

Official Newsletter of the American Psychological Association,  
Division 38

# The Health Psychologist

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## President's Column

The August APA national convention is fast approaching, and with it, the end of my term as President. Where does the time go? A year is a short time to try and accomplish anything these days, with our hectic, multi-tasking, continuous e-communicating, work and home lives. I have a few updates to share, and then some reminders about upcoming events. I'll close with my personal highlights from the strategic planning retreat of Division 38.

Hot off the presses are the results from our annual election. **Chris France** (President-Elect), **Linda Gallo** (Member-at-Large/Publications, Research), and **Helen Coons** (APA Council). I'd like to thank everyone who stood for election, and so offered their effort and time to help Health Psychology provide the services and support needed by our colleagues. Hearty congratulations to our winners.

It is not too late to register for our **Sixth Annual Clinical Health Psychology Institute: Organ transplantation psychology: From research to clinical evaluation and care**. This all-day institute occurs before the APA convention, so be sure to book your travel plans only after considering if this institute would enrich your practice, your research, or your knowledge. It will take place Wednesday, August 5, 2009, 8:00 am – 3:50 pm, and 7 CE credits are available for attending.

There are a number of other special Division 38 events during the APA convention you should consider attending. I won't highlight all of our wonderful programming (a complete outline is provided in this issue), but instead want to make sure you know about some of our more distinct offerings. We will host an open discussion on: *Diapers, Deadlines, and Dinner Parties – How Psychologists Handle the Work-Life Balance* — everyone is welcome! Friday, August 7<sup>th</sup> at 8:00 am at

Karina Davidson, PhD



the Metro Toronto Convention Center, Room 714A.

We will also host: *Meet the Health Psychology Training Directors*, on Friday August 7<sup>th</sup> at 4:00 pm, in the Royal York Hotel Confederation Room 5. This will be followed immediately by a *Directors/Trainees social event* in the Division 38 hospitality suite at 6:00 pm.

For our trainees, we will have an interesting symposium on *Building a Successful Career from Internship through Jun-*

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## President's Column

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*ior Faculty—Key Advice from Senior Scientists*, Saturday, August 8<sup>th</sup> Metro Toronto Convention Center: Reception Hall 104C. That same day at 4:00 pm, the *Division 38 Business Meeting and Awards* will take place in the Royal York Hotel, Salon A. We will try and make it quick, and possibly even entertaining.

Finally, our *Division 38 Social Event* will occur Saturday night, August 8<sup>th</sup>, at Club Lucky on 117 John Street—a very short distance from our hotel. I want to thank **Robin Masheb** for her hard work but continuing optimism and perseverance as she put together the terrific program we will have this year.

As noted in my last column, we held a **Long Range Planning Retreat** from February 28-March 1<sup>st</sup> 2009, to update and possibly even revolutionize the purpose for Division 38. We invited a group of Division 38 insiders and outsiders, as well as junior and senior health psychologists to brainstorm about our future. This was the culmination of a year-long effort that involved many steps, including our member survey, planning groups that met extensively prior to the retreat, as well as follow-up steps we are now pursuing. **Michael Atella**, PhD, a consulting psychologist, did an amazing job of facilitating our retreat, and is to be thanked heartily for his amazing volunteer work on our behalf. The summary of the retreat is in this newsletter but I thought I would try and convey some of the process and qualitative conclusions we came to, after having gone through this process.

There was a very frank and refreshing conversation about the redundancies that we have in our professional societies, as well as with the larger APA. Sometimes admitting something might be broken, and then problem-solving about what it might take to fix it, feels like a process we do not often enough engage in. It was a relief to hear many puzzle over what Division 38 offers that can't be found at Society of Behavioral Medicine or American Psychosomatic Society (or half a dozen other organizations), and in particular why anyone would choose to attend the APA convention over some of our more targeted brethren's conventions. These frank admissions led to a conversation about why anyone would join a professional society at all, and how

emails, PubMed, and other electronic communication vehicles have provided substantial coverage of the original purpose of meeting physically in one place. However, we were left with a number of goals and missions that can't be accomplished remotely, and that Division 38 could serve, if we chose to do so. These included:

**Networking and social support.** You just can't find mentoring/updates/professional opportunities (yet) on the internet as well as you can in person. However, Division 38 has not yet done a good job of providing opportunities for this interaction. We have a proposal to have a mid-fall annual meeting (as many of the other Divisions have chosen to do) for two purposes. First, the purpose would be to have a large 'job fair.' Any one looking to hire/train/supervise a health psychologist will eventually come to this meeting, because it is efficient to do so. For internship directors, all the applicants will be there, so that first interviews/informational meetings can occur. For those looking for postdoctoral fellows or junior faculty, the same would apply. Applicants to these jobs will think this is a timely way to start narrowing their searches, because they can meet with a number of faculty from different parts of the country, and so hear the types of programs that will be best fits for their careers. Eventually, we may hear that Graduate Departments want to have potential graduate students at this meeting, for the same synergistic reason.

**Training.** There are still some research and clinical skills that are best taught (and learned) in person, rather than remotely. Knowing that once a year you can learn a new statistical skill, or be shown the latest diagnostic test, and how to interpret it, will provide a service that professional organizations should provide, but sometimes do so only haphazardly (e.g., when a presenter proposes it), rather than programmatically, with input from many about the needs of the field. This will be the second purpose of the meeting—to offer programmatic, short courses in timely topics to both practitioners and scientists.

**Support services for trainees.** Our graduate students, pre-doc interns, post-docs, and junior fac-

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## President's Column

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ultly sometimes explain the lack of identity they feel with health psychology, even though that is their profession. We hope to look to more successful models (neuropsychology? child pain?) for ways to foster a professional identify and 'home' for our trainees. If Division 38 agrees that its mission is to foster and support our junior colleagues, we will differentiate ourselves from SBM and APS in a complementary, rather than competitive way.

**Policy and Advocacy.** One of the big insights (to me) about our retreat was turning the APA bureaucracy from a liability into a benefit. SBM and APS both have expressed a desire to influence NIH funding, or statutes on health care reform, or the use of behavioral interventions in primary care, but they have no logistical support to do so. We do. We have lawyers, policy analysts, and lobbyists at our disposal, should we have the mission and sustained focus to use these resources. We need to have as

one of our strong identities that we push our agendas at big APA, so that we aid in moving our science, practice and policy into new realms. I believe that the annual APA convention should be used to lobby within APA for health psychology initiatives, and that one of the activities that should occur at the mid-fall meeting is for all to participate as we set our annual advocacy agenda (to be enacted as we meet with Practice, or Science, or International Affairs) at APA.

I've provided here my own personal take on the meeting of many minds at our retreat, and I am offering this not as 'the' new direction for Division 38, but as an opening to what I hope will be a very productive dialog about our future as a professional society. Warm wishes to all, as I head back to my vacation, and my continual (illegal) text messages from my teenaged daughter at camp.

**Biosocial Research Contributions to Understanding Family Processes and Problems**" is the title of Penn State's 17<sup>th</sup> Annual Symposium on Family Issues. The conference will take place October 8-9, 2009 on Penn State's University Park campus. Conceptual shifts and technological breakthroughs have placed new emphasis on the importance of combining nature and nurture to understand family processes and problems. Today's researchers emphasize bi-directional relations between physiological processes and behavior, processes that operate in the context of previous experience and the demands of a multi-layered ecology. Biological factors mediate and moderate behavioral adaptation to a range of environmental challenges. At the same time, environmental challenges and behavioral responses affect biological processes. Family relationships are at the intersection of many biological and environmental influences.

The goal of the symposium is to stimulate conversation among scholars who construct and use biosocial models, as well as among those who want to know more about biosocial processes. Researchers interested in both biological and social/environmental influences on behavior, health, and development will be represented, including researchers whose work emphasizes behavioral endocrinology, behavior genetics, neuroscience, evolutionary psychology, sociology, demography, anthropology, economics, and psychology.

Lead speakers: Alison Fleming, *University of Toronto at Mississauga*, Jenae Neiderhiser, *Penn State*, Steven Gangestad, *University of New Mexico*, and Guang Guo, *University of North Carolina, Chapel Hill*. Supported by a grant from the Eunice Kennedy Shriver National Institute for Child Health and Human Development.

Information and registration at <http://www.pop.psu.edu/events/symposium/2009.htm> or contact Carolyn Scott at [css7@psu.edu](mailto:css7@psu.edu).

