

## Newsletter

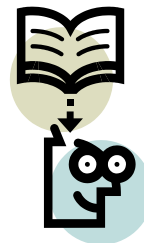
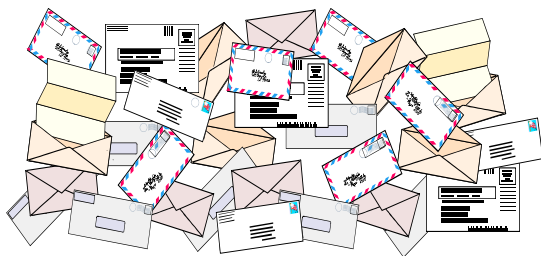
MARCH / APRIL / MAY 2011

ISSUE 89

Welcome to the first PsychDD Newsletter for 2011. This issue contains the members' evaluations of the 2010 Conference, the latest PsychDD interest register, information about our next Forum (July 29) as well as various other bits and pieces from the field of developmental disability.

Please be mindful if printing, and just print the parts you want. Enjoy!

Andrew Marynissen, Newsletter Editor



## Call for Contributions

Dear Readers, while the main purpose of this newsletter is to publicise PsychDD events, some of you have indicated that you would like to see more. *I would also like to make this newsletter better, but I need help from you, the members.*

Contributions are requested from members, and are needed to make this newsletter the powerhouse of information it has the potential to be. Contributions can be anonymous. It could be as simple as a link to a website. Comments on talks, forums, books, tests and tools, conferences, courses and symposia are most welcome.

I do my best (with the time I have) to try and find interesting information, but as you can see I would benefit from member contributions, no matter how small.

If you have anything to contribute, please email me at [andrewm6@chw.edu.au](mailto:andrewm6@chw.edu.au)

---

# From the Chair

Dear Members,

Welcome to the first Newsletter in 2011. As in previous years, our Committee has resumed their activities in February and I would like to take this opportunity to give you some updates on what's new in our team and in the sector in general...

## **Feedback on 2010 Annual Conference**

I hope you all enjoyed the XIX Annual Conference. As in previous years, this also was a very exciting event, which again provided an opportunity for clinicians working in the field to update their current knowledge as well as to network with other colleagues across different governmental and non-governmental agencies. The pre-conference workshop attracted as many participants as last year and we were able to formally recognise our colleagues, who have worked in disability sector for 10, 15 or 20 years by presenting them the "Long Service Award".

We have already started preparation for this year's event, as the Association is going to celebrate its 20<sup>th</sup> anniversary. We are planning to make this event very special and will keep you updated.

## **Committee Nominations for 2011**

I'd like to welcome Bobby Redman as a new committee member, who has joined the committee this year. I would also like to take this opportunity to congratulate our two committee members Laura LeVan and Emel Solak, who have both recently married. Good luck ladies!

Although couple of new members have joined the committee since last year, there is still room for more. The committee currently meets every two months on Mondays (from 3:30-4:45pm) in Bankstown or Epping. Some of our members participate in the meetings via conference calling to reduce their need for travelling from a distant area. So as you can see there is more than one way to be involved and I'd like to encourage anyone who is interested to join our team.

## **News from the Sector**

If you have followed the media recently, you have probably noticed that the Every Australian Counts' campaign for the introduction of a National Disability Insurance Scheme (NDIS) has started. It is believed that the NDIS will revolutionise the way people with a disability, their families and carers are supported in Australia. The NDIS will be a new support system for people with a disability, their families and carers. It will transform the way services are funded and delivered, ensuring people are better supported and enabling them to have greater choice and control. The introduction of NDIS will also have a significant impact on psychologists, as it will create more job opportunities and need for clinicians with an expertise in developmental and /or other disabilities. I can't wait to see the new system being put in place!

If you are interested to find out more about NDIS, go to [www.everyaustraliancounts.com.au](http://www.everyaustraliancounts.com.au). On the pages of this website you can find out how the NDIS will help people with disabilities to have better access to services and achieve the best outcomes.

Best wishes and regards,

*Ewa Geba*

*Chairperson, PsychDD*

---

## PSYCHDD Conference 2010 Evaluation Feedback

The following information is based on the 15 Conference Evaluation forms that were returned to us. Thank you for your feedback.

### Did the Conference meet your needs and expectations?

Of the 15 responses to this question, 13 said 'yes', and no-one said no. Those that didn't say 'yes' still made positive comments.

Comments included: Good variety, interesting, good quality, new concepts, new materials. One person commented about the presentations being too short (*this is standard for most conferences - Ed*).

### Have you any comments about the quality of the presentations in general?

Of the 14 responses to this question, 6 people said that the quality was excellent or very good, and 1 said good.

Comments were varied. Most referred to high quality of presentations. Some comments praised experienced presenters who kept to time. Other comments mentioned presenters running out of time, and that time limits should be longer (*presenters should be able to condense their talk into the allotted time, that is actually part of a good presenter's skill set - Ed*). 2 comments related to the type on slides being too small, and that slide handouts would have been preferable, or available on the website prior to the conference (for download) to be used at the conference.

