CONSUMER CONNECTION



THE NEW FIGHT NIGHT AFTER BLOW FROM COVID-19, PRO SPORTS GET UP OFF THE MAT-P.15



ALSO INSIDE:

GIRLS AND T AUTISM—P.4 0

THE POWER OF TOUCH—P.6 SHAPING A SAFER WORLD—P.18



GAVIN NEWSOM Governor

LOURDES M. CASTRO RAMÍREZ Secretary, Business, Consumer Services and Housing Agency

KIMBERLY KIRCHMEYER Director, Department of Consumer Affairs





C O N T E N T S

#AskDCA-P.2

Domestic Violence: You Can Make a Difference—**P.10**



Shaping a Safer World-P.18

Hiding in Plain Sight: Girls with Autism—**P.4**



Executive Spotlight-P.13



It's an Exciting Time to Be an Accountant—**P.21**

The Power of Touch-P.6



Making Mindfulness a Part of Your Life—**P.8**



3 Steps for Safety-P.17

COVER STORY: The Roar of No Crowd—P.15



Reach Out—**P.24**

Briefs-P.22



A S K D C A YOU HAVE QUESTIONS? WE'VE GOT ANSWERS!

Matt Woodcheke Consumer Connection staff

Got a question about your contractor, dentist, doctor, cosmetologist, or one of the many other professionals licensed and regulated by the Department of Consumer Affairs (DCA)? Maybe you'd like to know more about how DCA helps consumers make wise purchasing decisions by informing them about the laws that protect them? Now is your chance to ask!

Submit your question via email to **publicaffairs@dca.ca.gov** and it may be answered in a future issue of *Consumer Connection*.

Please note: We are not able to answer questions regarding the status of a license application, complaint, or investigation. Some questions have been edited for clarity or brevity.







I HAVE BEEN IN THE CARE OF A NATUROPATH. IS THIS THE SAME AS A NATUROPATHIC DOCTOR?

Although they sound similar, naturopath and naturopathic doctor are not interchangeable titles.

Naturopathic medicine is a distinct and comprehensive system of primary health care that uses natural methods and substances to support and stimulate the body's self-healing process. Only naturopathic doctors can practice naturopathic medicine (diagnose and treat), and the training and education required for licensure is comprehensive—naturopathic doctors must graduate from an accredited school with a graduate degree of doctor of naturopathy or doctor of naturopathic medicine, complete 4,100 hours of academic and clinical training, and pass a licensing examination.

A naturopath may not diagnose or treat and must provide a written disclaimer to their clients that they are providing unlicensed services.

Find out more from DCA's Naturopathic Medicine Committee at **https://naturopathic.ca.gov**, and check a professional's license at **https://search.dca.ca.gov**.



I THINK I WOULD LIKE TO SERVE ON A DCA BOARD. HOW DO I GET APPOINTED?

We're glad you asked! Serving on a board or bureau is a unique and interesting way you can give back to your community. And, if you're interested in meeting new people, making an impact, and increasing your knowledge, you just might be the candidate we're looking for.

Board or committee member opportunities vary from entity to entity, but opportunities most frequently include:

- **Professional member**—As a licensee of a board or bureau, your first-hand experience is extremely valuable and needed in the regulatory process.
- **Public member**—Representing consumers of licensed services, public board members make their voices heard on behalf of Californians as a whole.

The application process varies between different licensing entities, and DCA has a special site (**www.dcaboardmembers.ca.gov**) to help current and prospective board and committee members. If you have any questions or just want more details and information, be sure to reach out to the board or bureau of your choice for guidance—they're happy to help!



MY VETERINARIAN CLOSED AND I AM RE-ESTABLISHING WITH A NEW ONE, BUT MY PET HAS A COMPLICATED MEDICAL HISTORY. IS THERE ANY WAY TO GET MY PET'S RECORDS FROM MY OLD VET?

The Veterinary Medical Board (VMB) can help you. Every veterinary facility is required to maintain a current address of record. If the facility moves or closes down, VMB recommends you contact the Board for the most recent address of record, and then send a written request for a summary of your animal's records to that address. If there is no response, you should file a complaint with the Board at **www.vmb.ca.gov**.



MY ESTHETICIAN OFFERED TO REMOVE SKIN TAGS ON MY NECK. IS THIS SOMETHING ESTHETICIANS CAN DO?

No. Skin-tag removal is considered an invasive procedure that can only be performed by a licensed medical professional. Licensed cosmetologists, barbers, manicurists, estheticians, and electrologists have not received training in this type of service and are strictly prohibited from performing this service.

To find out more about the services provided by an esthetician, visit the Board of Barbering and Cosmetology's website at **www.barbercosmo.ca.gov**.



-3-

HEALTH

HIDING IN PLAIN SIGHT: GIRLS WITH AUTISM

EARLY DETECTION IS KEY FOR GIRLS TO LEARN HOW TO COPE

June Vargas

Consumer Connection staff

ere are some statements about autism spectrum disorder (ASD):

- About 1% of the world population has ASD.
- One out of every 68 children born in the United States is affected by ASD.
- Boys with ASD outnumber girls 4-to-1.
- More than 3.5 million Americans live with ASD.
- Autism is the fastest-growing developmental disability in the U.S.

Which of these statements is false? Hint: There are a lot more girls with ASD than you think.

It's not that girls don't count. It's that they're not being counted.

WHAT'S GOING ON?

Until a few years ago, scientists conducted autism research only on boys, which means all the diagnostic tests and published research on ASD are limited to male-centric behavior observations.

The result? On average, girls who have mild symptoms of autism are diagnosed two years later than boys. And that's fast: Many girls and their parents don't receive an ASD diagnosis until much later, usually after a string of misdiagnoses. Worse, some remain undiagnosed.

"The model that we have for a classic autism diagnosis has really turned out to be a male model," clinical neuropsychologist Susan F. Epstein, Ph.D., explained in an article for the Child Mind Institute. "So where the boys are looking at train schedules, girls might have excessive interest in horses or unicorns, which is not unexpected for girls. But the level of the interest might be missed and the level of oddity can be a little more damped down. It's not quite as obvious to an untrained eye." Even the doctors—who rely on published diagnoses and symptoms as a standard—have missed the signs when it comes to diagnosing girls. Kevin Pelphrey, a leading autism researcher at Yale University's Child Study Center, said he did not recognize the condition in his daughter, Frances, who was finally diagnosed at about 5 years old. Pelphrey's son, Lowell, who also has ASD, was diagnosed at 16 months. Their mom, Page, explained that while Lowell's diagnosis was fast, Frances was ferried from doctor to doctor, each of which blamed other, more physical maladies for her problem (including a rare eye disease) until she was properly diagnosed with ASD.

"We got a lot of different random little diagnoses," Page said. "They kept saying, 'Oh, you have a girl. It's not autism."

THE X FACTOR ISN'T A FACTOR

From the time ASD was defined by Leo Kanner in 1943, it was believed that ASD was more prevalent in boys than in girls. Staying within the male-centric hypothesis, scientists tried to explain the phenomenon by expounding that boys with ASD carried a defective piece of DNA on their X chromosomes; girls who had the mutation would not be affected since they carry a second X chromosome that would compensate for the deficiency.

Nice try, but not a good explanation—not entirely.

"I think the thinking is now moving more to the idea that women are protected, which I know sounds like two sides of the same coin, but it plays out in a different way," says Stephan J. Sanders, assistant professor of psychiatry at the University of California, San Francisco. Sanders says that, for some unknown reason, women can tolerate more mutations than men can, and so they need a bigger genetic hit to develop autism.

In 2012, girls with ASD were finally brought into the spotlight after the findings from a study published in the *American Journal of Human Genetics* proved the mutation hypothesis had a lot of merit.

"Once the genetics community became interested in [girls and ASD], it just absolutely took off," said Pelphrey.

