can be explained through social development theory. The cultural norms in the military serve to reinforce behaviors or beliefs through the repetition amongst their peers (Kearsely, 1994). Many of these beliefs are valued by society as a whole. Honor, integrity and hard work are values that have traditionally made the military the place to correct the actions of maladaptive youth. However, other parts of military culture are seen as maladaptive when a person is removed from the military environment. Noteworthy examples include a very direct approach in casual conversation, and heavy drinking for a vast number of occasions that involve different emotions (Soeters, Winslow, D. J., & Weibull, 2006). Though these actions or behaviors are not looked upon as healthy in nonmilitary environments, soldiers are frequently taught these behaviors. Groupthink supports the idea that organizational behaviors or values can become internalized and a permanent part of an individual's persona (Fodor & Smith, 1982). This can be likened to operant conditioning and has been witnessed in law enforcement when looking at maladaptive (or socially unacceptable) behaviors amongst members of another cultural group that routinely experiences situations or experiences outside of mainstream cultural norms (Levine, 1971).

Veteran world views are noted as having an impact on every aspect of a veteran" life (Coll, Weiss & Metal, 2012). This commonly proves to be problematic for veterans who may offend someone or be offended by things considered benign in non-military environments.

(Continued on Page 11)

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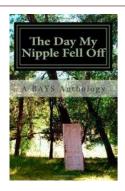
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The Day My Nipple Fell Off: And Other Stories of Survival, Solidarity and Sass Edited by Erin Hyman for the Bay Area Young Survivors (BAYS) May 2013 126 pages

Reviewed by Jean Rosenfeld, LCSW

The title is shocking – and so is breast cancer, particularly if you are a young woman.

This is a book of poignant, funny, tragic, emotional, hopeful, gutsy essays, written by members of the Bay Area Young Survivors (www.baysnet.org), a support group for young women living with cancer in the San Francisco Bay Area. The topics are wide ranging and not the usual stuff of self-help breast cancer books. The title story, by Laurie Hessen Pomeranz, is about her failed attempt at reconstructive surgery. And another of her essays in this book, My Cancer and My Son was published in the August 2011 issue of this newsletter. The introduction describes the varied lives of these gifted writers:

"We are yoga teachers and financial planners, bikers and baristas, sex workers and nurse practitioners, lesbians and single moms, athletes and activists, students and teachers, doctors and patients."

This book is an always available support group. The wide range of topics and very personal experiences provide validation, warnings of the road ahead, hard won wisdom, and some dark humor. The 28 chapters are divided into four sections: Medical Maze, Body Blows, Navigating Relationships, and Grief and Gratitude. Cancer patients and survivors (of any age), as well as their family and friends can benefit from seeing their own lives reflected in this book, and their perceptions and feelings shared by others. Reading these stories can encourage others to tell their own stories.

Jean Rosenfeld, LCSW is a psychotherapist in Carmichael, treating individual adults and couples. She is editor of this newsletter. She can be reached at jrosenfeld@clinicalsocialworksociety.org

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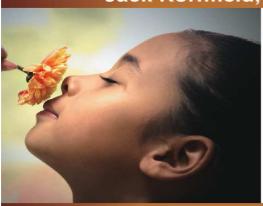
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A Social Security Disability Psychological Claims Handbook: A simple guide to understanding your SSD claim for psychological impairments and unraveling the maze of decision making by Patricia A. Farrell, Ph.D.

January 9, 2013 131 pages

Reviewed by Jo Miller, LCSW

This is a seemingly simple, yet immensely useful Psychological SSI/SSDI claims guide for both the applicant (claimant) and the clinician. It dispels some common myths and fears our clients may have about applying for Social Security Disability.

As clinicians, it is useful to be reminded of the stigma, fears and myths surrounding a mental health diagnosis — and to support/advocate for our clients who are considering applying for disability benefits. This handbook also provides the clinician with the basic information and resources to write a medical disability report.

The second chapter is most pertinent to clinicians as it defines medical evidence requirements, controlling weight and activities of daily living, as well as wording of reports. I would have appreciated more examples of wording/phrasing – however, the skilled clinician will understand what is needed to write a meaningful report.

This "simple guide" will serve the clinician looking for guidance in writing a medical disability report and will prove useful for clients and their families in understanding what is needed/considered in applying for a mental health disability claim.

Jo Miller, LCSW is an Autism Program Manager with Anthem Blue Cross, after retiring from private practice for 15 years. She specialized in working with children with developmental disabilities and/or co-morbid medical disorders and with adults with chronic mental illness.