### Which presentation did you find most worthwhile and why?

All presentations were mentioned at least once. Presentations getting the greatest number of mentions included (in order of popularity):

1. A 3-way tie for most popular:
  - a. *Creating Authentic Happiness in Disability Populations* - Ken Ferris
  - b. *Mindful Parenting for Parents of Children with an Intellectual Disability* - Beth Matters
  - c. *Identifying and Developing De-escalation and Self-Soothing strategies* - Judy Heyworth and Karen Roberts
2. *Using a Clinic Model to Provide Psychological Service* - Kellie Sheehy and Helen Soper

### Suggestions for 2010 Conference themes, topics and speakers

3 people responded to this question. *Themes, topics and speakers have all been grouped together, as it was difficult to distinguish between topics and themes.*

- Different Syndromes
- Behavioural phenotypes
- Personality Disorder and intellectual disability
- Mental health (x 2)
- Cultural issues
- More about Acceptance and Commitment Therapy / Mindfulness
- More about neurobiology and impacts of trauma on development.

### Comments about the Venue of the Conference

Of the 13 people that responded to this question, 8 people said 'great' or 'very good', and 1 said 'good'.

Most comments were positive and addressed the parking and location of the venue.

---

As usual it was difficult to please everyone regarding the room temperature, with comments ranging from too cold to just right (*no-one said 'too hot' this year. Given that it's easier to add clothes than remove clothes, this suggests we finally got the temperature right this time, and people need to bring more clothing if they are prone to getting cold at 22-23 degrees - Ed*)

Several people (3) commented that the venue seems to be getting too small to handle the amount of participants, and that people 'missed' out on attending due to limited places. (*The Mercure can accommodate 85 attendees, so get in early this year to avoid missing out! Other venues have been investigated, but Mercure is best in terms of overall food, location, appearance, parking and service. At this stage we are staying with the Mercure, but this issue will be revisited in the future - Ed*).

### **Comments about the catering**

Of the 14 people who responded to this question,  
5 people said they thought the catering was excellent or very good,  
3 people said it was good or yummy,  
3 people said it was Ok, average, or satisfactory;

As usual it was not possible to please everyone. Comments included: More fruit, more cold drink, water to be more widely available, too rich, better than last year, not as good as before.

### **Comments about the way the Conference was conducted, eg: Publicity, registrations, programming of presenters.**

4 people answered this question, and all said 'good'. Comments included 'look forward to the new website', and that there was some confusion regarding registration this year (*that was due to committee turnover - Ed*) and that online registration would be great.

### **Comments about the cost of the Conference**

7 people who responded to this question. Comments included good/value for money (x3), fine, affordable (so work can cover it), and 2 people commented that the cost was too low, and to increase the cost to encourage participants to value the day more.

### **Suggestions for improvements**

5 people responded to this question

- 3 people commented on the sessions being too short (*assumed this refers to the 30-minute sessions - Ed*), as several people didn't finish (*as already mentioned, a good speaker should be able to fit their topic into the allotted time, and maybe take out the 'basics' part and get straight to the point of the talk - Ed*)
- More interventional (*interactional? couldn't read - Ed*), interstate speakers.
- You all work very hard and it's greatly appreciated (*Thank you on behalf of PsychDD - Ed*).

### **Comments on the Newsletter**

5 people commented.

- Always an interesting publication and a useful resource.
- Very informative. Keep going.
- Very informative and diverse
- Good way of advertising events
- Good
- Keep it up!

---

*Please note: Contributions for the newsletter from members can be sent to me at [andrewm6@chw.edu.au](mailto:andrewm6@chw.edu.au) - Ed.*

### **Comments on the forums (and workshop)**

3 people commented:

- Good.
- Good opportunity to learn about areas of interest
- Attachment, bereavement and Intellectual disability workshop was great

### **Suggested topics and speakers at forums next year**

5 people commented as below:

- Pharmacotherapy , medical side of intellectual disability)
- Ageing population with in intellectual disability: challenges, services, etc.
- Positive Psychology
- Psychology and indigenous Australians with an intellectual disability
- Transcultural issues in developmental disability
- Boundaries and burnout prevention for DD psychologists
- Brain development
- Impact of trauma on development
- Behaviour management, aggression, self-injurious behaviour
- More psychologists in DD!

### **Issues the association should take up in the future**

3 people commented as below:

- Suggestion of a membership increase to \$25 which would be not noticeable to members, or a membership increase to \$50 could assist the great work the committee does for the rest of us, and relieve the financial pressures.
- Bigger venue for the conference
- 2-day conference
- Longer presentations
- If a forum is very popular, bring it to Goulburn, Canberra or South Coast.



# A PsychDD Forum



The Association of Psychologists in Developmental Disability Services

## Motivational Interviewing in Intellectual Disability Services

**Presenter: David Manchester**

David Manchester is practice leader in psychology with Ageing, Disability and Homecare, NSW Department of Family and Community Services. Over the last 10 years he has run courses in Motivational Interviewing for over two thousand practitioners in both the UK and in Australia. David trained as a Trainer in Motivational Interviewing in the USA, and is a member of the international group the Motivational Interviewing Network of Trainers.

