

The Maine Psychologist

Psychology's Conflicted Role in the War on Terror

by: Stephen Benson, Ph.D.

PART 1 of a 2 Part Series:

I write by invitation of the editor a summary of developments and issues relating to controversies concerned with the American Psychological Association [APA]'s relationship to alleged abuses of health, human rights and international law in the detention and interrogation of alien prisoners since 2002 at Guantanamo Naval Base [GTMO], on American soil on the island of Cuba. Owing to the vast quantities of ink spilled already over these matters, my summary will be as drily objective and direct as I can make it, while offering e-links to numerous documents and resources on line, for clarification and further investigation.

However, I'm no journalist or scholar, and the issues and history here are complex and multiple, as they may be in any controversy involving multiple organizations. They can get polarizing, confusing, and puzzling when defense of national security and protection of classified information are also at issue. Composing this essay is emotionally and procedurally difficult for me, particularly as I try not to freight it with my own attitudes and opinions. I will try instead to offer my best understanding statements and positions in the context of an historical account.

Wishing to convey specifics I believe vital to finding perspective on the controversy and the issues as they have developed in the past twelve years, I cannot claim completeness of any kind. Readers may seek fuller background in two footnoted and fluently written essays by Chicago psychologist and psychoanalyst Frank L. Summers, current President of APA's Division 39. In 2007 he wrote an extensive treatment [<http://www.palgrave-journals.com/pcs/journal/v12/n1/full/2100114a.html>] of the relationship between the APA and psychologists' involvement in service to the military at GTMO . This was followed a year later by a longer, searching historical essay [<http://www.tandfonline.com/doi/abs/10.1080/10481880802297665?journalCode=hpsd20#.Ush7NmRDu5g>] on the interdependence of the United States military and the American psychological profession since World War II, when psychology grew exponentially in response to research funding, clinical training, and treatment opportunities related to the war effort and subsequent demands from the CIA and the military.

Summers' account of this close relationship over the previous fifty years might contextualize a December 2001 gathering in the home of 1998's APA President Martin Seligman. According to the New York Times, Seligman convened a small group of professors and law enforcement and intelligence officers to reflect on American challenges in facing Muslim extremism. Invitees included a C.I.A. psychologist, Kirk M. Hubbard, who brought James Mitchell, a retired psychologist. Mitchell reportedly raved over Seligman's celebrated experiments on "learned helplessness." It soon emerged that Mitchell construed that work as a key to creating tactics for compelling Al Qaeda

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**MePA Newsletter
Winter 2014**

The MePA Newsletter is the official newsletter of the Maine Psychological Association and is published four times a year. **Deadlines are 1/15 for Winter, 4/15 for Spring, 7/15 for Summer and 10/15 for Fall editions.** News items, brief manuscripts of general interest to psychologists, notices of future meetings, research, activities of MePA members and other items may be sent to:

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From the President's Desk

By: Diane Tennes PhD, LADC

Hello. MePA is your state psychological association and run by volunteers. There are many people who make our organization function successfully, and I am just one small part. On January 1st I was lucky enough to become the President of MePA.

I fell in love with Maine when I came to be interviewed as part of my graduate school application process. I was thrilled when that acceptance letter arrived from the University of Maine. My father was a Methodist minister whose churches were in rural areas like southern Indiana and western New York so UMO was a great fit. I had completed my undergraduate work at SUNY in Buffalo which is famous for lake effect snowfalls and cold temperatures so was confident I was prepared for the winters; boy was I wrong on that count! I was lucky enough to remain in Maine for my internship at the Togus VA. Now almost thirty years later (yikes), I still love living and working in Maine.

I have worked primarily in mental health and substance abuse throughout my career. I worked at Penobscot Job Corps as a substance abuse counselor while I was finishing my Ph.D. and then was the director of a dual diagnosis program at a community mental health agency in Bangor until going full-time into private practice in 2001. Part of the impetus for this transition was wanting more flexible hours after my daughter was born.