## Health Psychologists Play an Integral Role in Reproductive Medicine

Sheryl Kingsberg, Ph.D.  
Chief, Division of Behavioral Medicine  
University Hospitals Case Medical Center, MacDonald Women's Hospital  
Professor, Departments of Reproductive Biology and Psychiatry  
Case Western Reserve University School of Medicine

The media frenzy surrounding Nadya Suleman and the octuplets she delivered following in vitro fertilization (IVF) and transfer of 6 embryos (2 split to become identical twins) has highlighted the importance of psychosocial factors within the field of reproductive medicine. In fact, in the Health Psychologist Spring newsletter, Dr Lisa Marie Frantsve wondered what role health psychologists currently play, if any, in reproductive medicine.

For those of you unfamiliar with reproductive medicine and infertility, you may be relieved to learn that mental health professionals have been vital providers of clinical care, education and research for over 25 years. The field of reproductive medicine is essentially self-regulated by the American Society for Reproductive Medicine (ASRM). ASRM is a multidisciplinary organization, with members including obstetrician/gynecologists, urologists, reproductive endocrinologists, embryologists, mental health professionals, internists, nurses, practice administrators, laboratory technicians, pediatricians, research scientists, and veterinarians, dedicated to the advancement of the science and practice of reproductive medicine. ASRM, together with its affiliate organization of fertility practices, Society of Assisted Reproductive Technologies (SART) sets the practice guidelines and standards of care for assisted reproductive technologies. The ASRM includes numerous professional groups and special interest groups, one of which is the Mental Health Professional Group (MHPG). Members of the MHPG work to: 1) educate ASRM members and the public about the psychological aspects of reproductive health issues, and the need for mental health services in conjunction with reproductive treatments, and 2) promote, carry out and report evidence-based research in the psychological correlates of reproductive health and psychological interventions. The current membership of the MHPG stands at well over 400 members from across the globe and is itself, multidisciplinary including psychologists, psychiatrists, social workers, and other licensed mental health professionals involved in clinical work and/or research focused on infertility and treatments. The MHPG is an approved APA sponsor of continuing education for psychologists.

The MHPG has been extensively involved in several areas of reproductive medicine. Clinically, the MHPG has been responsible for developing the guidelines for qualifying to provide infertility counseling and assessment as well as developing the ASRM and SART recommendations for evaluation and counseling of potential gamete donors and recipients of reproductive treatments. As such, working in the area of infertility and reproductive technologies is similar to other medical subspecialty areas of behavioral medicine. The model of practice is collaborative reproductive health-care. Clinicians need to be versatile and adaptable to work with a variety of relationships, patients, medical treatment teams, advocacy and community organizations. The practice of infertility counseling requires not just clinical skills but legal and ethical knowledge regarding assisted reproductive technologies. Clinical areas of focus are varied. We counsel patients who are coping with infertility and/or pregnancy loss to enhance coping, assist with treatment decisions or decisions to stop treatment, or adopt. We counsel and assess egg, sperm and embryo donors and recipients. We counsel and assess gestational carriers and surrogates. We offer CBT for coping with stressful medical procedures, or needle phobias. We help people quit smoking. We assist patient to adapt as they leave treatment to raise children who have entered their families with the assistance of reproductive technologies or adoption, or to live child-free lives.

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Anyone interested in learning more about working within the field of reproductive medicine is encouraged to look online at [www.asrm.org](http://www.asrm.org) and the MHPG professional group website found there. The website lists all members as well as publications related to the field. The next ASRM annual meeting is October 17-22, 2009 in Atlanta. On the program will be two postgraduate courses offered by the MHPG and for which APA CE credits may be received. The preliminary program may be found on the ASRM website. You do not have to be a member of ASRM or the MHPG to attend these courses or the annual meeting. In addition, [Infertility Counseling: A Comprehensive Handbook for Clinicians](#) by SN Covington and LH Burns, is an invaluable resource for novice as well as experienced clinicians and includes contributions from many health psychologists sharing their expertise in providing infertility counseling.

## Election Results

The Nominations and Elections Committee, under the leadership of Perry Nicassio, is pleased to announce the results of the 2009 Division 38 elections:

President-Elect: Christopher France



Member-at-Large (Portfolio: Publications & Communications, Health Research): Linda Gallo



APA Council Representative: Helen Coons



Congratulations to the new officers, and special thanks to all those who participated in the nomination, candidacy, and voting process!