### About the presentation:

Motivational interviewing (MI) is a specialist method for practitioners working alongside clients with complex behaviour change issues. Originally developed in the alcohol field it has since found widespread acceptance across multiple areas including primary care, psychiatry, acquired brain injury and forensic services. This talk presents the development of MI over the last 20 years and considers its underlying principles. A special focus is on its potential application in intellectual disability services. The evidence around how practitioners best learn MI is discussed. A video demonstration of MI in clinical practice is included.

**Date:** Friday 29<sup>th</sup> July 2011  
**Time:** 10:00am to 12:00pm (registration from 9:30)  
**Venue:** Conference Room, ADHC Level 2, 93 George St Parramatta  
**Cost:** Free for members! (\$10 for non-members)

This forum is directed at those who provide intervention or service to families where intellectual disability is present. You do not have to be a Psychologist to attend. Please forward this flyer to your colleagues.

Please email Bobby at [bredman@interactiondisability.com](mailto:bredman@interactiondisability.com) to advise us whether you plan to attend and if you are a PsychDD member.

**BOOKINGS ESSENTIAL!!!**

## PsychDD Interest register 2011

The following information is based on the 27 members who gave permission for their interests and/or expertise to be published in the newsletter (and on the internet).

<b>First Name</b>	<b>Surname</b>	<b>Contact</b>	<b>Interest/ expertise</b>
Sarah	Chaplin	<a href="mailto:schaplin@gmail.com">schaplin@gmail.com</a>	Management of challenging behaviours
Veronica	Cook	<a href="mailto:vcook@learninglinks.org.au">vcook@learninglinks.org.au</a>	Grief and Loss
Rachel	Dickson	<a href="mailto:racheldickson@med.usyd.edu.au">racheldickson@med.usyd.edu.au</a>	Person centredness, mental health
Jessica	Farah	<a href="mailto:jessica.farah@hotmail.com">jessica.farah@hotmail.com</a>	Anxiety
Anita	Freeman	<a href="mailto:afreeman@autismspectrum.org.au">afreeman@autismspectrum.org.au</a>	Autism, behaviour support
Chris	Gregory	<a href="mailto:christopher.gregory@dhs.nsw.gov.au">christopher.gregory@dhs.nsw.gov.au</a>	Criminal justice, psycho-oncology in disability
Annalisa	Heding	<a href="mailto:annalisa.heding@dhs.nsw.gov.au">annalisa.heding@dhs.nsw.gov.au</a>	Assessment, diagnosis, children, adolescent & family, mental health
Marjorie	Janz	<a href="mailto:janzm@warringah.nsw.gov.au">janzm@warringah.nsw.gov.au</a>	Family therapy
Iris	Kemp	<a href="mailto:iris.kemp@dhs.nsw.gov.au">iris.kemp@dhs.nsw.gov.au</a>	Assessment and Mental Health
Thi Cam Le	Le	<a href="mailto:thicamle.le@dhs.nsw.gov.au">thicamle.le@dhs.nsw.gov.au</a>	Intellectual disability and mental health
Dianne	Leggott	<a href="mailto:dianneleggott@bigpond.com">dianneleggott@bigpond.com</a>	New research in intervention strategies
Andrew	Marynissen	<a href="mailto:andrewm6@chw.edu.au">andrewm6@chw.edu.au</a>	Assessment and diagnosis of developmental delay, intellectual disability and Autism Spectrum Disorders in preschoolers.
Keith	McVilly	<a href="mailto:keith.mcvilly@deakin.edu.au">keith.mcvilly@deakin.edu.au</a>	Relationships
Ruth	Mitchell	<a href="mailto:ruth.mitchell@dhs.nsw.gov.au">ruth.mitchell@dhs.nsw.gov.au</a>	Diagnosis and assessment, early childhood assessment, behavioural phenotypes, grief and bereavement
Patricia	Morrow	<a href="mailto:patricia.morrow@dhs.nsw.gov.au">patricia.morrow@dhs.nsw.gov.au</a>	Sex education counselling, parenting a child with a developmental or intellectual disability, effective counselling/psycho education with people with an intellectual disability
Nastasja	Papadopoulos	<a href="mailto:npapadopoulos@dsa.org.au">npapadopoulos@dsa.org.au</a>	Autism Spectrum Disorders
Meitty	Parman	<a href="mailto:meityp@yahoo.com">meityp@yahoo.com</a>	Dual diagnosis
Rachael	Pickford	<a href="mailto:rachael.pickford@dhs.nsw.gov.au">rachael.pickford@dhs.nsw.gov.au</a>	Trauma and attachment
Susan	Pike	<a href="mailto:susan.pike@dhs.nsw.gov.au">susan.pike@dhs.nsw.gov.au</a>	Mental health across the lifespan
Roberta	Redman	<a href="mailto:redman100@optusnet.com.au">redman100@optusnet.com.au</a>	Ageing, dual diagnosis
Vivienne	Riches	<a href="mailto:vriches@med.usyd.edu.au">vriches@med.usyd.edu.au</a>	Active support, support for clients & staff, mental emotional health
Alison	Rowe	<a href="mailto:alisonrowe@tpg.com.au">alisonrowe@tpg.com.au</a>	Family therapy, trauma, attachment, skin-picking
Sandra	Scott	<a href="mailto:sandra.scott@det.nsw.edu.au">sandra.scott@det.nsw.edu.au</a>	Intellectual assessment, autism spectrum disorders
Ninu	Sethi	<a href="mailto:ninu.sethi@sesiahs.health.nsw.gov.au">ninu.sethi@sesiahs.health.nsw.gov.au</a>	Relationships, sexual assault and protective behaviours
Emel	Solak	<a href="mailto:esolak@dsa.org.au">esolak@dsa.org.au</a>	Autism Spectrum Disorders, developmental disability, psychiatric disorders, challenging behaviours
John	Wagner	<a href="mailto:john.wagner@dhs.nsw.gov.au">john.wagner@dhs.nsw.gov.au</a>	Practice standards, supervision, training
Monica	Wordsworth	<a href="mailto:monica.wordsworth@dhs.nsw.gov.au">monica.wordsworth@dhs.nsw.gov.au</a>	Autism spectrum disorders