My practice is now primarily psycho-



logical consultation and evaluations. I enjoy the challenges presented with the various referral questions and working within the legal arena. I conduct competency and criminal responsibility evaluations both for State Forensic Services as well as privately for defense attorneys. I do parental capacity evaluations as well as other diagnostic evaluations. My practice is state-wide and frequently I travel to either testify or conduct evaluations. Once a month I travel up to Presque Isle to do Social Security evaluations, as there are no psychologists currently providing that service so far north. I count myself lucky to have such a wide range of opportunities to engage in Psychology. Beyond the evaluations, I conduct workshops around the state on topics such as child maltreatment.

About four years ago I also took on a new role as a consultant for Job Corps. I am fortunate enough to travel around the county providing technical assistance to different Job Corps programs, specifically regarding their drug and alcohol programming. I am writing this as I stare out the window of the South

Bronx Job Corps Center onto the busy streets of New York City. This has been an exciting addition to my practice as it gives me the opportunity to meet fascinating people and travel to parts of the county I have never seen. In the last year I have visited Job Corps centers in Washington, Pennsylvania, Louisiana, Iowa, Hawaii, Oregon and Illinois, among other places.

I have three children and two of them still live at home. Max is 17 and a junior in high school, while Tess is 12 and a seventh grader. I have a successful co-parenting relationship with my ex-husband who is also a psychologist. I love to take advantage of the Maine countryside by hiking and kayaking. My resolution for this coming year has been to incorporate more mindfulness into my life and I am taking yoga classes weekly.

So enough about me, let's talk about your State Psychological Association. I am thrilled to be the current president and thankful for the great leadership that we have on Policy Council as well as for our illustrious Executive Director, Sheila Comerford. We are your psychological association and want to reflect your values. Please reach out and contact us when you have questions and let us know the ways we can be helpful to you.

Diane Tennes, PhD LADC
datphd@aol.com

Welcome New Members!

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A Note from the Editor...

Hello Fellow Maine Psychologists!

I am excited to publish Part 1 of Dr. Steve Benson's thought-provoking and informative review of the controversial role of psychologists and the APA in advising on and participating in interrogation of suspected terrorists.

I believe we are at our best when we examine our ethical commitments and beliefs, embracing at the same time a variety of points of view.

Please send responses, letters to the Editor, photos of activities, book reviews, reports of publications, announcements, etc. to either Sheila Comerford (mepaug@aol.com) or myself (laura@slapsheltonneuro.org).

Best!

Laura Slap-Shelton, Psy.D.
Editor,
The Maine Psychologist

**Don't
Forget
to
Renew
For
2014!**

Our Next Generation-Their Time Has Come

Pat DeLeon, PhD former APA President

From a health policy perspective, our nation is undergoing a radical transformation from what might once have been considered, not that long ago, a “momma-pop” individual-oriented health care delivery model to becoming a systematically data-driven and provider accountable health care system that will ultimately be client-centered with an emphasis upon prevention, wellness, and holistic care. This fundamental change reflects the essence of President Obama’s Patient Protection and Affordable Care Act (ACA). There are several driving factors which made the enactment of his far reaching legislation timely and politically feasible. Health care costs have continued to rise at an unacceptable rate. Today health care in the United States is more expensive than in any other developed nation costing \$2.7 trillion in 2011, or 17.9% of the national gross domestic product. Numerous studies have confirmed that there is much variation in health care spending, use, and quality within geographical areas; and further, that according to the Institute of Medicine (IOM) regions that deliver more services do not appear to achieve better health outcomes than those that deliver less. In fact, underuse, misuse, and overuse of various services often put patients in danger.

Equally important has been the unprecedented advances occurring within the communications and computer technology fields. Not that long ago, on April 27, 2004, then-President George W. Bush noted: “The way I like to kind of try to describe health care is, on the research side, we’re the best.... (W)hen you think about the provider’s side, we’re kind of still in the buggy era.... It’s like IT, information technology, hasn’t shown up in health care yet.... If properly used, it is

an industry-changer for the good. It enables there to be a better cost structure and better quality care delivered, in this case in the health field. And, yet the health care industry hasn’t touched it, except for certain areas By introducing information technology, health care will be better, the cost will go down, the quality will go up.” Today, it is becoming increasingly possible to systematically compare provider outcomes across diagnoses, patient populations, systems of care, and the longevity of patient lives. Those seeking to provide and pay for Quality Care are actively exploring the critical psychosocial-economic-cultural gradient of care which APA CEO Norman Anderson has been proposing for over a decade.