## From the Student Representatives

Donald M. Lamkin, M.A.

Laura B. Pence, M.A.

As your student representatives, we had the unique opportunity this year to participate in the Division's long-range strategic planning process. The planning process brought together the division leadership and other invited experts in the field of health psychology for a weekend retreat to discuss the desired future of the division and to make plans about how to accomplish those goals. The Division leadership knows and feels strongly that psychology trainees are the future of the field. Thus, addressing the needs of psychology trainees was a prominent theme through out the weekend.

The group first decided on the vision of the Division: *To lead in defining, training, and advocating for the science and practice of health psychology*. In line with this vision, the first goal of the long range plan is to: *Provide a health psychology identity and inclusive professional home for scientists and practitioners at all career stages*. Some of the strategies identified to help attain this goal include making available information about what health psychologists do and the training needed, increasing opportunities for involvement for students and early career professionals (e.g., journal reviewing, program planning, participation on committees, opportunities for networking, etc.), and increasing communication with the membership about available opportunities and the latest news in health psychology science and practice.

We believe strongly that a growing influence of psychology trainees in the division will lead to increased involvement of more health psychology trainees, increased benefits to our student membership, and a greater sense of a professional community from the time training begins. We also believe that these changes can best happen through a "bottom-up" approach. That is, the greatest changes will start from student ideas, participation, and initiatives. Our goal is to have a student on every committee and we challenge you to become more involved in division leadership. There are many ways that you can be involved and your participation can benefit other students and the division, while also providing you with a greater sense of professional affiliation and impact on our field. Please contact us at [div38students@gmail.com](mailto:div38students@gmail.com) for more information. Also, please stay tuned to the division website ([www.health-psych.org/](http://www.health-psych.org/)) and our student listserv (instructions for joining below) for ways you can be a part of our future opportunities.

Please sign up for our listservs to stay informed about Division events. Members are not automatically signed up for the listservs. To subscribe to the main division listserv, send an email to [listserv@lists.apa.org](mailto:listserv@lists.apa.org). In the body of the email (not the subject line) type SUBSCRIBE DIV38 (your name). To subscribe to the student listserv, send an email to [listserv@lists.apa.org](mailto:listserv@lists.apa.org). In the body of the email (not the subject line) type SUBSCRIBE DIV38STU (your name).

### Negotiating Academic and Hospital Positions: What Women Need to Know

While negotiating academic and hospital positions are a routine part of professional life for a health psychologist, effective strategies and issues are often not discussed during training. If you are an advanced graduate student, intern, fellow or an early career psychologists, join seasoned faculty in academic, academic medical and hospital settings for a roundtable discussion on negotiation strategies. Bring your questions on Thursday, August 6, 2009; 8 am – 8:50 am. The program is scheduled for Constitution Hall 105, Convention Centre, North Bldg. Faculty include: Karen F. Wyche, Ph.D., Jessica Henderson Daniel, Ph.D., ABPP, Nadine J. Kaslow, Ph.D. ABPP, and Helen L. Coons, Ph.D., ABPP.