---

# CALL FOR PAPERS

20th ANNIVERSARY PsychDD CONFERENCE

## *Twenty Years On: Where To From Here?*

November 25, 2011  
Mercure Hotel  
Parramatta

***Presenters are entitled to free registration for the conference***

I am interested in giving a presentation at the 2011 PSYCHDD Conference. The type of presentation I would like to deliver is:

- 45-minute paper  
 30-minute paper

The working title of my presentation is:

This paper deals with: (just in broad outline if an abstract is not available at this time)

Name:

Agency:

Address:

Post Code:

Phone:

E-mail:

***Intending present please copy this form and return it by email. You will be sent further information about the conference when your expression of interest is received.***

Please return by **July 29 2011** to

John Wagner  
john.wagner @adhc.nsw.gov.au

Inquiries:  
Phone: 8876 4000

---

---

### PsychDD - About the Members

Welcome to our 19<sup>th</sup> edition of About the Members.

Our member for this edition is Dianne Leggott who works with Disability Services Australia (DSA).

Thank you, for your contribution, Dianne. ☺

**What University did you go to?** University of Western Sydney

**When did you graduate?** 2009

**What degree(s) do you hold?** PG Dip (Psych)

**How long have you been a member of PsychDD?**

6 months (*at the time of completion of this questionnaire, around 3 months ago - Ed*)

**What was your first job as a psychologist?** Behaviour Intervention Consultant

**How long have you been a psychologist working in the field of Developmental disability?**

6 months (*at the time of completion of this questionnaire, around 3 months ago - Ed*)

**Most embarrassing professional moment:**

A client refusing to work with me because I am a smoker

**What do you like most about your job?** Assessment process

**What is most challenging about your job?** Monitoring outcomes of intervention

---

---

Brief write-up: PsychDD 2010 Pre-Conference Workshop

#### **'Attachment and Bereavement in Intellectual Disability'**

On Thursday 25, November a number of us attended the PSYCHDD 2010 Pre-Conference workshop at the Mecure Hotel, Parramatta by Anders Hansson and Martine Fourie, on 'Attachment and Bereavement in Intellectual Disability'. Both Anders and Martine are employed as Senior Clinical Consultants with ADHC Statewide Behaviour Intervention Services. On arrival we were greeted with many welcomes and an array of sensory objects, resources and sugary treats.

This was a hands-on workshop, encouraging participants to explore contemporary thinking within Attachment Theory and an overview in grief and loss, while providing a holistic framework in supporting individuals with intellectual disabilities who have experienced significant loss.

The workshop also looked at the bereavement experiences and strategies for supporting both people with intellectual disability and their families to overcome the disrupted attachments that occur as a result of their loss.

On behalf of PSYCHDD I wish to thank both Anders Hansson and Martine Fourie for this interesting presentation and look forward to the 2011 Pre-Conference Workshop.

Emel Solak

---

---



## ***When should I renew my PsychDD membership?***

Dear members,

PsychDD membership renewal is done at the conference towards the end of November every year. The cost of joining PsychDD (\$20) will be *made back by you* if you attend one of the 2 big events we run every year: The Conference, or the Workshop, which in more recent years has usually been held the day before the conference to allow regional psychologists to 'get more' for their trip to Sydney by allowing them to attend 2 events on consecutive days.

Through the year (from April onwards) members are sent newsletters which contain a variety of disability-related information. Joining PsychDD later in the year will cause you to miss out on the earlier newsletters, and possibly miss our first forum (free for members) which is always held in the first half of the year.

Signing up on the day of the conference will not get you the member's discount until the following conference. Depending on how late in the year you join, you may either be required to renew your membership at the conference or you may be treated as having just joined at the conference which means you won't get any PsychDD discounts until after the conference.

So

The message is: *Renew your membership at the conference or as early in the following year as you can, to get the maximum member's benefit.*

In case you are still unsure about joining or renewing your membership, consider this:

PsychDD events are worth *Ongoing Professional Development (OPD) hours*, as most of the events are organised and presented by psychologists, for psychologists.

Given that the new (national registration) rules insist that you attend training within your field of expertise, every psychologist working in the field of developmental disability should be a member of PsychDD.

Attending all our events should add up to around 14 hours a year (12 at the very least), which is a substantial part of your OPD requirement.