GIRLS WEAR IT WELL

One of the major reasons girls are not diagnosed properly is that they're able to mask the behavior, at least until junior high school. A study by the Interactive Autism Network found that, unlike boys who tend to withdraw from the social spectrum, young girls remain social—they are able to mimic the behaviors of others in their social circle.

Paige Layle, a 19-year-old woman with ASD, says that's spot on. Layle, who did not receive the correct diagnosis until age 15, has posted a series of four myth-shattering, eye-opening videos on TikTok about girls and women like herself with ASD, and how hard it is to live with it, especially if you don't know you have it. Layle says, because she's a social butterfly, most people don't realize she has the disorder.

-4-

One of the major reasons girls are not diagnosed properly is that they're able to mask the behavior, at least until junior high school.

"I get that a lot, that because I'm good-looking, nothing can be wrong with me—so I want to show that mental illness is diverse," Layle told BuzzFeed news.

Layle's series of four videos begins with the initial malecentered ASD research. She moves from that to the discussion of low-functioning versus high-functioning, to common autistic traits shared among girls, and, in the final video, she talks about the ways girls are able to mask or pass by adopting mannerisms of those around them. Layle's masking habits: She's overly social, performs well in social situations, and uses too much eye contact—all of which directly contrast the stereotype that people with autism are antisocial.

PASSING ISN'T FOREVER

Masking or passing works well, but it's short-lived.

"Girls tend to get by," Dr. Epstein said. "They might not understand what's going on but they'll try to just go along and imitate what they see. And they may get away with it to third grade or fifth grade, but once they get to junior high and high school, it shows as a problem."

As they grow up, the carefully constructed web of behavior of girls with ASD breaks down. Girls with ASD will act less mature than girls of the same age, which makes it hard to maintain friendships. The social pecking order of teenage girls is not easy; being different opens the door for bullying, which can lead to depression, cutting, anorexia, and other serious, self-destructive behaviors that can become more dangerous if the real reason isn't diagnosed and addressed.

Case in point: Layle attempted suicide at age 15—and that's the reason she finally received the right diagnosis.

"I was an urgent case to talk to a special child psychiatrist who diagnosed me at the time with anxiety, depression, OCD, and autism," she said. "[The diagnosis] has changed my life for the better. I can understand myself so much better, which is so beneficial for social situations, school/ work life, and most importantly being alone. I can now function alone and understand my emotions better."

GET THE RIGHT DIAGNOSIS AS SOON AS POSSIBLE

Girls with ASD are hiding in plain sight. And, although research on girls with ASD has experienced a lot more interest in the past eight years, the majority of girls with ASD still suffer in silence: They are still misdiagnosed, or not diagnosed at all. When it comes to an ASD diagnosis, the earlier the better. Getting help—the correct help—at an early age can give them the tools they need to navigate the challenges that will come to them, as they come to all of us, throughout their lives.

For information and assistance regarding ASD, contact Department of Consumer Affairs' licensees with the Board of Psychology (**www.psychology.ca.gov**) and the Board of Behavioral Sciences (**www.bbs.ca.gov**); licensees of the Medical Board of California (**www.mbc.ca.gov**) and the Osteopathic Medical Board of California (**https://ombc.ca.gov**) can also specialize in psychiatry. To check a professional's license, visit **https://search.dca.ca.gov**. (**i**



HEALTH

THE POWER OF TOUCH PEOPLE INHERENTLY CRAVE PHYSICAL CONTACT

Michelle McVay-Cave Consumer Connection staff

umans are social beings. We like to gather in groups and touch in the form of handshakes, high-fives, hand-holding, or hugs. Physical touch is a basic form of nonverbal communication, and as social beings, humans have an innate desire and need for physical contact.

The ability to exercise this form of nonverbal communication has been adversely affected during the global pandemic. The threat of contracting COVID-19 has sparked an increased level of hyper-awareness about how to mitigate contracting the virus or spreading it to others. Through employing one of several effective tactics physical distancing—many are now experiencing skin (touch) hunger.

Skin hunger is not a new phenomenon. It is a term some researchers use to describe physical and mental-health consequences caused by a lack of human touch. Other effects caused by this form of social deprivation are increased stress levels, a weakened immune system, depression, anxiety, and inadequate sleep.

"Touch is the fundamental language of connection," said Dacher Keltner, a University of California, Berkeley psychology professor, in the April 10, 2020, issue of *TIME* magazine. According to Keltner, a lack of physical touch can affect people in more ways than they might realize.

For example, if you have a pre-existing medical condition such as diabetes, hypertension, or asthma, that disease becomes worse when you are more anxious, depressed, or if you have increased mental-health issues.

Physical touch, such as a hug, stimulates oxytocin—the "love hormone"—and increases serotonin—the "feel-good" hormone—in our brain. Both hormones are released when we experience social connection and physical contact, and they provide tremendous health benefits such as reducing stress, lowering blood pressure (thereby lowering the risk of heart disease), and alleviating anxiety.

While we're practicing physical distancing to stay safe, it is not clear when the novel coronavirus will subside and allow us to resume our previous, customary nonverbal gestures like handshakes and hugs. Some experts project that the evolving "new normal" of less contact will replace our former touch-based salutations.

In the interim, there are ways to satisfy the need to touch safely. A smile or grin, a nod, an elbow bump, or a wave are tactics that can help manage the craving for hands-on human connection.



Physical touch, such as a hug, stimulates oxytocin—the "love hormone"—and increases serotonin—the "feelgood" hormone—in our brain.

As a species, humans have proven to be resilient. We have endured and overcome more significant challenges than the formidable COVID-19 opponent we currently face. As long as we all work as a team, this, too, shall pass.

If you are experiencing feelings of anxiety or hopelessness during these times, talking to a professional licensed through the California Department of Consumer Affairs (DCA) and trained in behavioral or mental health may help. You can search for a provider and check their license status by using DCA's license search tool: https://search.dca.ca.gov.



HEALTH

MAKING MINDFULNESS A PART OF YOUR LIFE

MEDITATION CAN HELP WITH STRESS, DEPRESSION, AND POOR SLEEP

Ryan Jones Consumer Connection staff ife is stressful, especially these days. But many
 people are discovering pockets of calm amid the
 chaos through meditation.

Meditation is a way to train the mind. Much of the time, our minds are jumping around—we're contemplating the future, dwelling on the past, worrying, daydreaming, fantasizing. Meditating can help you leave behind distractions and more clearly focus on the present moment. It's free, takes no equipment, and you can do it almost anywhere (especially after some practice).

Proponents of meditation say practicing regularly can help with anxiety, depression, sleep issues, and chronic pain while promoting happiness.

There are many types of meditation, with most religions having some form of contemplative tradition, but mindfulness meditation (the two words are often used interchangeably) has grown increasingly popular in recent years. Mindfulness meditation was inspired by Buddhist practices but is now widely taught as fully secular, emphasizing stress reduction, developing greater focus, and creating mental tranquility.



There is no one right way. When you think of meditation, what comes to mind is likely someone in the lotus position, on a yoga mat or pillows, sitting on the floor. But experts emphasize that there is no one way to meditate. People sit in chairs or couches, or some prefer to lay flat on their back. What is most important is finding what works for you.

The goal isn't to stop thinking. What is more important with basic mindfulness meditation is paying attention to the present moment with an accepting, nonjudgmental outlook.

Andy Puddicombe, a former Buddhist monk who cofounded the digital mental health company Headspace based in Venice Beach, said people often start meditating with the wrong goals.

"It is not about stopping thoughts," he said while hosting a live meditation session online. "People get frustrated when their mind wanders instead of just recognizing that the nature of the mind is to wander and just acknowledge it ... and come back to the breathing or whatever the point of focus is."

Practice plus patience equals success. Experts say it's important for meditation beginners to not expect drastic results from the start. It's like learning any new skill: If you are learning to play the piano, it would be foolish to expect to sound like Mozart after a session or two. It's recommended to start with short meditation sessions of a minute or two and build to longer ones. There is no ideal time period—whatever duration works for you is the right one.