APA DIVISION 38 APA CONVENTION SCHEDULE

TIME	THURSDAY, AUGUST 6	FRIDAY, AUGUST 7		
8:00		<p>Discussion: Diapers, Deadlines, and Dinner Parties – How Psychologists Handle the Work-Life Balance MTCC: Meeting Room 714A</p>		
8:30				
9:00	<p>Clinical Health Psychology Grand Rounds: Evidence-based Distance Treatment of Children with Conduct and Anxiety Problems Patrick McGrath MTCC: Meeting Room 716B</p>			
9:30				
10:00				
10:30		<p>Poster Session: Health Psychology -- Cardiac Stress and Coping, Health Behaviors and Mindfulness MTCC: Exhibit Halls D and E</p>		
11:00	<p>Poster Session : Pain; Obesity, Eating, and Exercise; HIV, Sexual Behavior, and Fertility MTCC: Exhibit Halls D and E</p>			
11:30				
12:00	<p>Symposium: Sex and Intimacy After Cancer -- The State of the Science MTCC: Meeting Room 716A</p>	<p>Clinical Health Psychology Grand Rounds: Evidence for Treating Eating Disorders in Adolescents Daniel LeGrange MTCC: Meeting Room 716A</p>		
12:30				
1:00				
1:30				
2:00	<p>Symposium: Cardiac Psychology and Rehabilitation MTCC: Meeting Room 716B</p>	<p>Clinical Health Psychol- ogy Grand Rounds: Evi- dence for Treating Women with Breast Can- cer Helen Coons MTCC: Meeting Rm 716A</p>	<p>Preparation for ABPP in Clinical Health Psychol- ogy Royal York Hotel Confed Rm 6</p>	
2:30			<p>Invited Address: D20/38 Award in Developmental Health Psychology MTCC: Meeting Rm 711</p>	
3:00				
3:30				
4:00		<p>Meet the Health Psychology Training Directors Royal York Hotel Confed Rm 5</p>		
4:30				
5:00				
5:30				
6:00		<p>Directors/Trainees Social Event Royal York Hotel Division 38 Hospitality Suite</p>		
6:30				
7:00				
7:30				

APA DIVISION 38 APA CONVENTION SCHEDULE

TIME	SATURDAY, AUGUST 8	SUNDAY, AUGUST 9
8:00		
8:30		
9:00	Clinical Health Psychology Grand Rounds: Evidence for Treating a Work Disability Patient Daniel Bruns MTCC: Meeting Room 716A	Building a Career from Internship thru Jr. Faculty --Key Advice from Senior Scientists MTCC: Reception Hall 104C
9:30		
10:00		
10:30		
11:00	Clinical Health Psychology Grand Rounds: Evidence for Treating a Depressed Cardiac Patient Karina Davidson MTCC: Meeting Room 716A	
11:30		
12:00		
12:30		
1:00	Clinical Health Psychology Grand Rounds: Evidence for Treatment of a Veteran with Multiple Medical and Psychiatric Comorbidities Robert Kerns MTCC: Meeting Room 716A	
1:30		
2:00		
2:30		
3:00	Presidential Address: Life as a Clinical Health Psychologist Trialist: The Joys and Tribulations Karina Davidson Royal York Hotel, Salon A	
3:30		
4:00	Division 38 Business Meeting and Awards Royal York Hotel Salon A	
4:30		
5:00		
5:30		
6:00	Division 38 Social Event Club Lucky 117 John Street	
6:30		
7:00		
7:30		

## Sixth Annual Clinical Health Psychology Institute

Wednesday, August 5, 2009, 8:00 am – 3:50 pm; 7 CE credits

### ORGAN TRANSPLANTATION PSYCHOLOGY: FROM RESEARCH TO CLINICAL EVALUATION AND CARE

Register at [www.apa.org/ce](http://www.apa.org/ce)

the short- and long-term years after transplant surgery. This workshop is jointly sponsored by the APA Office of Continuing Education in Psychology and APA Division 38, Health Psychology

**Leaders:** Mary Amanda Dew, Ph.D., Andrea F. DiMartini, M.D., University of Pittsburgh School of Medicine, and Annette De Vito Dabbs, Ph.D., R.N., University of Pittsburgh School of Nursing

Although most major medical centers have organ transplant programs, psychologists working in medical settings rarely receive any formal education regarding psychological and ethical issues unique to transplant populations. Instead, they often learn only by the "seat of their pants" once they are asked to provide consultation to, develop research with, or become a transplant team member. This is unfortunate, since organ transplantation is the optimal treatment for many end-stage organ diseases, and there is an increasing population of individuals in the U.S. and worldwide who have received transplants or are living organ donors.

In order for psychologists to work effectively as consultants, researchers, and/or clinical care providers for this population, they must understand and be able to explain the nature of the transplantation process; ethical, psychological, and behavioral issues central to transplant candidate/living donor candidate evaluation and selection; and the strategies available to maximize these individuals' mental health and well-being.

This INTRODUCTORY workshop will assist psychologists in defining their roles in the organ transplantation process. It will provide attendees with the tools necessary to consult, conduct research with, and serve as integral members of organ transplantation programs.

