# THE \_\_\_\_\_ Montana Psychologist

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# President's Perspective Mary Kay Bogumill, Ph.D., MPA President

At the end of 2020, I saw a lot of 'year in review' articles and I was strongly drawn to their content. The articles chronicled a year, by anyone's definition, that was extraordinary. It was marked manifestly by the COVID 19 virus. Within a few months after the start of the year businesses and schools where closed or conducted virtually, many sporting competitions were cancelled, all entertainment ceased or was performed for virtual audiences. Jobs were lost. Livelihoods were lost. Lives were threatened and lost. Many lives. Social contact was drawn down to a speck. We were stopped in our tracks and many were paralyzed with fear. However, little by little the situation became clearer, and we learned how to stay safe and how to keep others safe. This helped.

Our work as psychologists became at the same time harder and more urgent. It was made more difficult by the pervasive collective anxiety and trauma our clients were experiencing and by the new mode in which we "saw" our clients, telehealth. Again, little by little the situation became clearer as we ourselves grew to understand what was happening, and what was being required of our society and how to effectively apply our work through a computer screen. We rose to the need and I am very proud of each psychologist and our discipline for doing so. We were able to keep our doors open to help our clients.

Thankfully, we got some essential support from APA and each other. APA rapidly clarified the parameters for doing distant/virtual work so that we and our clients were safe. They helped us with matters of confidentiality, billing, licensing, etc. This limited the gap in services and made possible

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seeing people across the country, through the airwaves with privacy and from wherever we and they were in lockdown.

While so much of our lives were disrupted, MPA has continued to work for you. For example, on the MPA listserv we shared with each other critical information the moment it was available from APA, payers and other sources. The collegial support was so important, and it was a comforting source of camaraderie and information. Also, the MPA board met virtually to attend to matters important to all of us. Our legislative committee accomplished amazing things through intense effort and a great deal of time and strain (see report below). We also met, virtually, with our State representatives in Washington, DC, to advocate for support of psychological services and psychologists in Montana.

I would ask each of you to reflect on what you gain by the voluntary efforts of MPA. Our work touches you, your clients, and your business in very real ways. The practice of psychology by psychologists in Montana would be so much harder and much more poorly represented to the "powers that be" without the work of MPA. We have few operating costs that we work to contain. Our membership dues pay for our ability to keep the doors open and keep the work up. Without them and profit we may see from CEs, we will not remain solvent, and the work will not get done. Psychology in Montana will have lost an important voice. Please consider renewing your membership or joining the Association. It is vital. You are vital. We want to continue to do this works for psychology in Montana, to keep the doors of MPA open and to have yet another successful year in review to reflect on.

#### Committee Vacancies

Want to serve, be involved, gain experience?

Volunteer to serve on a committee or as a committee chair..

Current committee's may be viewed at:

https://www.montanapsychologicalassociation.org/About-us

MPA currently has chair vacancies for the education committee and the Federal Advocacy Coordinator

If you're interested ,reach out to a board member or MPA's Executive Director!

### **Legislative Report**

Sarah Baxter, Ph.D. & Michele McKinnie, PsyD; MPA Legislative Chairs

MPA is at a crossroads – the pandemic and its restrictions have taken a financial toll on our association and we need your membership and participation more than ever this year. MPA history in the past 10-15 years or so demonstrates that we often manage to rise to the challenges despite limited financial resources and this legislative year was no exception. You will see below a list of all the bills your MPA Legislative Committee, Executive Committee, and a few key MPA member volunteers helped us work on during the dizzying pace of the 2021 Legislative Session. Each Bill you see below, regardless of whether it passed or not, represents hours of time spent on emails, phone calls, and written and verbal (virtual) testimony. A small but mighty (and mighty fun, btw) group of individuals tackled this job on behalf of ALL MONTANA PSYCHOLOGISTS, regardless of your membership status in MPA.

If you find yourself, or a colleague, asking the question "what does MPA membership do for me anyway?", please consider what we did for you and our colleagues across the state during what was arguably one of the more challenging sessions we have faced in a while. Writing this, we anticipate that guild issues for psychologists will remain on the forefront of future sessions. This is the direction the healthcare world is heading. MPA is the only organized voice for psychologists in MT. Without MPA (and yes, the threat is real dear colleagues - we need your membership dollars to survive right now), the scope of practice for our profession will be decided by non-psychologists. The kinds of mental health services available to Montanans, including whether they will be covered by health insurance companies, will be decided by nonpsychologists. Our licensing laws will be decided by non-psychologists. If you review the list below, It should be noted that SB 218 (Laws relating to each of these issues mentioned are represented.