Set up a framework. Choose a quiet space in your home, meditation teachers say, and pick a time of day to use that space. Much like exercise, a routine can promote persistence when it comes to practicing. Another potential aid for those just starting are meditation apps that provide guidance until you figure out what works best for you.

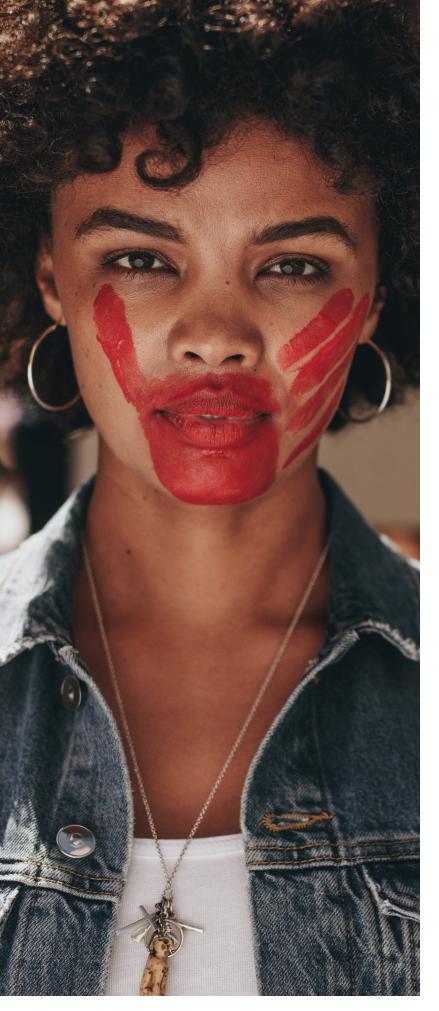
Here are six easy tips from *The New York Times* on how to have a successful meditation session:

- 1. Find a comfortable place to sit, and a posture that is both alert and relaxed at the same time. Make the spine erect without being too rigid.
- 2. Close your eyes (or leave them slightly open) and take a few slow breaths. Loosen your body from your head to your toes with a few more breaths.
- 3. Stop to notice the sensations throughout your body—the warmth, coolness, or any discomfort. Be aware of them but try not to fidget too much.
- 4. Pick one sensation—such as the feeling of your breath going in and out—and devote your attention to it. Just focus on that.
- 5. When your mind wanders (and it will), bring your attention back to the breathing. Notice your mind wandering and return your attention back to the present moment.
- 6. When you're ready—after one minute or 30—open your eyes. Feel better? Now try to bring your newfound mindfulness into the rest of your day.

Meditation is a way to train the mind.

While there is plenty of support for the benefits of mindfulness meditation, there is no guarantee it will help reduce your stress and anxiety or improve your sleeping habits. Anyone struggling with their mental health should consider seeing a professional.

The Department of Consumer Affairs licenses tens of thousands of mental health professionals through the Board of Psychology, the Board of Behavioral Sciences, the Medical Board of California, and the Osteopathic Medical Board of California. To check a professional's license, visit **https://search.dca.ca.gov**. (()



HEALTH

DOMESTIC VIOLENCE: YOU CAN MAKE A DIFFERENCE

FACTS, INSIGHTS, AND RESOURCES FOR CHANGE

Brady Oppenheim Consumer Connection staff

ne in four women. One in 10 men. Those are conservative estimates of Americans who have experienced domestic violence in their lifetimes, according to the U.S. Centers for Disease Control and Prevention (CDC). Domestic violence affects millions of individuals, regardless of marital status, sexual orientation, race, ethnicity, national origin, age, religion, education, or economic background.

But these Americans aren't just statistics: They are our friends, our neighbors, our co-workers ... and may even be us.

A PERVASIVE PROBLEM

The CDC defines domestic violence—also known as intimate partner violence—as "abuse or aggression that occurs in a close relationship." It can apply to current and former spouses and dating partners. Domestic violence can vary in its frequency and severity, and can range from one episode of violence that could have lasting impact to chronic episodes over multiple years. The CDC notes domestic or intimate partner violence typically exhibits these types of behavior:

- **Physical violence**, when a person hurts or tries to hurt a partner by hitting, kicking, or using another type of physical force.
- **Sexual violence**, such as forcing or attempting to force a partner to take part in a sex act, sexual touching, or a nonphysical sexual event (e.g., sexting) when the partner does not or cannot consent.
- **Stalking**, which is a pattern of repeated, unwanted attention and contact by a partner that causes fear or concern for one's own safety or the safety of someone close to the victim.

• **Psychological aggression**, defined as the use of verbal and nonverbal communication with the intent to harm another person mentally or emotionally or to exert control over another person.

And domestic violence doesn't only involve the couple in question; it also impacts our entire society, including:

- Children—KidsData.org, a program of the Lucile Packard Foundation for Children's Health, recently found an estimated 15.5 million U.S. children live in households in which physical domestic or intimate partner violence occurred. Children who are exposed to domestic violence—even if they are not the targets—are at increased risk for mental, physical, social, behavioral, and developmental problems. Child witnesses of domestic violence also are at higher risk of becoming abusers or victims later in life.
- Workplaces—According to *Forbes* magazine, nearly a quarter of employed women reported domestic violence had affected their work performance at some point in their lives. Each year, an estimated 8 million days of paid work is lost in the U.S. because of domestic violence, and domestic violence costs \$8.3 billion in employer expenses annually: a combination of higher medical costs (\$5.8 billion) and lost productivity (\$2.5 billion). In addition, the U.S. Bureau of Labor Statistics' most recent data show 42% of women murdered in the workplace are killed by family members/domestic partners.
- **Communities**—The U.S. Department of Justice notes that, while all races and ethnicities experience intimate partner violence, women of multiple ethnicities as well as American Indian/Alaska Native women experience the highest percentage of domestic violence, as do people who self-identify as lesbian, gay, or bisexual.

With so many being impacted by domestic violence in so many places and ways, it's up to all of us to be aware of this pervasive problem.

WHAT SIGNS SHOULD I LOOK FOR?

The University of Southern California's Suzanne Dworak-Peck School of Social Work offers seven domestic-violence warning signs you can watch for in your friends and loved ones:

- Isolation—Many abusers begin to exert control by systematically isolating their victims from friends and family. This control can be subtle in the beginning, but usually sets the stage for more severe abuse down the line. Early warning signs include having to ask permission before making plans or tiptoeing around the abusive partner's feelings or reactions.
- 2. Financial control—A partner can be financially abusive by controlling access to shared resources, creating dependency and making it harder for the victim to leave. People who are financially abused may have to ask their partners for allowances or relinquish their paychecks involuntarily. Some victims are even forced to quit their jobs or drop out of school.

Domestic violence affects millions of individuals, regardless of marital status, sexual orientation, race, ethnicity, national origin, age, religion, education, or economic background.

- 3. **Unexplained injuries**—Victims of physical abuse will likely show signs of injury—including bruises, cuts, scrapes, or even broken bones—but may try to explain them away or blame their own clumsiness. Victims may also display injuries in multiple stages of healing, unusual burns or patterns consistent with household objects, or defensive wounds on the forearms, palms, or bottoms of the feet.
- 4. Anxiety, depression, or post-traumatic stress disorder (PTSD)—When faced with a seemingly hopeless situation, many victims become anxious or depressed. Mental illness is one of the most common effects of domestic violence. What's more, the relationship between mental illness and domestic violence is cyclical: People, especially women, who suffer from mental illness are more likely to be abused than those who do not.
- 5. Low self-esteem—Gaslighting, or manipulating someone into questioning their experience of events, is a component of most abusive relationships. The resulting uncertainty can cause a person's self-esteem to plummet and rob them of decision-making power. Victims may feel that they do not deserve better than their current relationship, or that they cannot lead a functional life without their abuser.
- 6. **Substance abuse**—Substance abuse can be either a symptom of or contributor to domestic violence. Victims of abuse are nine times more likely to self-medicate with drugs and 15 times more likely to misuse alcohol than non-victims. On the other hand, the risk of domestic violence is higher in households where both partners misuse alcohol or drugs.
- 7. **Self-harm, suicidal ideation, or suicide attempts**—As a last resort, individuals may contemplate (or attempt) self-harm or suicide.