---

---

**PSYCHDD Award  
Recognition of Long Service  
Honour Roll**



The following lists include psychologists who have been working in the field of developmental disability for more than 10 years

**Awards in 2010**

NAME	Years of Service
Vivienne Riches	27
Ruth Mitchell	24
Danuta Banachowicz	21
Ewa Geba	21
Patricia Morrow	15
Tonyia Watson	15
Claudia Kalnin	15
Rachel Pickford	12
Marjorie Janz	12
Michelle Chapman	12
Lisa Osborne	10
Kala Ram	10
Phillipa Cranswick	10
Kate Brearley	10
Louisa Carroll	10
Ioannis Lycouressis	10

**Awards in 2009**

NAME	Years of Service
John Wagner	33
Robyn McIntyre	25
Alison Hart	24
Keith McVilly	21
Peter Finn	20
Frances Roberts	19
Andrew Marynissen	18
Annalisa Heding	17
Joy Thompson	16
Maria Macek	13
Sunita Misra	11

---

---

## Disability news

### PM promises cash for disabled children

By online political correspondent Emma Rodgers

Updated Thu Jul 29, 2010 11:21am AEST

**ABC News**

Children with a disability would be given \$12,000 to help pay for early intervention treatment under a re-elected Labor government, Prime Minister Julia Gillard has announced.

Labor would also fund an extra 150 supported accommodation places for people with disabilities and \$1 million to help them find work.

Ms Gillard outlined the measures during a speech in which she unveiled the Government's national disability strategy in Melbourne today.

Ms Gillard said early intervention services for children were vital.

"Australia must do more to help people with a disability," she said.

Under Labor policy almost 8,000 children under six would be eligible to receive up to \$12,000 of early intervention therapies and services.

Those services would include treatments such as speech pathology, occupational therapy, physiotherapy and psychology.

Parents could claim up to \$6,000 in one year from July 2011.

Ms Gillard also announced that another 20,000 children up to the age of 13 would be eligible for Medicare rebates on a range of treatments.

According to Government figures, 180,000 children under 15 live with a severe disability and by 2030 there will be 2.3 million disabled Australians.

Speaking at the MS Australia Nerve Centre in Melbourne, Ms Gillard said more work had to be done to improve the lives of disabled people.

"The status quo isn't good enough," she said.

"There is much more to be done in our journey of inclusion and reform."

She said the national disability strategy would help the Government create better services for disabled people.

"I'm also delighted that the national draft strategy means support and mentoring to help people with disability become leaders," she said.

---

### Autism can be diagnosed with brain scan – study

**Alok Jha**, guardian.co.uk, Tuesday 10 August 2010

*Study shows 90% success rate in detecting adult males with ASD, and researchers hope the simple technique will rapidly identify children at risk*

A simple 15-minute brain scan could help doctors diagnose people with autism by identifying structural differences in their brains. Scientists say the scans would speed up what is currently a long and emotional diagnostic procedure and allow the identification of at-risk children more rapidly.

"We know already that people with autism have differences in brain anatomy and some regions are just bigger and smaller or just different in shape," said Christine Ecker of King's College Institute of Psychiatry in London. "Our technique can use this information to identify someone with autism."

Autistic spectrum disorder (ASD) is a lifelong condition caused by abnormalities in the development of the brain that affects around half a million people in the UK. The vast majority of

---

these are male, and diagnosis usually involves a lengthy process of interviews and personal accounts from family and friends close to the patient.

Medical researchers at the IoP compared the brain scans of 20 adults with autism against those of 20 adults without. They found significant differences in the thickness of tissue in parts of the grey matter in areas of the frontal and parietal lobes which are responsible for functions including behaviour and language.

In the experiment, Ecker showed that her imaging technique was able to detect which people in her group had autism, with 90% accuracy. "If we get a new case, we will also hopefully be 90% accurate," she said. The research, supported by the Medical Research Council, Wellcome Trust and National Institute for Health Research, is published today in the *Journal of Neuroscience*.

Declan Murphy, professor of psychiatry and brain maturation at the IoP said the new method would help people with ASD to be diagnosed more quickly and cost effectively. "Most importantly, their diagnosis will be based on an objective "biomarker" and not simply on the opinion of a clinician, which is formed after an interview. Simply being diagnosed means patients can take the next steps to get help and improve their quality of life."

Uta Frith, emeritus professor of cognitive development at University College London's Institute of Cognitive Neuroscience, said: "This study shows that the subtle brain abnormalities associated with autism show a distinctive pattern. However, it will need many more studies before the technique used in this study can be used for diagnosis. It is crucial that we learn more about what the brain abnormalities mean. The authors in the paper itself say their results are preliminary and serve as 'proof of concept' rather than a definitive means of diagnosis."

Ecker found there was a correlation between the severity of a person's autism and the amount of structural difference observed in their brain scans, compared with the control group. "We can see that, on the basis of the brain scan, some brains are simply located quite far away from the 'control' brain, whereas some are more like the controls, so the autism wouldn't be that severe."