This workshop is designed to help you:

1. Explain the medical and ethical rationale for the organ allocation system in the U.S., and describe the role of psychologists, as transplant team members, in working within that system.
2. Describe the phases of the transplant process for both the transplant patient and the living organ donor, and discuss key stressors arising during each phase.
3. Explain the rationale for and demonstrate the content of the psychosocial evaluation of the transplant candidate.
4. Discuss the unique ethical issues involved in living organ donation; explain and demonstrate the content of the psychosocial evaluation of the prospective living organ donor.
5. Identify common mental health and behavioral problems experienced by transplant recipients in both the short- and long-term years after donation, and review research evidence concerning major risk factors for those problems.
6. Identify mental health and quality of life concerns that typically arise for living organ donors in both the short- and long-term years after donation, and review evidence regarding pre-donation risk factors for poor post-donation outcomes.

Evaluate evidence regarding the effectiveness of intervention strategies to treat mental health and behavioral problems in transplant recipients and living organ donors; identify areas where novel intervention and prevention efforts are needed.

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Fees: Member (in advance) \$210; (on-site) \$245  
Non-Members (in advance) \$245; (on-site) \$310

Register at [www.apa.org/ce](http://www.apa.org/ce)

This workshop has been reviewed and approved by the APA Continuing Education Committee (CEC) to offer Continuing Education (CE) credit to psychologists. The APA CEC maintains responsibility for the content of the program.

**NEW BENEFIT for STUDENTS/TRAINEES!**

*For the first time*, students/trainees are welcome to attend the CHPI -- plan to attend *and take 50% off* the member price on site!

Do not pre-register -- but **DO contact the D38 office** if you're interested ([apadiv38@verizon.net](mailto:apadiv38@verizon.net)). All available seats will be issued to students on the day of the Institute -- great training at a great price!!

## Division 38 Holds Long Range Planning Retreat

In 2002, Division 38 engaged in its first Long Range Planning process to clarify organizational goals and coordinate activities to meet those goals. By 2008, many of those goals had been achieved: most notably, the reorganization of the Board structure and increasing presence in APA governance. Division President Karina Davidson, with the support of the Executive Committee, allocated a day and a half at the 2009 MidWinter Meeting to an update of the Long Range Plan.

In preparation for the planning event, a Long Range Planning sub-committee coordinated a number of key tasks. First, a professional facilitator – Dr. Michael Atella – was invited to guide the process. Dr. Atella also facilitated the Division's previous Long Range Planning meeting, so he was familiar with Division 38 history, culture, and needs. The sub-committee systematically selected meeting participants to reflect the range of Division members and interested "outside" constituencies (e.g. students, early-career professionals, and "senior" members; APA, government, and international representatives; specialists in Practice, Publications, and Education; as well as the current Division 38 Executive Committee). Finally, the sub-committee created and distributed a member survey to assess member satisfaction and identify preferences for new Division benefits.

Prior to the Retreat, all participants were asked to reflect on the Division's current activities, desirable and probable futures for associations in general (and Division 38 in particular), and the opportunities and threats emerging in the next five years. They also considered trends in APA, factored in economic and political issues, and weighed the information gained through the survey. The Retreat was structured to allow individual reflection, small group collaboration, large group consensus-building, and, ultimately, the development of specific action-oriented goals.

After extensive discussion, collaboration, and debate, the 2009 Retreat participants developed the following Vision Statement and Goals for the Division of Health Psychology:

### *VISION:*

To lead in defining, training, and advocating for the science and practice of health psychology, being mindful of global, multicultural, and ever-changing contexts – and considering all career stages – the Division of Health Psychology of the American Psychological Association is committed to:

### *GOALS:*

(1) Providing a health psychology identity and inclusive professional home for scientists and practitioners at all career stages;

- (2) Developing and evaluating the standards for education and training of health psychologists to meet societal needs;
- (3) Leading and modeling the translation of health psychology among science, practice, and policy; and
- (4) Advocating for the research, evidence, and application of health psychology for the public good.

Action Planning Groups listed specific actions to contribute to the achievement of each Division goal. Recommendations were generated, but not necessarily prioritized, and there remains ample room for member input.