Observation and vigilance are tools to recognize signs of abusive situations and help victims get resources and the assistance they need.

HOW DO I HELP SOMEONE I CARE ABOUT?

If you believe someone close to you is being abused, it can be difficult to immediately know what to do. Your instinct may be to "save" them from the relationship, but it's not that easy. After all, there are many reasons why people stay in abusive relationships, and leaving one can be a very dangerous time for an individual. Abuse is about power and control, so one of the most important ways you can help a person in an abusive relationship is to consider how you might empower them to make their own decisions.

According to the National Domestic Violence Hotline, you can offer support and empowerment by:

- Acknowledging that they are in a very difficult and scary situation, be supportive, and listen. Let them know the abuse is not their fault. Reassure them that they are not alone and that there is help and support out there. It may be difficult for them to talk about the abuse. Let them know that you are available to help whenever they may need it. What they need most is someone who will believe and listen.
- **Being nonjudgmental.** Respect your friend or family member's decisions. There are many reasons why victims stay in abusive relationships. They may leave and return to the relationship many times. Do not criticize their decisions or try to guilt them. They will need your support even more during those times.
- If they end that relationship, continuing to be supportive of them. Even though the relationship was abusive, your friend or family member may still feel sad and lonely once it is over. They will need time to mourn the loss of the relationship and will especially need your support at that time.

- Encouraging them to participate in activities outside of the relationship with friends and family. Support is critical, and the more they feel supported by people who care for them, the easier it will be for them to take the steps necessary to be safe, away from their abusive partner.
- Helping them develop a safety plan. Create a safety plan for wherever they are in their relationship—whether they're choosing to stay, preparing to leave, or have already left.
- Encouraging them to talk to people who can provide help and guidance. Find a local domestic violence agency that provides counseling or support groups, or call the National Domestic Violence Hotline toll-free at (800) 799-SAFE (7233) to get a referral to one of these programs near you. If they have to go to an agency or assistance program, to the police, to court, or to a lawyer's office, offer to go along for moral support.
- Remembering that you cannot "rescue" them. Although it is difficult to see someone you care about get hurt, ultimately, they are the one who has to make the decisions about what they want to do. It's important for you to support them no matter what they decide, and to help them find a way to safety and peace.

IT'S UP TO ALL OF US

Remember that abuse is not the victim's fault, and help is available. Licensees of the Department of Consumer Affairs' (DCA) California Board of Behavioral Sciences and Board of Psychology, as well as licensees of the Medical Board of California and the Osteopathic Medical Board of California who specialize in psychiatry, are trained to provide counseling and services to those experiencing domestic abuse and those who care for them, and DCA's hundreds of thousands of health care licensees also stand ready to assist in times of need and crisis. For more information on DCA licensees, their specialties, and services, visit **www.dca.ca.gov**.

FREE PUBLIC RESOURCES FOR CALIFORNIANS EXPERIENCING DOMESTIC VIOLENCE

There are many resources available to people experiencing domestic violence and those who wish to help them. This list is a representative selection of various free, helpful government services and supports; however, if you need urgent assistance or believe you or someone you know is in immediate danger, contact the National Domestic Violence Hotline toll-free at (800) 799-SAFE (7233) or call 911.

- California Department of Corrections and Rehabilitation
 Office of Victim and Survivor Rights and Services—
 Victims of crime, family members of crime victims, or
 witnesses who testified against offenders can request
 to be notified of the release, death, or escape of their
 offenders: See "Victim Services" at www.cdcr.ca.gov.
- California LifeLine Program—This government benefit program provides discounted telephone services for eligible consumers to help them stay connected: Visit www.californialifeline.com.

- California Safe at Home Program—Run by the California Secretary of State's Office, Safe at Home provides free post office boxes and confidential mail-forwarding services for survivors of domestic violence, stalking, and sexual assault: See "Registries" at www.sos.ca.gov.
- Victim Notification Service (VINE)—Via local law enforcement agencies, VINE helps victims of crime obtain free, confidential information in English and Spanish about the custody status of their offenders: Select "California" at www.vinelink.com.
- California Victim Compensation Board (CalVCB)— CalVCB can help pay bills and expenses resulting from domestic violence and other violent crimes, such as income loss, medical and mental health treatment, relocation, and residential security: Visit https://victims.ca.gov.
- County Continuum of Care Coordinators—Most California counties have special coordinators working with the U.S. Department of Housing and Urban Development who can help with relocation assistance: See "Programs" at www.hudexchange.info.

E X E C U T I V E S P O T L I G H T

WILLIAM PRASIFKA MEDICAL BOARD OF CALIFORNIA



illiam Prasifka was appointed as the Department of Consumer Affairs' Medical Board of California (MBC) executive director this summer—a challenging yet vital time to join this statewide health care regulatory entity.

Prasifka leads MBC's mission-driven efforts to protect health care consumers through the proper licensing and regulation and vigorous, objective enforcement of the Medical Practice Act.

A native of California, Prasifka joined MBC after serving as the Medical Council of Ireland's chief executive officer for the past four years. Prior to leading the Medical Council of Ireland, which regulates the country's 23,000 physicians, he worked as the financial services ombudsman for Ireland's Financial Services Ombudsman Bureau, chief executive officer/chair of the Competition Authority (Ireland's statutory body responsible for the administration and implementation of competition law), and as a commissioner for the Commission for Aviation Regulation.

Prasifka is a 1984 graduate of New York's Columbia University School of Law and a 2018 graduate of the Harvard Kennedy School of Government. He has 12 years' experience leading law firms in both Ireland and the U.S.

We recently spoke with him about his background and his new role with MBC.



WHAT ARE SOME OF YOUR BEST MEMORIES OF YOUR JOBS PRIOR TO THIS ONE?

The best memories are of the people that I have had the pleasure of working with over the years. I have a background in working with the public sector and I have always taken a lot of satisfaction from knowing that I have worked at jobs where we have made a difference. When I was in Ireland, we made considerable progress in advancing the cause of white-collar criminal enforcement, and it was a tremendous service to the public.



WHAT IS YOUR VISION FOR THE BOARD?

My vision for the Medical Board of California is to continue its mission of consumer protection and find creative ways to streamline the Board's approach to the enforcement cases it handles on behalf of consumers. We need to efficiently deal with each case in the most effective way, while staying true to our mission of consumer protection.



WHAT IS YOUR BIGGEST CHALLENGE?

The biggest challenge is to ensure that the focus of the Board remains on its core mission: licensing physicians and certain allied health care professionals, adjudicating complaints, and enforcing the law.



WHAT WOULD YOU LIKE CONSUMERS TO KNOW ABOUT THE BOARD?