The IoP team scanned the brains of 20 healthy men and 20 men with ASD, aged between 20 and 68 years. The men with ASD had already been diagnosed by traditional methods, which includes IQ tests, a psychiatric interview, physical examinations and a blood test. Once all the brains had been imaged using a standard clinical MRI scanner, the pictures were analysed for differences using a technique called pattern classification, which is widely used in facial recognition technology but has not, until now, been used on brain scans.

So far, Ecker's team has only looked at men but there are plans to extend the work to women and children. "We think this approach will work even better with kids because the brain abnormalities you see in autism develop over the life span and they're most prominent during childhood," she said. "If we can get up to 90% accuracy in adults, we think it'll be even better in kids."

Carol Povey, director of the National Autistic Society's Centre for Autism, said the study gave a valuable insight into the way people with autism process and understand the world around them. "Eventually, the researchers hope that brain scans might also be a useful diagnostic tool. While further testing is still required, any tools which could help identify autism at an earlier stage, have the potential to improve a person's quality of life by allowing the right support to be put in place as soon as possible."

She added: "However, diagnosis is only the first step. At the National Autistic Society, we frequently receive calls from people who have struggled to get support, leaving them anxious, frustrated and in some cases depressed or even suicidal. Research that improves our understanding of autism, is therefore part of a wider struggle to enable people with autism to access appropriate support at every stage of their life."

---

From Guardian.co.uk ([www.guardian.co.uk](http://www.guardian.co.uk)) - Stay here, cat - we need you

A stray cat became the catalyst that allowed Julia Romp's autistic son, George, to communicate with his mother – and even learn to read and write. But then it disappeared and George withdrew again. Juliet Rix finds out how they finally tracked their pet down

Pets: essential members of the family or a damn nuisance to be avoided at all costs? Opinion is divided, but one thing is certain, pets bring out strong feelings and can have a strong impact on family's lives, especially in the case of Julia Romp and her son George.

### **A Friend Like Ben: The cat that came home for Christmas**

by Julia Romp

Julia was determined never to get a cat – her mother rescued cats and as a child she remembers being displaced from the sofa by her mother's feline friends. "I was the child who went to school covered in fur and smelling of cat pee," she says. Finding herself the single parent of an autistic son only strengthened her resolve. She had enough on her plate.

Then Ben walked into her life, a stray cat who was to have a dramatic effect on her views and her family life. "It was definitely not love at first sight," she explains. When the cat first visited her garden in Isleworth, west London – filthy, sick and bloody – it hissed whenever Julia or George came near. Over a period of weeks Julia's resolve about cat ownership was broken as her son George developed a special relationship with Ben.

George, 10, has autism. Before Ben arrived, he didn't understand people and would kick and bite if other children touched him. He never showed affection, yet would stroke Ben and bury his face in the cat's fur. He didn't make eye contact – but looked straight at Ben, and when Ben looked back he didn't flinch. George didn't smile either and only spoke in a monotone. But he began to develop a high-pitched "cat-talk" voice, in which he spoke to Ben and replied on Ben's behalf.

Julia picked up the cat-talk and copied it. Using Ben as an intermediary, she was able to communicate with George. He started telling imaginative stories of Ben's escapades: "Ben was a DJ in 1973 ... Ben went to sea in a storm ...", and she discovered that on the visits and day trips she and George had taken over the years, while he had seemed to take no notice of anything, he had, in fact, been drinking it all in.

Over time, George's relationship with Ben rubbed off on his relationships with people. He became calmer at school and better with the other children. He began to learn to read and write. He told Ben he loved him and to Julia's disbelieving delight, he told his mum he loved her too. "I started to take it all for granted," she says.

And then Ben disappeared.

Julia and George were on a rare holiday when the call came. Julia didn't hesitate: "I must have looked like a mad woman rushing around the airport trying to get a flight home." Arriving home at 4am, she dumped the suitcase by the front door and leaving George with her mother, went out to search for Ben.

George became withdrawn. The monotone returned. There was no cat-talk, no laughter. "My life went on hold," Julia says, "I had to find Ben." She scoured the area, contacted every vet and pet shop, printed leaflets and plastered thousands of posters across the borough. The council threatened to take her to court. Her response was: "Oh, yes, would you? That might get it on TV and someone might recognise Ben." The council didn't pursue it.

---

Julia fielded hundreds of calls from people claiming to have seen her cat. She sat in parks all night, fell into a river and visited countless houses and gardens. Some calls were genuine possible sightings, she says, others "were lonely people ... who just wanted a chat and a cup of tea with me". Most were well-meaning, although one woman started telling Julia how her cat had been murdered and so had her mother, then blocked Julia's route out of the house. "That was frightening," says Julia, "She had mental health problems."

Weeks passed. A month. Two months. George withdrew even more. "I had been told not to show too much sadness in front of George, so when it all got too much I ran to the bathroom and cried into a towel." She became so desperate that she rang a missing persons agency and asked how much it cost to look for someone. When they wanted more information, "I had to tell them it was a cat and they laughed."

Christmas was coming and Julia became worried that all the stress and uncertainty was worse for George than Ben being dead. "George worried about Ben. He'd say, 'It's cold tonight. Ben will be cold.'" Julia decided enough was enough and planned a funeral. She would tell George that Ben had had an accident and the vet had cremated him, and they would bury some ashes in the garden. But when George got home and asked, "What's that hole for?" Julia says, "I couldn't do it. I said I'd been doing some gardening."