Within the political/health policy context, as former Mississippi resident (and now Practice Directorate Executive Director) Katherine Nordal has emphasized at State Leadership Conferences (SLC), change is here. “The clock is ticking towards full implementation of the law [ACA] and January 1, 2014 is coming quickly. But January 1st is really just a mile marker in this marathon we call health care reform. Many of our practitioners increasingly will need to promote the value and quality they can contribute to emerging models of care. Health care reform is a marathon – we’re in it for the long haul. New models of care and changes in health care financing won’t take shape overnight. For two years in a row at SLC our theme has been health care reform, and we’ve focused on the critical need for psychology to get engaged. We can’t hope to finish the marathon called health care reform if we’re not at the starting line. Fortunately,

many psychology leaders have embraced our call to action.”

Those of our colleagues who have gravitated to specialized fields such as forensic practice, organizational coaching, and providing integrated health services will do very well over the next decade. As former APA President Ron Fox has emphasized to the psychology-nursing Health Policy class I teach at the Uniformed Services University of the Health Sciences, although we may think that what we have learned during our extensive training is self-evident – it is not, and he assures the graduate students that they will be well respected as they advance in their chosen careers. Katherine also emphasizes that the individual States are now in the driver’s seat under the ACA and that local political/policy involvement is absolutely critical for the profession. The underlying statute and implementing regulations for two of the major ACA provisions, the Patient-Centered Medical Home and the Accountable Care Organization, do not expressly mention “psychology.” At last spring’s SLC Katherine highlighted your association’s impressive efforts to demonstrate psychology’s “value-add” under Medicaid and within interdisciplinary primary care settings, both of which are central to the ACA. Reflecting upon organized psychology’s highly emotional objections to President Clinton’s Managed Care initiatives, Blowin’ in The Wind readily comes to mind. “How many times must a man look up before he can see the sky?” We would suggest that “The answer my friend is....” – Within the 2010 IOM report “On the Future of Nursing: Leading Change, Advancing Health.”

Aloha,
Pat

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suspects to disclose information under interrogation [<http://www.nytimes.com/2009/08/12/us/12psychs.html?pagewanted=all&r=0>].

Within months, Mitchell was consulting to the CIA and laying a path toward its integration of the Air Force training in Survival, Evasion, Resistance, and Escape [SERE] that he and fellow psychologist Bruce Jessen had joined in developing in the 1980s, to support interrogations by the CIA and the US military. In coming months, many of the means of testing the defenses of American servicemen in training to confront the enemy in a post-Vietnam war, many of which had been seen as abusive or as torture when applied by the enemy, were to be applied to suspected terrorists at GTMO and at American military detention centers like Abu Graib and at top secret "black sites" in third world nations in order to wrest valuable information that might assist the American forces in the newly launched "War on Terror."

By April 2002 Mitchell Jessen & Associates [MJ&A] was hired by the CIA to introduce SERE techniques, including waterboarding, into the interrogation of Abu Zubaydah. Its board of directors included former APA President Joseph Matarazzo. Matarazzo later served on a 2009 CIA professional-standards board, at the time the interrogation program was set up.

[http://www.newyorker.com/reporting/2009/06/22/090622fa_fact_mayer?printable=true] MJ&A's first officially sanctioned U.S. torture interrogation, at a CIA "black site" in Thailand, resulted in various false leads, triggering a nationwide state of high alert. [<http://www.vanityfair.com/politics/features/2007/07/torture200707>]. APA member Scott Shumate, later a member of the APA's 2005 Psychological Ethics and National Security (PENS) Task Force, was present at the interrogation of Zubaydah.