In addition to the bills worked on by your MPA Legislative action team, some members also addressed bills that were important to them for both personal and professional reasons. We were grateful to have the MPA listserve to allow our members to reach out and network to create their own small groups that addressed bills as independent (not representing MPA) psychologists in MT. The listserve is a valuable resource that will also be rendered unavailable if MPA goes, so do the resources (listserve, newsletter, referral network).

Here is our list, and some interesting statistics about this legislative session in comparison with recent sessions – You will find a complete list of bills MPA is watching in the Members Only section of our website https:// mpa14.wildapricot.org/

#### Bills MPA Worked On:

- o HB 43 Support Expand practice of telemedicine (passed)
- o HB 208 Modify Establishing requirements related to mental health services for birth mothers (passed, successful in modifying)
- o **HB 645** Support Create psychiatric opportunity zones (failed)
- o SB 39 Oppose Generally revise laws related to sexual offender evaluations and treatment (passed, successful in modifying)
- o SB 90 Support Revise psychology licensing laws (passed)
- o SB 217 Support Revise laws relating to psychiatric collaborative care (passed)
- o SB 236 Oppose Provide transparency in health care pricing (failed)

psychiatric collaborative care) is unique in the nation

### Legislative Report (continued)

Sarah Baxter, Ph.D. & Michele McKinnie, PsyD; MPA Legislative Chairs

and, while other states are attempting to pass similar laws, Montana was the first to do so. One aspect of this "win" is that both psychiatrists and insurers collaborated with us in seeing this through. At this point, APA is collaborating with Montana psychologists to see that this legislation does not get undone at the Federal level.

#### Bill Stats:

o 2021 – 3,367 Bill Draft Requests, 1,312 introduced, 565 are law, 8 vetoed (plus 1 with line item veto), 11 awaiting signature o 2019 – 3,325 Bill Draft Requests, 1,309 introduced, 485 are law, 36 vetoed o 2017 – 2,611 Bill Draft Requests, 1,188 introduced, 446 are law, 56 vetoed o 2015 – 2,471 Bill Draft Requests, 1, 187 introduced, 457 are law, 52 vetoed

#### Legislative Stats:

- o For the first time in 16 years the elected Governor was a Republican o For the first time in 18 years, a Governor's veto was overridden by the legislature
- o The Montana Senate has a 31-19 Republican control, increasing by one Republican since 2018.
- o The Montana House has a 67-33 Republican control, increasing nine Republican seats since 2018.

The Montana Legislature adjourned on the 80th Day, April 29th, 2021. The Legislature saved

10 days as they anticipate returning for a special session later in the year.

So dear colleagues it is up to you. We would like you to join us – renew your membership now and EVERY January! Share this information with your colleagues and recommend they join MPA! Let us know if you have an area of content expertise so that we may develop a list of MPAs experts for future legislative sessions. Join the fun and get involved in a committee – the more of us we have, the less work for each of us. We welcome your voice and your participation.

# Follow the Money.....

Marti L. Wangen, CAE MPA Executive Director

American Rescue Plan Act 2021 (ARPA) arpa.mt.gov

Montana's 2021 Legislative Session passed HB 632 which provides for the allocation of funds from the Department of Treasury through the American Rescue Plan . Montana's HB 632 establishes multiple commissions to plan allocation of the money while keeping the funds in line with the Federal rules and regulations . If you're interested in following this process more information is available at arpa.mt.gov and there is a Health Advisory Commission. Accessing the website allows you to see the work of the commission as well as leaving public comment. Some of the areas the Health Advisory commission will be reviewing are:

- Family Violence Prevention
- Child Abuse Prevention
- SAMSHSA/Mental Health and Substance
  Use Disorder (include suicide prevention
  funds using the Utah model)
- Provider rate study

### Social Influences and Social Desirability on Recollections of Childhood Bullying

Jaynee L. Bohart, MA

Jaynee Bohart, MA, is completing her Ph.D. in school psychology at the University of Montana, under the mentorship of Dr. Greg Machek. After several years of working with at-risk and disadvantaged youth, Jaynee developed a passion for supporting youths' socio-emotional health and wellbeing. This drive led to her interest in researching prevention and intervention methods for peer aggression and bullying.