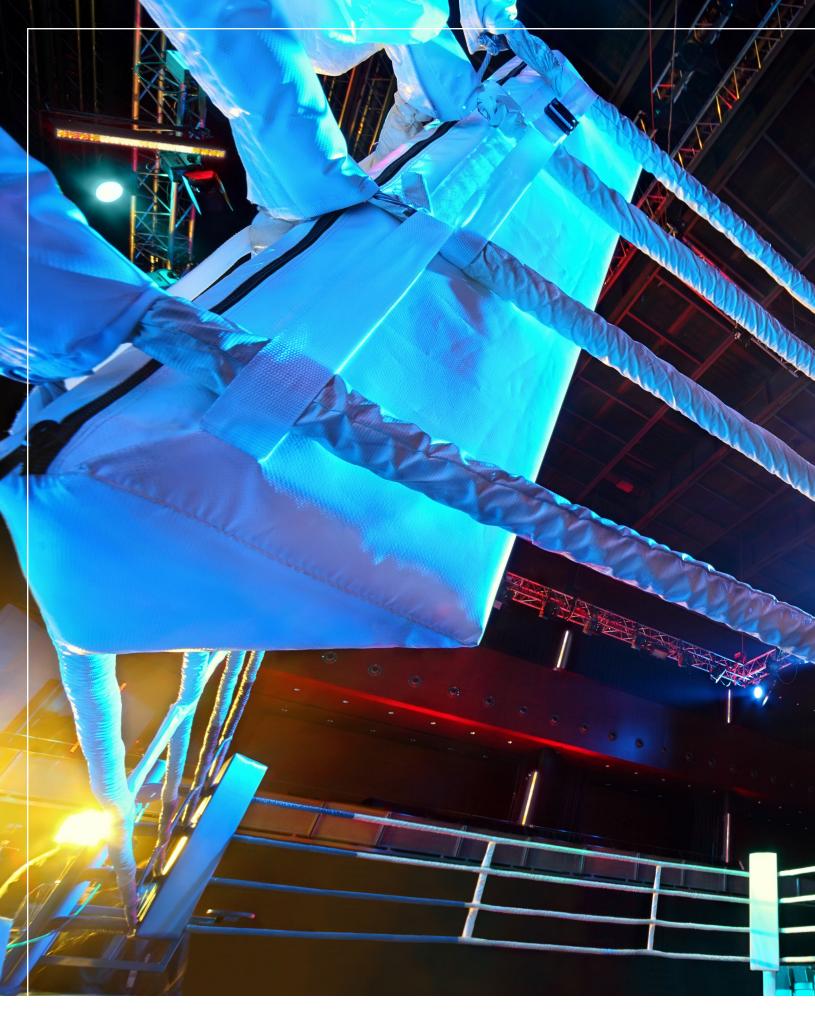
Our primary focus is consumer protection. We aim to be as consumer-friendly as possible in an atmosphere of mutual respect. We are here to work with consumers to improve patient safety and are open to constructive ideas on how to meet our mission.



WHAT ADVICE WOULD YOU GIVE TO YOUR YOUNGER SELF?

In terms of your career, I would say to trust your principles and remain focused on them. Let your principles guide you in terms of what decisions you make, whether it's in a personal capacity about what jobs you want to take or in terms of actually doing your job. (()

- 13 -



COVER STORY

THE ROAR OF NO CROWD

COMBAT SPORT PARTICIPANTS FEED OFF THE ENERGY OF SPECTATORS. HERE'S HOW THEY'RE ADJUSTING TO LIFE WITHOUT IT.

Matt Woodcheke Consumer Connection staff **T** t's July 24, 2020—fight night at Fantasy Springs Casino in Indio. And it's a big one: More than four months after the COVID-19 pandemic forced the cancellation of all combat sporting events in California, boxing is back, but not in a way you've ever seen it before.

Gone are the thousands of cheering fans. Instead, Shane Mosley Jr., fighting Jeremy Ramos in the co-main event bout, is making his debut for promoter Golden Boy in a virtually empty arena.

"When you're walking out, normally you get the crowd response and you have to shut it out," Mosley said. 'But to get the initial call and nobody says anything. ..."

KEEPING A ROUTINE

In mid-March, as COVID-19 took hold across the country, California Governor Gavin Newsom issued the nation's first stay-at-home order to slow the spread of the virus.

"Gyms were shut down," recalled Mosley. "But when you grow up with a father like mine (boxer "Sugar" Shane Mosley, who held multiple world championship titles in three weight classes), you learn that you don't need to go to a gym: The world is your gym.

"I have a good team and we were being consistent on training throughout the pandemic. I would run outside or work out in my garage. When gyms were able to reopen, we had to wear a mask and limited sparring. We just did what we had to do."

EARLY CHANGES

For Mosley and other fighters on the card that night, the changes to the process were evident two days before the fight. In order to comply with the California State Athletic Commission's (CSAC) emergency regulations governing the return of combat sports while the pandemic still raged, all participants in the event—from boxers and trainers, to CSAC judges and referees, to event and promotional staff—had to undergo COVID-19 testing protocols prior to entering the "quarantine bubble" of the event. Instead of flying in on Thursday, the day of the weigh-in, fighters and their teams arrived Wednesday afternoon to submit to testing and isolation.

"As soon as we checked in, we went to see the doctor who did the COVID-19 test: the nose swab," Mosley told *Consumer Connection.* "From that room, we went right into isolation in our rooms all the way through to the weigh in, which was the next morning at 11."

"We're not used to checking in and going right into isolation. Usually I can talk to my coaches and set a game plan. Instead I was doing jumping jacks in my room the night before the weigh-in."

Mosley's COVID-19 test results came back negative the morning of the weigh-in, but the test for a veteran trainer on another fighter's team came back positive. Although a subsequent test came back negative, CSAC's emergency regulations prohibited the trainer from attending the event.



FINDING THE HYPE

Prior to the match, fighters take part in the weigh-in, which helps to ensure a fair fight. Weigh-ins also provide an opportunity for a classic photo opportunity: standing noseto-nose with fists at the ready, and maybe a little trash talk to stoke the fire.

During the pandemic, much of the pageantry has gone out the window.

"We had to stand six feet apart from each other at the weigh-in," Mosley said. "I was six feet apart from my opponent, 6 feet from my coach, and so on. Even though everyone there had a negative COVID-19 test, we still couldn't be close to each other."

For another 24 hours after the weigh-in, fight teams remained in isolation in the hotel. Even on fight night, teams maintained physical distancing from other teams in their dressing rooms until the last minute.

Finally, the event began, and that's when it got exceptionally weird, Mosley said.

"Normally, I have to tune some of the audience out, stay focused, and not get distracted by the crowd," he said "But here, there was only a handful of people in the arena, so I had to do the reverse. I had to create that hype in my head."

At the bell, Mosley says it took some time for the fight to become real.

"To be honest, it was a bit like sparring (practice) at first," he said. "I had to remind myself a little bit that 'I'm in a fight right now.' But once you get hit with a few shots, that goes out the window. You have to be actively conscious of the guy in front of you who's trying to take your head off.

"It was more natural when we got into the meat of the fight, after the first round, but even then, when I would land a good shot, I didn't have the 'oohs' and 'ahs' from the crowd to get me riled up a little."

VICTORY AT HAND

Mosley's fight against Ramos went the distance—six rounds—and in the end he was victorious, winning by unanimous decision. He credits his success, and the success of the event, in part to CSAC's emergency regulations and the strict protocols put in place to slow the spread of COVID-19.

"It made us feel safe: It was different from what we're used to, but I would rather have that situation and make the adjustment so that I can fight than have no fight at all," he said.

And Mosley is already looking forward to his next fight.

"There was a lot of excitement for me, and because it was the first fight back, maybe a lot of people watched me because of that," he said. "I keep my fingers crossed and stay as active as possible so when I get the call for a fight, I'm ready to rock and roll."

For more information on CSAC's emergency regulations and to learn more about the Commission's mission, licensure, and services, visit **www.dca.ca.gov/csac**. (()

ᡐ H E A L T H

3 STEPS FOR SAFETY

SLOW THE SPREAD OF THE CORONAVIRUS IN CALIFORNIA

These three small steps will make a big difference:

- For our health—Save countless lives through prevention.
- For our economy—Help businesses reopen, and employees return to work.
- For our future—Get our Golden State going again.





WEAR A MASK

FACE COVERINGS KEEP THE CORONAVIRUS FROM SPREADING.



WASH YOUR HANDS

WASHING WITH SOAP AND WATER FOR 20 SECONDS KILLS THE CORONAVIRUS.