Beginning in 2002, Larry James and Morgan Banks, APA members who would later appear on the PENS Task Force, were actively consulting on the role for psychologists in interrogations, and promoting the work of APA member John Leso in developing the Behavioral Science Consultation Teams [BSCTs] at GTMO. The BSCTs' interrogation methods included "noise as a form of psychological pressure; restricting 'resistant' detainees to no more than four hours of sleep a day; depriving them of 'comfort items' such as sheets, blankets, mattresses, and washcloths; and controlling their access to the Koran. "All aspects of the [detention] environment," they argued, "should enhance capture shock, dislocate expectations, foster dependence, and support exploitation to the fullest extent possible." [See pp. 30-31, http://imapny.org/medicine_as_a_profession/interrogationtorture-and-dual-loyalty.] A Department of Defense report in September 2003 called for BSCTs' introduction to detention operations in Iraq.

There is no information available as to the involvement of the APA in organizing or authorizing these activities. However, the APA board had formally taken an "emergency action" in 2002, in approving a Resolution on Terrorism [<http://www.apa.org/about/governance/board/01dec-bdminutes.aspx>] that advocated "at the congressional and executive levels for increased use of behavioral experts and behavioral knowledge in dealing with both the threat and impact of terrorism" and encouraged "increased support for behavioral research that will produce greater understanding of the roots of terrorism and the methods to defeat it, including earlier identification of terrorists and the prevention of the development of terrorism and its related activities."

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On May 5 of 2005, APA President Gerald Koocher wrote on the PENS listserv that such psychologists would promote "the protection of others (i.e., innocents) by contributing to the incarceration, debilitation, or even death of the potential perpetrator, who will often remain unaware of the psychologists' involvement." [<http://firedoglake.com/2009/04/28/how-apa-made-a-pact-with-dod-cia-over-torture-interrogations/>] This listserv's activity culminated in the assembly of a task force to prepare the 2005 PENS report. Its proceedings were held under unusually secretive conditions; their recommendations were developed at an unusually rapid pace, reportedly in a three-day meeting; the resultant report was adopted by the APA Board of Directors in emergency session to make the recommendations of the PENS Report into official APA policy before it was distributed to APA's Council of Representatives (COR) on July 4. Although scheduled to meet less than two months later, COR was not given an opportunity to review, discuss, and vote on the Report, an exception to standard procedure.

Questions had already arisen among APA membership regarding conflicts of interest among the task force members and the process behind and implications generated by the report. In his February 2006 *Monitor on Psychology* column, APA president Gerald Koocher condemned psychologists who were publicly critical of APA's policy on torture and the PENS Report: "A number of opportunistic commentators masquerading as scholars have continued to report on alleged abuses by mental health professionals." [<http://www.apa.org/monitor/feb06/pc.aspx>] Many psychologists construed this to mean that concerns regarding this policy and any identification of ethical misconduct with respect to issues associated with it were to be unwelcome to the leadership of the APA.

That same month, a United Nations report described GTMO detainee treatment as "torture"; the US military confirmed that it was using force-feeding and restraint chairs; *The Lancet*, Great Britain's leading medical journal, condemned the continued force-feeding at GTMO; and the US government insisted that a ban on torture need not apply to GTMO.

By summer 2006, both the American Medical Association and the American Psychiatric Association had come out against participation in interrogations as unethical behavior for their disciplines. Within a few weeks, despite mounting evidence that psychologists had participated in abusive interrogations at GTMO and elsewhere, APA Director of Ethics Stephen Behnke justified their active involvement in a public statement:

"[P]sychologists have unique training to fill the role of observing interrogations in order to guard against 'behavioral drift' on the part of interrogators. Behavioral drift, which may arise in high stress situations where there is insufficient ethical guidance or oversight, involves a deviation from professionally and ethically acceptable behavior and so may lead to coercive interrogation techniques. Psychologists, as experts in human behavior, are trained to observe and intervene to prevent behavioral drift. AMA, while allowing physicians to monitor interrogations, states that physicians may not, however, monitor interrogations 'with the intention of intervening.' This difference, which stems from psychologists' unique competencies, represents an important distinction between what role psychologists and physicians may take in interrogations and arises in the context of what social psychology has taught regarding the influence of setting on human behavior." [<http://www.apa.org/monitor/julaug06/interrogations.aspx>] (Behnke has not to my knowledge ever cited the APA accreditation criteria for graduate programs' inclusion of

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training in 'behavioral drift' assessment and intervention, nor its means of enforcing its effectiveness among graduates.)