#### Introduction

Bullying is characterized by repetitive, intentional, negative actions directed toward an individual by another individual, or sometimes a group, who enjoy a power differential over the victim (Olweus, 1993). Sadly, being either a victim or an aggressor is associated with a host of negative outcomes. For example, research shows that victimization is associated with internalizing symptoms (e.g., depression and anxiety), poor physical health, substance use, suicidality, and difficulty making friends (Moore et al., 2017; Nansel et al., 2001). As for aggressors, bullying is associated with more disciplinary referrals, greater alcohol consumption, increased smoking, lower academic achievement, and poor psychosocial adjustment (Nansel et al., 2001). However, bullying is a group process that extends beyond the bully-victim dyad. Salmivalli and colleagues (1996) described six distinct bullying participant roles that are characterized by different types of involvement in bullying. These six roles include: "bullies" who initiate the bullying, "assistants" who help the bullies, "reinforcers" who encourage the bullying, "defenders" who stand up for or comfort the victims, "outsiders" who try not to get involved, and "victims" who are the targets of the bullying.

Despite decades of intervention efforts, bullying continues to be a major issue for today's youth. A meta-analysis of bullying intervention studies revealed that, although bullying was reduced by an average of 20-23%, intervention efficacy varied widely (Ttofi & Farrington, 2011). Consequently, the nature of bullying, its consistent presence, and its negative outcomes suggest the need for continued research to improve our understanding of the dynamics underlying bullying and increase the efficacy of interventions.

One potentially informative area of research that could aid in the improvement of interventions is to examine the social forces that shape adolescents' attitudes toward bullying, which have been shown to predict bullying behavior (Boulton et al., 1999). By understanding the sources and strength of social influences on attitudes that contribute to bullying, better targets for interventions could be identified. In particular, research suggests that investigating parental and peer influence on adolescents' bullying attitudes may be promising because research shows that they can influence other types of attitudes. For example, participants reported that peers shaped their attitudes regarding personal matters (e.g., fashion) and parents

shaped their attitudes about safety and social conventions (e.g., helmet wearing and table manners; Daddis, 2008). Thus, one aim of the current study was to examine the influence parents and peers have on attitudes toward bullying during adolescence.

In addition to parental and peer influence, social desirability – the need for the social approval of others, which can motivate underreporting of undesirable behaviors or characteristics (Crowne & Marlowe, 1960) – was investigated. Despite the fact that bullying is undesirable and that socially desirable responding (SDR) can create artificial or inaccurate relationships between variables if left unchecked (Zerbe & Paulhus, 1987), there is a relative lack of bullying research that assesses for SDR. Thus, it is difficult to know how pervasive or serious a problem SDR is in bullying research. The few studies that have investigated SDR's impact on bullying self-reports suggest that bullying may be a socially sensitive topic and that not all participants report their involvement or attitudes accurately. For instance, Cornell and Brockenbrough (2004) found that according to self-reports, only 3.6% of participants could be classified as bullies, whereas according to peer reports, 36% of participants qualified as bullies. Given the sensitive nature of admitting to bullying others, being bullied, or ignoring the sufferings of a victim, examining the impact of SDR on bullying self-reports could have implications for interpreting past research and conducting future studies. Thus, the second purpose of the current study was to explore how SDR affected self-reported attitudes and if levels of SDR differed by bullying participant roles.

#### Method

Participants were recruited from a mid-sized public university in the Rocky Mountain region of the United States using the university's undergraduate research recruitment system (*N* = 246). Participants completed an anonymous, online survey that assessed their attitudes towards bullying during grades 7 and 8 (Attitudes Toward Bullying scale; Salmivalli & Voeten, 2004), their perceptions of their parents' and peers' influence on their past attitudes, their tendency to respond in socially desirable ways (Social Desirability Scale-17; Stöber, 2001), and their past bullying participant roles (self-report Participant Role Questionnaire; Bushard, 2013; Olweus Bully-Victim Questionnaire; Olweus, 1996). The data was analyzed to examine participants' perceptions of influence on their attitudes towards bullying and levels of social desirability according to their bullying roles.

#### **Results and Discussion**

The results showed that the more participants perceived their parents as influential on their attitudes, the stronger the participants tended to oppose bullying. Several possible explanations could account for the obtained results. First, stronger parental influence may have been found to be associated with stronger anti-bullying attitudes because it is

# Social Influences and Social Desirability on Recollections of Childhood Bullying

Jaynee L. Bohart, MA

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likely that when parents talk to their children about bullying, they tend to promote anti-bullying beliefs over pro-bullying beliefs (Lester et al., 2017). Another possibility is that parents indirectly or unconsciously influence their children's bullying attitudes and behaviors. For example, Espelage and colleagues (2000) found that children's bullying behavior was negatively related to time spent with adult role models who advocated peaceful conflict resolution and positively associated with the use of physical discipline at home. Lastly, as Wyatt and Carlo (2002) found, parental responses to their children's behaviors may condition their children's attitudes and behaviors over time.