KEEP YOUR DISTANCE MAINTAIN 6 FEET BETWEEN YOURSELF

MAINTAIN 6 FEET BETWEEN YOURSELF AND OTHERS.

M A S K S O N D C A

#3SMALLSTEPS #SLOWTHESPREAD

SHAPING A SAFER WORLD

NEW DESIGN CHALLENGES FOR PUBLIC SPACES

Cheri Gyuro

Consumer Connection staff

S haring public spaces has taken a 180-degree turn into a world of the unknown. We've gone from zero to 100 when it comes to immediate changes needed for building design, and architects are scrambling to find ways to help slow the spread of the novel coronavirus (COVID-19).

While many cities go back and forth between opening, closing, and opening businesses again, the threat of a COVID-19 resurgence lingers. If navigating through the economic hardships during this pandemic wasn't enough, employers, businesses, and schools have been struggling to create safe spaces for people. They're hoping architects can be their building heroes.

The structures we're returning to have not been designed with physical distancing in mind. Wider hallways, distanced workstations, and touchless doors are now being utilized to minimize the risk of contracting coronavirus or any other deadly communicable disease.

Architects across the United States have been focusing on infection control when rendering new designs. They're working on layouts for a new approach to sanitation, health, and safety. They will also start implementing retrofits for small buildings, school campuses, high-rises, and skyscrapers to limit occupants' exposure to diseases.

"At a minimum, we will see protective plexiglass dividers that will still allow visual openness, but greater health protection. Also, we will revisit HVAC [heating, ventilation, and air conditioning] system design to help prevent any future spread of viruses," said Robert Chase, an architect consultant with the Department of Consumer Affairs' California Architects Board.

Opening doors and washing hands require multiple people to touch the same surfaces over and over within a short amount of time. This fundamental flaw in building design makes popular areas a perfect breeding ground for germs and viruses. The pandemic has prompted requests for new building codes by public health officials. Rethinking technology will be necessary to keep people from spreading viruses.

Redesigning buildings after an epidemic or pandemic is nothing new. During the 1918–1923 Spanish flu pandemic,



Architects across the United States have been focusing on infection control when rendering new designs. They're working on layouts for a new approach to sanitation, health, and safety.

the need to cut down on crowded spaces prompted more outdoor parks and demands for hospitals and buildings to comply with strict hygiene practices. This included building rooms to isolate highly contagious patients. Additional windows became an integral part of building design to provide ample exposure to outdoors and sunlight that helped slow the spread of infection.

Now, architects have been working around the clock to reinvent the process of building sanitary spaces.

A REDEFINED WORKPLACE

With the "open office" becoming a thing of the past, architects are now designing "deep-work chambers." The original intent for this concept was to change the cubicle workspace into areas that cut down on interruptions and noise so employees can concentrate more. Now, with health risks in mind, this idea is bringing forth proposed spaces that are isolated. There will be at least 6 feet of separation between co-workers and their potential germs, and, in some cases, would be completely enclosed for protection.

As working from home becomes the new norm, some people will start coming into the office on a rotating basis. With this concept, there is less need for office space. The idea is to have one space used for several employees— "plug and work," so to speak. At the end of the day, the worker would grab their things and go. The design would be simple and easy to clean and sanitize between each use.

BATHROOMS

Many buildings already have touchless toilets, soap dispensers, faucets, and paper towel dispensers, but they often fail. Upgrading hands-free technology will be needed as well as adding more features to improve hygiene. Many architects are looking into self-cleaning stalls and sinks, and local governments are considering strict requirements for bathroom attendants to give more attention to sanitizing



surfaces. Improvements with technology can also help with touchless door opening and button use.

"We will see a completely hands-free operation of all elements. Doors can be set up to allow a foot to open them. And again, greater filtration in our HVAC systems," said Chase.

SCHOOL CAMPUSES AND CLASSROOMS

The Centers for Disease Control and Prevention has posted a list of suggested guidelines on its website for schools to follow. These suggestions would help protect students, teachers, administrators, and staff to slow the spread of COVID-19. Modified layouts inside the classroom suggest separating students 6 feet apart. Some architects are taking this a step further by designing separators and sneeze guards made of plexiglass for an extra layer of protection with teachers and students still visible.

The open-air classroom was launched in the early 1900s during the tuberculosis plague: a concept that is now being revisited with modifications. A "classroom in a box" has been proposed that would use a modular or an old cargo train car where sides of the structure can be lifted or removed, allowing airflow. The desks can be portable, with each having their own ground pad for when the weather is nice enough to go outside.

A NEED TO EXPAND AND CONTRACT

Many communities had a desperate need for more hospital beds when COVID-19 cases peaked. Separating patients with symptoms from ones without also posed a challenge. Architects and engineers have been working on designing a sufficient system for hospitals. One idea includes producing temporary hospital spaces that meet all standards. These modules can be assembled in 14 days or less, then disassembled when not needed.

REPURPOSING OUR PLACES

With millions of Californians now working from home, all the telecommuting could result in empty buildings and the devastation of many local economies. Communities are looking into reusing structures that once held thousands of people during work hours. Architects and engineers are working on plans to reconfigure spaces with meaningful designs to meet critical needs.

"There is more discussion about using these types of buildings for housing, particularly affordable housing, and particularly if they are on bus lines or near affordable housing," said Chase.

Empty spaces can also be used to increase access to medical facilities and to build schools with safety and physical distancing in mind.

Redesigning and repurposing structures during the pandemic might not be enough to spark a new architectural era, but in a few short years, new concepts and innovative safety guidelines could result in building designs never seen before.

If you are looking to hire a professional to build a new structure or retrofit an existing one to meet today's safety needs, you can check if they have a valid license. For an architect, engineer, or contractor, visit https://search.dca.ca.gov. (()



IT'S AN EXCITING TIME TO BE AN ACCOUNTANT PROFESSION EMBRACING ADVANCES IN TECHNOLOGY

Lana K. Wilson-Combs

Consumer Connection staff

or years, there has been a prevailing notion that being an accountant is one of the most boring jobs on the planet.

However, the "old boring accountant" stereotype is just that: a stereotype. According to an April 2019 *Forbes* article, the future of accountancy looks bright and, now more than ever, it's an exciting time to become an accountant. Why?

Today, a new generation of accountants who were once thought to be replaced by technology, are adapting and embracing—the technological advances and developing new skillsets. The accountancy field has also become more diversified and is now expected to be one of the largest-growing and sought-after professions over the next 10-15 years. The U.S. Bureau of Labor Statistics also reports that the top five states for growth in the accounting profession will be California, Texas, New York, Florida, and Pennsylvania.

How does this benefit consumers? First, you have to consider who the consumers are: They are individuals, small businesses, large companies, banks, governmental bodies, and more. As these "consumers" increase, the need for accounting professionals must meet the demand.

The Department of Consumer Affairs' California Board of Accountancy (CBA) regulates the accounting profession primarily through its authority to license. The Board currently regulates over 108,000 licensees—the largest group of licensed accounting professionals in the nation, including individuals and accounting firms.

CBA's responsibilities include:

- Qualifying California candidates for the Uniform Certified Public Accountant (CPA) Examination.
- Issuing and renewing licenses of CPAs and accounting firms.
- Receiving and investigating complaints.

- Taking enforcement action against licensees for violations of CBA laws, including violations of professional standards.
- Ensuring licensees are in compliance with continuing education requirements.

REQUIREMENTS FOR BECOMING A CPA

Licensing CPAs helps safeguard consumers by ensuring only qualified licensees practice public accountancy in accordance with established professional standards. Becoming a CPA is a thorough and comprehensive process.