To “*provide a health psychology identity and inclusive professional home for scientists and practitioners at all career stages,*” the group considered operationalizing and making available the definition of a Health Psychologist by: (a) reviewing material on the D38 website to see what is there and what is available to enhance existing content; (b) generating a list of what is needed to convey what Health Psychologists do, how they are trained, etc.; (c) developing and posting new web content, including slide shows and videos (e.g., interviews with Health Psychologists), etc. Other options included developing a proposal for a “separate” Division 38 conference, organizing a working group to develop a proposal for a separate meeting that includes all levels of training, diversity, and new members; increasing opportunities for involvement and input in Division 38 activities (journal reviewing, program planning, committees, etc.) especially for students and early career professionals. In the realm of Membership, Publications, and Communications, the action group suggested: creating a mentored reviewer program for *Health Psychology*; identifying active committees and ensuring that each committee has members across career levels; charge committees with meeting via conference call within one month; initiating an Institutional Representatives Program; and periodically reexamining the Committee structure for utility and effectiveness. To increase communication of information about the Division, science, practice, etc. to members, the group felt it was important to: post titles of *Health Psychology* articles on the Division web site; enhance the Members-Only section of the web site; tailor communications to members, using interest areas identified in member profiles; “Frequently Asked Questions” about Health Psychology on the web site; develop a “conference call” series on Health Psychology topics; and/or create opportunities for networking (comparing strategies used by other groups, then customizing for Division 38).

The Division is already working to “*develop and evaluate the standards for education and training of health psychologists to meet societal needs*” by planning a 2010 conference to define health psychology training standards for practitioners and non-practitioners. A further goal of the conference will be to draft the 2011 APA Committee on Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP) renewal application.

“*Leading and modeling the translation of health psychology among science, practice, and policy*” may be accomplished by formalizing liaison relationships with APA Directorates and outside organizations; developing plans for expansion and implementation of Clinical Health Psychology Institutes (CHPIs); and developing online resources for translating health psychology science to practice and back.

To “*advocate for the research, evidence, and application of health psychology for the public good,*” action planning group participants recommended: arranging for the Division 38 Board to be trained to advocate for health psychology within APA; developing a map of APA governance (Boards, Committees, Liaisons) with notation of Division 38 members/representatives; communicating with D38 members in APA governance to inform them about D38’s advocacy agenda and to support their efforts within Boards and Committees; working to place D38 members in APA governance groups; and meeting with APA Directorates about targeted advocacy topics.

The leadership is keenly aware of the rapidly-changing factors in the educational, professional, political, and overall environment, and the challenges for individual members and the organization as a whole. The Retreat participants extrapolated overall trends into “probable” and “desirable” outcomes for Division 38, then identified implications for Division 38’s near future. These goals and actions will guide the elected officers and appointed chairs in their efforts to meet the needs of Division 38 members. Continuing member input and feedback are both necessary and welcome. Contact Division 38 any time by emailing [apadiv38@verizon.net](mailto:apadiv38@verizon.net)!

## Division 38 Fellows

### Applications for 2010 will be accepted until December 15, 2009.

Interested in Fellow status in Division 38? To apply, you will need:

1. an APA Uniform Fellow Application
2. a Qualification Checklist for Prospective Applicants for Fellow Status,
3. Fellow Status Evaluation Form and Fellow Status Evaluation Worksheet (three of each needed), and
4. a list of Division 38 Fellows.

All forms and instructions are available through the Division 38 website (under Membership): [www.health-psych.org](http://www.health-psych.org)

The deadline for receipt of all materials by the Division 38 Administrative Office is **December 15, 2009**. Because of the rigid timetable for reviewing and processing applications, there will be no extensions to this deadline. Nominees whose applications are incomplete as of the deadline will not be considered further this year, but will have the opportunity to reactivate their applications next year. The Division 38 Fellows Committee forwards their recommendations to the APA Membership Committee, whose recommendations are confirmed by the APA Council of Representatives at the APA Convention. Thus, the final outcome of applications for Fellows will not be known until after the 2010 APA Convention.

All nominees should complete the Uniform Fellow Application (please indicate whether you are applying as an "initial Fellow" or "current Fellow"). It is strongly recommended that each applicant also prepare a self-statement, which highlights the outstanding and unusual contributions to Health Psychology which warrant Fellow status (demonstration of *national* impact is required). Attach the application and statement to a current C.V. and indicate (using an 'R' notation in the margin) which of the publications listed appeared in *refereed* publications. To facilitate the timely review of the application, please provide **the original and five (5) copies** of all documents (including the application, statement and vita). Return the materials to the Administrative Officer by December 15.