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SATURDAY, SEPTEMBER 21, 2013 Time: 1:00 pm - 4:00 pm Featuring Dr. Judith Mitrani

THE 25TH ANNUAL MELANIE KLEIN LECTURE
SATURDAY, OCTOBER 12, 2013 Time: 8:30 am - 4:00 pm
Featuring Dr. Irma Irma Brenman Pick.
Training and Supervising Analyst, British Psychoanalytic Societ

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SATURDAY, NOVEMBER 16, 2013 Time: 8:30 am - 4:00 pm
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We Would Love for You to Write for Us:

We welcome your contributions to the newsletter:

- Articles on clinical issues and business aspects of your practice
- Articles on your personal experience regarding some aspect of your work
- Articles from students and new social workers
- Reviews of books, movies, websites and other media that are relevant to our members
- Tell us about an interesting member
- Send your ideas and suggestions for articles and writers

If you are interested in writing for the Clinical Update: Please contact our Editor, Jean Rosenfeld at 916-487-8276 or Email: jrosenfeld@clinicalsocialworksociety.org



The Clinical Update

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California Society for Clinical Social Work.

Groupthink and the Military By Michael Metal, M.S.W.

Continued from Page 5

Popular values of the military that are not commonplace in modern society can be seen in behaviors such as the handshake. The author was taught in boot camp that a handshake is to be firm and maintained with positive eye contact. This is frequently seen as aggressive behavior in nonmilitary settings and can become an obstacle in veteran readjustment. A veteran's views on national or international affairs are frequently seen as being impacted by groupthink. Veterans have been largely noted as having unfaltering loyalties to the United States or her allies regardless of the incident (Tetlock, 1979), in keeping with traditional veteran world views on loyalty which prohibit dissent or dishonor.

These readjustment issues have resulted in both legal and social issues that have seen veterans being arrested or becoming/remaining unemployed. As the military is downsizing, legal entanglements are quickly growing and creating a bigger issue that is compounded by an erratic economy and a mental health system that is illequipped to adequately treat readjustment issues (Russell, 2009). In recognizing this, some counties in California have established veteran courts in an effort to more compassionately resolve issues surrounding readjustment without interring a maladjusted veteran for issues easily treated with therapy or a life coach. Though these issues are noted to have been faced in the past (Borus, 1973), now the legal system is recognizing it and acting to resolve it in a much more positive manner.

Concerns that can be seen as being based in groupthink lead to veteran unemployment or underemployment. Because veterans are taught to simply do the job instead of talking about it they are experiencing difficulties in translating their duties to potential employers (Herr, 2003). Employers outside of the military arena are commonly unfamiliar with terms such as Platoon Sergeant or LPO as descriptive terms of managerial or supervisory roles in a professional environment. This can be seen as limiting the veteran from obtaining a job suiting his or her experience. Performing in a role that an individual is overqualified for is anticipated to be viewed as insulting or off-putting (Herr, 2003). In recognition of these issues and the impact it is having on veterans, the California Educational Development Department (EDD) is training

personnel to interpret veteran job experience correctly as well as offering a series of workshops on concerns such as interviewing, resume development and job search strategies (edd.ca.gov, n.d.).

What this means to Social Workers?

PTSD and alcohol/substance abuse are frequent topics in the media and mainstream society. Many social workers interviewed revealed concerns about how to more efficaciously assuage the anxieties a veteran may have concerning these issues. More standard interventions such as cognitive behavioral therapy and solution focused therapy are not treating all of the issues surfacing in this population. In light of these concerns and following a review of the interventions available, the author recommends multi-systemic therapy to more completely treat the veteran (or veteran dependent) being seen. Social workers are encouraged to have appropriate referrals ready for their veteran clients. With the social worker serving as an intermediary many of the anxieties or fears facing the veteran can be mitigated. In keeping with veteran world views, by having a large number of answers the social worker can more quickly develop a therapeutic rapport with the veteran who is accustomed to being told how someone can't help them. This does not mean that the social worker serves as a directory but instead as a life coach guiding the veteran through the perils of readjustment.

Conclusion

California has the largest veterans population in the country (US Department of Veteran Affairs, n.d.) and is large enough to ensure that almost every social worker in the state will encounter a veteran, their dependents or coworkers. Issues currently facing veterans often stem from difficulties surrounding readjustment and firmly seated world views. Many of these world views create obstacles to positive interactions with the nonmilitary society. Facing financial and social concerns, the social worker is encouraged to develop resources with which to link veterans. Connecting veterans with effective resources not only helps clients deal with concrete problems, it also helps to more quickly develop a therapeutic alliance that aids in addressing maladaptive behaviors learned from internalized military groupthink.

Michael Metal, MSW served in the US Navy from 2002-2007. While completing his course work for his MSW he volunteered with a number of veteran specific charities with a goal of better understanding the problems afflicting this population. He currently works for the V.A. in greater Los Angeles. He can be reached at Michael.metal1@yahoo.com and (757) 777-6221.