Individuals seeking to become a CPA in California must successfully complete examinations, obtain the required education, and meet the accounting experience requirement. These are the requirements for CPA licensure in California:

- **Complete the Uniform CPA Examination**—The Uniform CPA Examination (CPA Exam) consists of four sections: auditing and attestation, business environment and concepts, financial accounting and reporting, and regulation. The test consists of multiple-choice questions, simulations, and written communications. Each section is four hours and an individual must pass all four sections within an 18-month period.
- Meet education requirements—The education requirements to qualify for the CPA Exam include the completion of a bachelor's degree or higher with 24 semester units in accounting subjects and 24 semester units in business-related subjects.
- Obtain accounting experience—Accounting experience is also a core requirement of the licensure process. Applicants are required to have 12 months of accounting experience in either public or nonpublic accounting. Applicants must complete their experience under the supervision of an actively licensed CPA. Applicants can obtain their qualifying experience in a wide range of areas like accounting, attest, tax, and financial advisory, to name a few. There are additional requirements for individuals seeking the authority to sign attest engagements. California's laws also allow for an applicant to obtain experience in academia.
- Pass the Ethics Examination—Future licensees must also pass the California Professional Ethics Exam. This exam provides comprehensive coverage of the American Institute of Certified Public Accountants Code of Professional Conduct, the California Accountancy Act, and accounting rules and regulations.

Once qualified, CPAs are required to meet continuing education requirements to renew their license every two years. The continuing education helps make sure licensees are meeting necessary competencies to safely provide services to consumers.

For more information on how to become a CPA, log on to **www.dca.ca.gov/cba**. **((**





RESO CALIF

RESOURCES TO HELP CALIFORNIA BUSINESSES 'OUTSMART DISASTER'

Is your business prepared for a natural disaster? It's a question you might not want to think about, but in a state that experiences its share of wildfires, earthquakes, mudslides, and—now—viruses, it's something owners of small- and medium-sized businesses are being forced to consider.

Fortunately, there's help: The Outsmart Disaster campaign is a joint effort between the California Business, Consumer Services and Housing Agency (BCSH) and the California Academy for Economic Development that focuses on giving small- and medium-sized businesses the resources they need to adequately prepare for and recover from all types of disasters.

"When disruptions occur because of natural disasters, it's important for you to get back in business as quickly as possible," said BCSH Secretary Lourdes Castro Ramírez. "It's important for your livelihood, your community, and for the vitality of our local economy. The Outsmart Disaster training program will teach you how to do just that."

Here are some of the resources offered by Outsmart Disaster:

- The Resilient Business Challenge—This virtual, selfguided process is composed of five steps. Each step covers a different topic and includes assessments, materials, training, and processes to help your business become more resilient.
- **The Resiliency Toolkit**—The toolkit contains a list of key resources compiled by Outsmart Disaster experts to help your business prepare for a wide range of scenarios.
- Resiliency resources for your home and your community—Access information about preparing your home and community for disaster, from how to secure large appliances to backing up your electronic data to creating a disaster plan for your family.

For more information, visit **www.OutsmartDisaster.com**.

GET QUALITY SLEEP WITH THESE EASY TIPS

Roughly one-third of adults in the United States get less than the seven hours of sleep recommended for optimal health, according to the Centers for Disease Control and Prevention.

And beyond the obvious effects of sleep deprivation like fatigue, being less productive, and general grumpiness, a mounting body of evidence links sleeping too little to cardiovascular disease.

The National Sleep Foundation offers these tips for longer, deeper sleep:

- Go to sleep and wake up at the same time every day, including weekends. It's important for your body to have a regular sleeping schedule.
- Set a relaxing bedtime routine, such as listening to calming music, reading, or taking a bath.
- Make sure your bedroom is cool. Your body temperature naturally decreases to initiate sleep. A bedroom temperature between 60 and 67 degrees is optimal.
- Make sure your bedroom is quiet. Turn off noisy distractions such as a TV. Silence unwanted noise with earplugs or use "white noise," such as from a fan, sound machine, or an app.
- Make sure your bedroom is dark and avoid "blue light" from TVs, phones, tablets, and other devices before you go to bed.
- Sleep on a mattress and pillows that are comfortable and supportive. No one type of either is best for everyone.
- Finish eating meals at least a few hours before bedtime.
- Try to limit how many caffeinated products you consume in the afternoon.
- Alcohol and nicotine can cause restlessness—avoid them close to bedtime.







Due diligence is critical before hiring a contractor. Consumers are encouraged to get references, then actually speak with those homeowners and visit the projects if possible.



HOW A LITTLE HOMEWORK CAN SAVE YOU FROM FINANCIAL DISASTER

When it comes to protecting yourself from a scam artist, research counts, according to the Contractors State License Board (CSLB). Property owners who fell victim to wildfires across California over the past few years and are now trying to rebuild are especially at risk.

"Homeowners should remember to check the license before hiring a contractor. It takes only seconds to perform an Instant License Check and it will save you time and money in the long run," said Kevin Durawa, a spokesman with CSLB.

Due diligence is critical before hiring a contractor. Consumers are encouraged to get references, then actually speak with those homeowners and visit the projects if possible. It's also important to check local court and building records. You should be aware of the importance of not paying for parts of a job before it's finished to your satisfaction.

"Disasters can attract fraudulent contractors who are looking to take advantage of consumers who are at their weakest and quickly trying to rebuild their lives," said Durawa.

CSLB has a list of 10 tips for consumers when searching for a contractor: Visit **www.cslb.ca.gov**, then click the "Resources" tab at the top of the page and go to "CSLB Publications."

Taking a few seconds to check the license and a few hours to do some homework could mean saving yourself a lifetime of additional financial disaster. Visit the Department of Consumer Affairs' license-search site at **https://search.dca. ca.gov** to find licensed contractors and other professionals.



KNOW YOUR RIGHTS UNDER THE GENDER TAX REPEAL ACT

Passed in 1995, the California Gender Repeal Act prohibits certain businesses from discriminating based on a person's gender for prices of similar or like-kind services.

Bill author Sen. Jackie Speier's research at the time found that adult women effectively pay a "gender tax"— the additional amount paid for similar goods and services due to gender-based discrimination in pricing—costing each woman approximately \$1,351 annually, or about \$15 billion for all women in California.

To address this discriminatory discrepancy, the act requires barbers and hair salons, tailors or businesses providing aftermarket clothing alterations, and dry cleaners and laundries to clearly and conspicuously disclose to customers in writing the pricing for each standard service provided.

Businesses must also provide customers with complete written price lists upon request and must display at least one sign in a conspicuous place stating:

California law prohibits any business establishment from discriminating, with respect to the price charged for services of similar or like kind, against a person because of the person's gender. A complete price list is available upon request.

While the act prohibits different service prices based on gender, it doesn't prohibit price differences based on the amount of time, difficulty, or cost of providing the services.

So, the next time you visit a dry cleaner, a tailor, or a barber or salon, remember your rights to fair and nondiscriminatory pricing under the Gender Tax Repeal Act.

BRADY OPPENHEIM





REACH OUT

The Department of Consumer Affairs (DCA) protects and serves California consumers while ensuring a competent and fair marketplace. DCA accomplishes this by administering more than 3.5 million licenses in more than 280 license types, including permits, certificates, and registrations through the licensing and regulatory entities under its jurisdiction.

DCA provides consumers with current license status information on the millions of professionals licensed or certified through its entities. To check professionals' licenses, visit **http://search.dca.ca.gov**. To report concerns about a licensed professional or to find out more about a profession, contact one of the many DCA entities listed below.