Then, four days before Christmas, Julia received a call from Brighton. Was she really going to go all that way for yet another hoax or mistaken identity? But the family in Brighton said they had checked the cat's chip and insisted it was Ben. So Julia drove to the coast.

"The house was decorated with the same decorations we usually have for Christmas," she says, "and the family were lovely but I was trembling." A black and white cat wandered out of a cat bed. It was Ben. Julia scooped him up and collapsed in a heap of fur and tears in the middle of the floor. Then she phoned her mother, who was at home with George.

With Ben and George reunited, life resumed. George's cat voice returned, as did the smiles and the laughter. They still don't know how Ben got to Brighton, but George had his own theories. He described how Ben had gone there to get fish and chips by the sea and to visit Katie Price, who lives nearby – Julia breathed a huge sigh of relief. She unpacked the suitcase and hung the Christmas decorations. "I realised," she says, "that I hadn't been searching for Ben just for George, but for myself as well."

The doorbell rings and George arrives home from school. He looks me straight in the eye (albeit briefly) and says hello. Then he goes in search of Ben. "The thing is," Julia says, "in this relationship, George is in control ... He does both sides of the conversation, he is the one who touches, he decides what and when to play."

So would she recommend a pet for other children who have special needs? Julia hesitates. She had tried getting George a budgie and a rabbit before Ben arrived, she says, but neither worked. "It has to be the right animal," she adds. I hardly dare ask the next question: What happens when Ben dies? Julia she has thought about that. She is planning to introduce a kitten to the household soon in the hope that George will attach himself to "Ben's son or daughter".

"When I found Ben," she says, "I promised myself I would stop wishing for things – I was always wishing George had a [resident] dad, that I had a job." But "you only realise what you've got when you lose it: George, Ben and I are a family – and we're complete".

That should be the end of the story, but a few days after Christmas the phone rang again. It was a woman in Devon. Her family was distraught: they had lost their cat on a visit to her mother in Isleworth. Would Julia help them find Numpty? "My whole body went goosepimply. I knew how she felt."

---

So it all began again: the posters, the leaflets, "bothering the local pet shops". "Everyone thought I was crazy" – everyone except George. After eight weeks, Julia found Numpty healthy and happy living with an elderly lady less than a mile away. "She had found him stray and underfed. She told me she had had a lot of sadness in her life and that this cat had come to her and that she loved him."

"It crossed my mind never to tell anyone I'd found it," says Julia, "but I couldn't do that." So she rang the owner in Devon and told her the story. "The family came up and met the lady ... They could see the sadness in her and that there had been a gap in her life ... They let her keep the cat."

Success doesn't stay a secret for long and Julia is now seen as the local pet detective. She is currently looking for a tabby called Zamba, which has been missing for three months. She is also working as a volunteer for two charities that rescue animals and help people on low incomes to look after their pets. She has recently been advised to apply for an RSPCA training course, which would help her to get paid animal work. She grins: "I might even end up with a job!"

*A Friend Like Ben: The Cat That Came Home for Christmas, by Julia Romp, is published by Harper Collins, £14.99. To order a copy for £11.99 with free UK p&p go to [guardian.co.uk/bookshop](http://guardian.co.uk/bookshop) or call 0330 333 6846*



### **PsychDD Committee Meetings**

Dear members,

Members of PsychDD have the right (and privilege!) of attending the PsychDD Committee meetings.

For anyone interested in attending these meetings, they take place from 3:30 pm to 5:00 pm on 7 occasions throughout the year.

Our current venues alternate between the offices of Disability Services Australia (DSA), at Suite 5/400 Chapel Rd, Bankstown and Statewide Behaviour Intervention Service (BIS) at Building B, Level 1, 242 Beecroft Road, Epping.

Dates of meetings for the rest of 2011 are:

*Mondays 20<sup>th</sup> June (DSA), 22<sup>nd</sup> August (BIS), 24<sup>th</sup> October (DSA), 14<sup>th</sup> November (pre-conference meeting, BIS), 5<sup>th</sup> December (DSA).*

---

---

## Current PsychDD Committee

Chair:	Ewa Geba	4620 9660
Vice Chair:	John Wagner	8876 4000
Secretary:	Andrew Marynissen	9891 7202
Treasurer:	Laura Le Van	9468 7074
Newsletter Editor:	Andrew Marynissen	9891 7202
Membership Secretary:	Andrew Marynissen	9891 7202
Forum Coordinator:	Bobby Redman	1300 668 123
Conference Co-ordinator:	John Wagner	8876 4000
Workshop Co-ordinator:	Emel Solak	8722 2300
Pre-Conference Workshop Co-ordinator	Emel Solak	8722 2300
Awards Co-ordinator:	(vacant)	
Webmaster:	Lorraine Teeuwen-Green	1300 372 747
Publicity:	Andrew Marynissen	9891 7202
Public Officer (incorporation):	Andrew Marynissen	9891 7202



*Please consider joining our committee!!*

Are You PsychDD Material? You probably are!