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OUR COMBAT VETERANS RETURNING HOME THE SOCIAL AND CLINICAL IMPACT



KEYNOTE SPEAKER: Susan Pangelinan, Lt. Col., CA National Guard Combat Veteran and Healthcare Administrator

Sacramento, California – October 19, 2013
University of Phoenix,

2860 Gateway Oaks Drive, Sacramento, CA 95833



OUR COMBAT VETERANS RETURNING HOME THE SOCIAL AND CLINICAL IMPACT

(6 CE Hours)
SACRAMENTO, CALIFORNIA

October 19, 2013

8:30 Registration - Workshop begins at 9:00 a.m. to 4:30 p.m.

University of Phoenix

2860 Gateway Oaks Drive, Sacramento, CA 95833

\$30 Students

\$70 Members

\$85 Non-Members

This is a comprehensive multi-disciplinary presentation on the social, emotional, and physiological issues our combat vets face while transitioning back from deployment. The following topics will be addressed:

- Military Culture: Lasting Impressions on the Veteran in Civilian Life
- Combat Related PTSD and Major Depression
- Military Sexual Trauma
- Combat Related Traumatic Brain Injury (TBI)
- Poly-substance Abuse
- Social and Family Impact

Discussions will include transitioning home from deployment and the impact of combat on a Veterans development growth, family life and occupation. This course will cover treatment modalities for working with Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injuries (TBI). We will hear from a Veteran from the Wounded Warrior Program giving his first-hand account of how his life has changed. We will end the program with a

Panel Discussion followed by Q&A

Continental breakfast and boxed lunch will be provided.

Please return form			
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Phone: (916) 560-9238	CVC:	Exp Date /	
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The DSM 5: Contexts and Clinical Applications

Presented by: Anne Petrovich, PhD, LCSW

Fresno, California - September 14, 2013

Fresno State University, Alice Peters Auditorium University Business Center, 5245 N. Backer Ave, Fresno, CA, 93740



The DSM 5: Contexts and Clinical Applications

Presented by Anne Petrovich, PhD, LCSW

(6 CE Hours)
FRESNO CALIFORNIA

PLEASE NOTE NEW DATE

September 7, 2013

8:30 Registration – Workshop begins at 9:00 a.m. to 4:30 p.m.

Fresno State University, Alice Peters Auditorium

5245 N. Backer Ave, Fresno, CA 93740

\$50 Pre-licensed Members/Students

\$100 Members

\$120 Non-Members

The DSM-5 represents a fundamental shift in how disorders are conceptualized and diagnosed. This workshop provides an overview of the new structure of the DSM, what has changed, and what hasn't, the relationship between DSM 5 diagnosis and treatment, current controversies surrounding the DSM 5, using the DSM 5 in multidisciplinary settings and communicating effectively with psychiatrists and other medical and mental health personnel, through discussion and clinical vignettes.

Continental breakfast and boxed lunch will be provided.

At the conclusion of this workshop, participants will be able to do the following:

- ♣ Describe three philosophies and historical forces that have shaped the DSM, culminating in DSM 5
- Describe 3 major differences between DSM IV TR and the DSM 5
- ♣ Describe 5 major strengths and weaknesses in the DSM 5 and their societal contexts
- 🕌 Apply both the DSM 5 and the ICD to specific clinical vignettes in a strength-based, culturally competent manner
- Describe 4 necessary skills for effective collaboration with medical and interdisciplinary personnel in the diagnosis and treatment process.



Anne Petrovich, PhD, LCSW, is both a licensed psychologist and a licensed clinical social worker. She is Emeritus Professor in the Social Work Education Department, CSU Fresno, where she has taught clinical courses for over 12 years and where, in 2011, she was the recipient of the Provost's award for excellence in teaching. She has worked in numerous psychiatric, school, hospital and community settings since 1965, and maintains an active private practice in Fresno. She is also the co-author of "Strengthening the DSM" Springer Publishing Company. http://www.amazon.com/Strengthening-DSM-Incorporating-Resilience-Competence/dp/082611881X/ref=sr 1 1?ie=UTF8&qid=1373484174&sr=8-1&keywords=strengthening+the+dsm

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cesco@clinicalsocialworksociety.org	CSCSW Member? Yes/I	No Interested in Becoming a Member? Yes/No (Circle One)	

Classifieds

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For Rent: Sacramento Midtown offices in Victorian home at 820 18 Street; \$525.00 month; 12.8 X 11.8 feet, nook and walk in closet; free one hour parking by the office. One office is available now. The other office is available in September. If you are interested, please call Wes Perlman Ph.D. at 916-454-4898

Office space available. Downtown L.A. adjacent starting on 8/1/2013. Rent \$175.00 per month for each day of week rented. Billing assistance available if needed. Contact Joshua at: 818-487-2593, or 818-404-0054. Please call 818-487-2593 or 818-404-0054 for credit card information.

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Looking for someone to share my space in my nicely-appointed, window office in Beverly Hills. I am in a contemporary low-rise building with close, reasonably priced parking for you and your client. Available hours can be flexible. Please contact Marsha at 310.993.9152 or email morman9999@aol.com.