ACCOUNTANCY, CALIFORNIA BOARD OF

2450 Venture Oaks Way, Suite 300 Sacramento, CA 95833 (916) 263-3680 www.dca.ca.gov/cba

ACUPUNCTURE BOARD

1747 North Market Blvd., Suite 180 Sacramento, CA 95834 (916) 515-5200 **www.acupuncture.ca.gov**

ARBITRATION CERTIFICATION PROGRAM

1625 North Market Blvd., Suite N-112 Sacramento, CA 95834 Toll-free: (800) 952-5210 (916) 574-7350 www.dca.ca.gov/acp www.lemonlaw.ca.gov

ARCHITECTS BOARD, CALIFORNIA

2420 Del Paso Road, Suite 105 Sacramento, CA 95834 (916) 574-7220 **www.cab.ca.gov**

ATHLETIC COMMISSION, CALIFORNIA STATE

2005 Evergreen St., Suite 2010 Sacramento, CA 95815 (916) 263-2195 TTY: (800) 326-2297 www.dca.ca.gov/csac

AUTOMOTIVE REPAIR, BUREAU OF

10949 North Mather Blvd. Rancho Cordova, CA 95670 Toll-free: (800) 952-5210 **www.bar.ca.gov**

BARBERING AND COSMETOLOGY, BOARD OF

2420 Del Paso Road, Suite 100 Sacramento, CA 95834 Toll-free: (800) 952-5210 www.barbercosmo.ca.gov

BEHAVIORAL SCIENCES, BOARD OF

1625 North Market Blvd., Suite S-200 Sacramento, CA 95834 (916) 574-7830 **www.bbs.ca.gov**

CANNABIS CONTROL, BUREAU OF

Mailing address: P.O. Box 419106 Rancho Cordova, CA 95741-9106 Toll-free: (833) 768-5880 www.bcc.ca.gov

CEMETERY AND FUNERAL BUREAU

1625 North Market Blvd., Suite S-208 Sacramento, CA 95834 (916) 574-7870 Toll-free: (800) 952-5210 **www.cfb.ca.gov**

CHIROPRACTIC EXAMINERS, CALIFORNIA BOARD OF

901 P St., Suite 142A Sacramento, CA 95814 (916) 263-5355 Toll-free: (866) 543-1311 www.chiro.ca.gov

CONTRACTORS STATE LICENSE BOARD

9821 Business Park Drive Sacramento, CA 95827 (916) 255-3900 Toll-free: (800) 321-2752 www.cslb.ca.gov

COURT REPORTERS BOARD OF CALIFORNIA

2535 Capitol Oaks Drive, Suite 230 Sacramento, CA 95833 (916) 263-3660 Toll-free: (877) 327-5272 (877-3ASKCRB) **www.courtreportersboard.ca.gov**

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550 Sacramento, CA 95815 (916) 263-2300 Toll-free: (877) 729-7789 **www.dbc.ca.gov**

DENTAL HYGIENE BOARD OF CALIFORNIA

2005 Evergreen St., Suite 2050 Sacramento, CA 95815 (916) 263-1978 **www.dhbc.ca.gov**

HOUSEHOLD GOODS AND SERVICES, BUREAU OF

4244 South Market Court, Suite D Sacramento, CA 95834 (916) 999-2041 **bhgs.dca.ca.gov**

LANDSCAPE ARCHITECTS TECHNICAL COMMITTEE

2420 Del Paso Road, Suite 105 Sacramento, CA 95834 (916) 575-7230 **www.latc.ca.gov**

MEDICAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1200 Sacramento, CA 95815 (916) 263-2382 Toll-free: (800) 633-2322 www.mbc.ca.gov

NATUROPATHIC MEDICINE COMMITTEE

1300 National Drive, Suite 150 Sacramento, CA 95834 (916) 928-4785 **www.naturopathic.ca.gov**

OCCUPATIONAL THERAPY, CALIFORNIA BOARD OF

1610 Arden Way, Suite 121 Sacramento, CA 95815 (916) 263-2294 **www.bot.ca.gov**

OPTOMETRY, CALIFORNIA STATE BOARD OF

2450 Del Paso Road, Suite 105 Sacramento, CA 95834 (916) 575-7170 Toll-free: (866) 585-2666 **www.optometry.ca.gov**

OSTEOPATHIC MEDICAL BOARD OF CALIFORNIA

1300 National Drive, Suite 150 Sacramento, CA 95834 (916) 928-8390 **www.ombc.ca.gov**

PHARMACY, CALIFORNIA STATE BOARD OF 2720 Gateway Oaks Drive, Suite 100 Sacramento, CA 95833 (916) 518-3100 www.pharmacy.ca.gov

PHYSICAL THERAPY BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1350 Sacramento, CA 95815 (916) 561-8200 **www.ptbc.ca.gov**

PHYSICIAN ASSISTANT BOARD

2005 Evergreen St., Suite 2250 Sacramento, CA 95815 (916) 561-8780

www.pab.ca.gov

PODIATRIC MEDICAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1300 Sacramento, CA 95815 (916) 263-2647 **www.pmbc.ca.gov**

PRIVATE POSTSECONDARY EDUCATION, BUREAU FOR

1747 North Market Blvd., Suite 225, Sacramento, CA 95834 (916) 574-8900 Toll-free: (888) 370-7589 **www.bppe.ca.gov**

PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS, BOARD FOR

2535 Capitol Oaks Drive, Suite 300 Sacramento, CA 95833 (916) 263-2222 Toll-free: (866) 780-5370 **www.bpelsg.ca.gov**

PROFESSIONAL FIDUCIARIES BUREAU

1625 North Market Blvd., Suite S-209 Sacramento, CA 95834 (916) 574-7340 **www.fiduciary.ca.gov**

PSYCHOLOGY, CALIFORNIA BOARD OF

1625 North Market Blvd., Suite N-215 Sacramento, CA 95834 (916) 574-7720 Toll-free: (866) 503-3221 **www.psychology.ca.gov**

REAL ESTATE APPRAISERS, BUREAU OF

3075 Prospect Park Drive, Suite 190 Rancho Cordova, CA 95670 (916) 552-9000 **www.brea.ca.gov**

REGISTERED NURSING, BOARD OF

1747 North Market Blvd., Suite 150 Sacramento, CA 95834 (916) 322-3350 TTY: (800) 326-2297 www.rn.ca.gov

RESPIRATORY CARE BOARD OF CALIFORNIA

3750 Rosin Court, Suite 100 Sacramento, CA 95834 (916) 999-2190 Toll-free: (866) 375-0386 **www.rcb.ca.gov**

SECURITY AND INVESTIGATIVE SERVICES, BUREAU OF

2420 Del Paso Road, Suite 270 Sacramento, CA 95834 (916) 322-4000 Toll-free: (800) 952-5210 **www.bsis.ca.gov**

SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY AND HEARING AID DISPENSERS BOARD

2005 Evergreen St., Suite 2100 Sacramento, CA 95815 (916) 263-2666 www.speechandhearing.ca.gov

STRUCTURAL PEST CONTROL BOARD

2005 Evergreen St., Suite 1500 Sacramento, CA 95815 (916) 561-8708 Toll-free: (800) 737-8188 **www.pestboard.ca.gov**

STUDENT ASSISTANCE AND RELIEF, OFFICE OF

Mailing address: P.O. Box 980818 West Sacramento, CA 95798-0818 Physical Address: 1625 North Market Blvd., Suite N-327 Sacramento, CA 95834 Toll-Free: (888) 370-7589 www.osar.bppe.ca.gov

VETERINARY MEDICAL BOARD

1747 North Market Blvd., Suite 230 Sacramento, CA 95834-2987 (916) 515-5220 Toll-Free: (866) 229-0170 **www.vmb.ca.gov**

VOCATIONAL NURSING AND PSYCHIATRIC TECHNICIANS, BOARD OF

2535 Capitol Oaks Drive, Suite 205 Sacramento, CA 95833 (916) 263-7800 **www.bvnpt.ca.gov**

Like this magazine? Subscribe for free!

If you'd like to have upcoming issues of *Consumer Connection* magazine mailed to you automatically at no charge, please email your name, mailing address, and phone number to **ConsumerConnection@dca.ca.gov**. You can also order online at **www.dca.ca.gov/publications/publications_list.pdf** or call **(866) 320-8652** to subscribe or request specific editions. Community-based groups may request multiple copies subject to inventory.

Department of Consumer Affairs Office of Publications, Design and Editing

1625 North Market Blvd., Suite N-119 Sacramento, CA 95834