Our committee contains 8 people at the moment, and **there are 3 people leaving the committee over the next 12-18 months**. The job of the committee is to manage PsychDD, ranging from organising forums, workshops and an annual conference, to publicity, newsletters, incorporation, membership and a website as well.

We are looking for Psychologists who would like to become part of our committee. We meet 7 times a year (roughly every 2 months) for 1½ hours on a Monday afternoon. Our current venues alternate between the offices of Disability Services Australia (DSA), at Suite 5/400 Chapel Rd, Bankstown and Statewide behaviour Intervention service (BIS) at Building B, Level 1, 242 Beecroft Road, Epping.

Meeting dates are located on the previous page. Some of us also have responsibilities at forums, workshops and the annual conference.

Please consider joining our committee. We have changed our meeting times to **be during business hours** for committee members' convenience. If you are interested, please contact one of the committee members. Our numbers are listed (above) in every newsletter, and Andrew's email address is on the front page.

Being on the committee of an organisation of around 80 Psychologists in a specific field can be a feather in your cap when it comes to seeking work in the field. It is also favourable to the Registration Board in terms of being on the committee of a psychology-specific Association. If you become involved with our big events then you will also develop many new skills that can be applied to other areas of your work, such as organising and running groups, or becoming part of a network of psychologists.

---

---

## PSYCHDD MEMBERSHIP RENEWAL/APPLICATION FORM

Surname: ..... Given names: .....

Employer: ..... Position: .....

Mailing address:  work or  home: .....

Phone no:  work or  home: ..... fax: .....

E-mail: .....

Are you registered as a psychologist with the NSW Psychologist Registration Board?  yes  no

If yes, what is your registration status:  full or  conditional?

What psychology degree(s) do you hold? .....

Years of service as a psychologist working in the field of developmental disability services: .....

How did you find out about PSYCHDD (if you are a new member)? .....

Do you have an area of special interests or expertise in disability work? .....

Are you agreeable to your name and area of interest appearing in a directory of members' interests which we publish from time to time in the Newsletter *and on the internet*?  yes  no

Tick the contact details you are happy to have included (usually only email address is included):

mailing address  phone number  email

All members are sent flyers for events and other updates regarding events, in addition to receiving the newsletter. If you *do not* want to receive this information, please indicate by ticking the box.

I *do not* want to receive flyers, advertisements or updates regarding PsychDD issues.

Please enclose \$20.00 annual membership payable to PSYCHDD and post to

Andrew Marynissen, PECAT  
Locked Bag 4001  
Westmead NSW 2145

**Please note: Membership is GST exempt and valid until the annual conference (November) of that year.**

Event photos (possibly containing attendees) may be published in newsletters and may also appear on the PsychDD website. Please advise if you have an issue with this. Contact: Andrew Marynissen on 9891 7202 (you can also leave a message) or [andrewm6@chw.edu.au](mailto:andrewm6@chw.edu.au), or make a comment on this form.

---

### IDEAS FOR FORUMS

We are interested to know what topics members would like to see presented as forums. Please tick three topics from the following list which has been derived from the member feedback form.

- syndromes and congenital disorders
- ageing and developmental disability
- management of challenging behaviour
- dual diagnosis
- new developments in psychological assessment for people with a disability
- cognitive-behavioural strategies
- working with families
- families from other cultures
- other.....

ABN: 22 404 141 513



**PSYCHDD Award: Recognition of Long Service**  
Nomination form



The Award of Distinction for Long Service in the field of Developmental Disability recognises those who have worked in the profession for 10, 15 or 20 years. This award is based on fairly continuous service to the Developmental Disability field but does not have to be for the same employer.

Please note: PSYCHDD Members are able to nominate themselves for this award.

To be eligible for this award you will need to have each of the following:

1. Current PSYCHDD Membership
2. Current registration as a Psychologist
3. Have worked as a psychologist or used your psychology skills and qualifications in the Developmental Disability field on a fairly continuous basis (this allows for short absences such as maternity leave, secondments etc.)

Please submit nominations by **17<sup>th</sup> November 2010**

Name of nominee: \_\_\_\_\_  
Organisation: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Work role: \_\_\_\_\_  
Email: \_\_\_\_\_

Years of service:     10 years service     15 years service     20 years service

Brief outline of professional biographical data of the nominee. Where has the nominee worked?

Will the nominated person be attending the Annual Conference on Friday 28<sup>th</sup> November 2008?  
 Yes     No

Name of PSYCHDD Member submitting nomination: \_\_\_\_\_ (if self-nominating 'as above')

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

A PSYCHDD Award for Long Service recipient will:

1. Receive a certificate at an award ceremony at the annual PSYCHDD Conference (*for those who would prefer not to be in the spotlight, this is not compulsory*),
2. Have their name placed in the PSYCHDD newsletter in recognition of their commitment to working in the field of developmental disability.

By submitting this form I acknowledge that my name and work title will be printed in the PSYCHDD newsletter and posted on the website, OR

I have informed the person named for nomination and they are aware that their name and work title will be printed in the PSYCHDD newsletter and posted on the website.

*(please tick appropriate response)*

Please submit nominations via email to Awards Co-ordinator Meitty Parman at [mparman@dsa.org.au](mailto:mparman@dsa.org.au).