As for peer influence, results revealed that participants perceived their parents as more influential than their peers and that initially peer influence did not appear to be related to attitudes toward bullying. However, an interesting interaction effect showed that when parental influence was reportedly absent or low, peers become salient sources of influence and significantly impacted attitudes. More specifically, results showed that when parental influence was low, stronger peer influence was associated with stronger pro-bullying attitudes, whereas lower peer influence was associated with average antibullying attitudes. In comparison, when parental influence was moderate or high, participants reported strongly opposing bullying and their attitudes were not associated with peer influence. These findings suggest that parents not only directly impact their children's attitudes, but can also exert indirect influence that alters how their children are swayed by peers.

The current study's results also revealed that levels of SDR varied according to participant roles. Specifically, bully-victims were found to have significantly lower SDR scores than defenders, outsiders, and uncategorizable participants. These results were quite unexpected given previous research which indicates that bully-victims are the most aggressive (Salmivalli & Nieminen, 2002) and that aggressive individuals tend to score highly on SDR measures (Ivarsson et al., 2005). However, when trying to interpret the potential meaning behind the variations in SDR scores, it is helpful to consider the psychological constructs and mechanisms underlying SDR. The most prevalent interpretation of SDR comes from Crowne and Marlowe (1960) who argued that participants with high SDR scores have a strong need for social approval and may be inclined to underreport undesirable behaviors or overreport desirable ones. Alternatively, Block (1965) proposed that SDR scores may accurately reflect the degree to which participants engage in desirable behaviors and have outstanding characteristics. In other words, participants who score higher on SDR scales engage in more desirable behaviors (e.g., defending a victim of bullying) or have more positive characteristics (e.g., high agreeableness) than those with lower scores.

With both theories in mind, and the knowledge that researchers suggest defending or withdrawing during incidents of bullying are considered more socially desirable than aggressing (Salmivalli et al., 1996), a couple explanations for the findings are possible. First, bully-victims' lower SDR scores may indicate that they are less concerned with the social approval of others. However, it is also possible that bully-victims' SDR scores accurately reflect that they have more undesirable characteristics (e.g., pro-bullying attitudes or aggressive tendencies) than other roles. Regardless of the correct explanation though, the finding that some participants tend to respond to non-item related factors in bullying studies is troublesome given researchers' reliance on accurate selfreports. Future researchers and consumers of research may want to consider the potential impact of SDR in bullying research using self-reports.

#### **Implications**

The current study demonstrated that participants recalled their parents and peers as significant sources of influence on their past attitudes toward bullying. Moreover, the findings in the current study indicate that when left unchecked by more prosocial adults, peer influence is associated with stronger probullying attitudes and behaviors. This suggests that mental health professionals working with youth at risk of bullying others may want to involve the youth's family in treatment. The families could be taught to reinforce pro-social behavior, model peaceful conflict resolution, replace physical discipline with other forms of behavior management, give pro-social advice, and communicate anti-bullying expectations and messages. Additionally, mental health professionals may want to empower parents to believe in their capacity to influence their children in pro-social directions. Current and past findings have shown that parental involvement greatly increases the effectiveness of antibullying efforts (Ttofi & Farrington, 2011). In addition to working with the families, or if the families cannot be involved, mental health professionals can directly work with youth to teach them problem-solving skills, conflict resolution strategies, as well as other strategies to reduce their use of bullying to meet their needs (e.g., attention, respect, entertainment). In summary, mental health professionals should not underestimate the power of pro-social adults in buffering against anti-social influences and shaping adolescents' attitudes and behaviors. Current and past findings suggest that targeting peers schoolwide and involving adults in intervention efforts is best practice for preventing bullying.

# **Social Influences and Social Desirability on Recollections of Childhood Bullying** *Jaynee L. Bohart, MA* **References**

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# **MPA Membership List**

We'd like to thank the following members who have renewed their 2021 membership. If you don't find your name, we would greatly appreciate your membership so that we may continue to work on your behalf. Our website has a page to join or renew your membership at: <a href="https://mpa14.wildapricot.org/Join-us">https://mpa14.wildapricot.org/Join-us</a>. If you prefer paper, please see the following page.

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