The Coalition for an Ethical Psychology [CEP] formed in 2006 to mobilize diverse groups for the removal of psychologists from U.S. programs of torture and other detainee abuse. (Numerous papers and statements by the CEP can be found at <http://www.ethicalpsychology.org/resources/coalition.php>.) A listserv was established by psychologists who withheld their dues from the APA in a coordinated protest over its policy condoning psychologists' involvement in managing interrogations and detention centers. A year later the protest group was formalized as Psychologists for an Ethical APA [PEA]. A petition of 1,739 members standing thus "Against Psychologists' Participation in Interrogation of 'Enemy Combatants'" was presented to APA President Koocher. (I was signer #1,063.)

At the annual APA convention in summer 2006, its Council of Representatives rejected a proposed moratorium to prohibit psychologists from participating in interrogations at Guantanamo Bay and elsewhere. APA member and PENS Report participant Colonel Larry James was one who spoke out against the moratorium. James said he had "attended the conference not only for Joint Task Force (JTF)-Guantanamo, but also as a representative of the Army and the DoD since he was intimately involved in creating the policy used by BSCT psychologists who work within military detention facilities."

[<http://www.jtfgtmo.southcom.mil/storyarchive/2007/September/091307-1-BSCTteam.html>] Later during the convention, at a town meeting of several hundred APA members concerned with this issue, an APA official threatened to call security unless media representatives discontinued filming the meeting.

To be continued in our next issue.

The Maine Psychological Association presents

ICD Diagnosis and DSM Changes: A New Horizon

***Featured Speaker:
Carol Goodheart, Ed.D.***

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MePA Seeks Businesses and Organizations for Healthy Workplace Awards...

The Psychologically Healthy Workplace Awards Program was developed by the American Psychological Association to recognize organizations that make a commitment to programs and policies that foster employee health and well-being while enhancing organizational performance and productivity.

The Maine Psychologically Healthy Workplace Awards Program, with the support of the American Psychological Association, began in 2012. The awards program highlights a variety of workplaces, large and small, profit or nonprofit, from diverse geographical settings. Applicants are evaluated on their efforts in the following 5 areas:

- Employee involvement
- Work-life balance
- Employee growth and development
- Health and safety

Maine Psychologically Healthy Workplace award winners will be honored at the Maine Psychological Association Annual Meeting in November and announced to the media. They are also eligible to be nominated for the National Psychologically Healthy Workplace award and the Best Practices honors. Following a competitive evaluation and judging process, the top candidates are selected for national recognition by the APA. Award winners may be featured in the media and at a special award event, recognized by community leaders and nominated for national recognition.

If you know of a good candidate, contact Ron Breazeale at rlb@gwi.net or David Prescott at Prescott.d@husson.edu.

MePA Budget 2014

Income	
Dues	44,200
Convention	17,700
Ads/Website	1,000
Home CE	500
Grants	10,000
Donations	100
Misc	100
Record Registry	100
Total	74,700
Expenses	
Administration	40,400
Central Office	8,500
Advocacy/Lobbyist	9,700
Convention/CE	7,300
Website	2,400
Publications	100
APA Rep/Comm Travel	3,700
Insurance	1,200
Accounting	200
Legal	200
Total	74,700

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Continuing Education Events...

March 28, 2014. Eligibility, Diagnosis, and Team Decisions 10 Bailey Hall, USM Gorham Campus Presenter: Dr. Heather Alvarez

April 11, 2014 Formative Assessment Presenter: Dr. Theodore Christ
10 Bailey Hall, USM Gorham Campus

April 18, 2014: ICD Diagnosis and DSM Changes Carol Goodheart, EdD
Portland. Call 1/800-287-5065 for more information.

June 20, 2014: Ethics and Social Media in the Practice of Psychology
Rockland. For more information. www.baycounselingseminars.com

May 23, 2014 Positive Psychology
10 Bailey Hall, USM Gorham Campus Presenter: Dr. Rebekah Bickford