Nominees who have never held Fellow status in any APA division (initial Fellows) should also provide an APA Standard Evaluation Form and a Fellow Status Evaluation Worksheet (which can be used by the endorsers to help ensure that a variety of criteria have been addressed in their letters) to each of at least three (3) evaluators *who are APA Fellows*. At least two of those three evaluators must be Fellows of Division 38. It is suggested that evaluators be from different institutions, and at least one evaluator should be an individual *with whom you have never had a continuing personal association*.

It is strongly recommended that the nominee include a copy of his/her self-statement and/or C.V. with the forms sent to each evaluator. The most effective endorsement letters are those that *systematically and specifically* address the APA Fellows criteria. The nature of the "unusual and outstanding" contributions or performance in the field of psychology, should be specified in sufficient detail so that members of both the Division 38 and APA committees who may be unacquainted with the candidate's work can write an evaluation of the candidate's qualifications relevant to the Fellows criteria. With this in mind, the evaluators should complete the forms and return them directly to the Division 38 Administrative Office by December 15.

Best of luck in your application. Direct questions to: [apadiv38@verizon.net](mailto:apadiv38@verizon.net)



## **Twelve Reasons to become Board Certified In Clinical Health Psychology!**

### **Apply Today!**

- Board certification in Clinical Health Psychology indicates specialty expertise which distinguishes you from other psychologists who work with patients with health issues.
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APA Division 47: Exercise and Sport Psychology  
Presents

# The 31st Annual Running Psychologists' APA 5K Ray's Race and 3K Walk

**REMEMBERING ART AARONSON**

**Coronation Park  
Toronto, Ontario**

**Saturday, August 8, 2009 at 7:00 AM**

***Sponsors: American Psychological Association; APA Insurance Trust; Blackwell Publishing, Pearson Assessments; Worth Books; Psi Chi; Divisions 47, 19, 20, & 50; Running Free***

\*\*\*\*\*

(Please check all that apply)

APA Member  Student  Guest  Exhibitor  Psi Chi  Division 47 Member

NAME : \_\_\_\_\_

(Please Print)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

(Please Print)

5k Run  3k Walk  Age on Race Day: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ M  F

Please check age group: Under 20  20-29  30-39  40-49  50-59  60-69  70+

Shirt Size: S M L XL Check here if first-time participant  if address has changed

*Registration fee includes race entry, bus to and from race; t-shirt, refreshments, awards & raffle entry. **Pre-Registration: Regular entry: \$25; Students or Division 47 members, \$20. Convention site registration: \$30.***

If you are an APA member and wish to apply for Division 47 membership with this entry, check below. Include \$15 for membership fee for Division 47. If you join Division 47, your registration fee will be reduced. I wish to apply for Division 47 membership.  **APA Status: Member**  **Fellow**  **Assoc**   
**Student Affiliate**  **APA Membership #** \_\_\_\_\_

*WAIVER: I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Running Psychologists, Division 47 and the American Psychological Association, the City of Toronto, and Marathon Dynamics, Inc., subcontractors, sponsors, and volunteers, and their respective representatives and successors, from any and all claims or liabilities of any kind arising out of my participation in the APA 5k Ray's Race and Walk event on Saturday, August 8, 2009 at Coronation Park, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures and recording or any other record of this event for any legitimate purpose. I HAVE READ THE ABOVE RELEASE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(Guardian must sign if applicant is under age 18)**

**Pre-registration is strongly recommended. T-shirts guaranteed only to pre-registrants.**

Check, payable to **Running Psychologists**, must be received by August 1st, 2009 Circle amounts enclosed:

Mail Registration received by 8/1/09 \$25.00 Division 47 Members or Student \$20.00

Division 47 Membership Fee (Add'l)-For APA members \$24.00 Division 47 Fee Student members (Add'l) \$10.00

Convention Site Registration \$30.00

Total Amount enclosed \_\_\_\_\_

Send to: Janet Cain, Ph. D., Treasurer, Running Psychologists; 935 Trancas St., 1-B, Napa, CA, 95476

Questions? Email: Lucinda Seares-Monica, Psy. D., [psydmd@optonline.net](mailto:psydmd@optonline.net), or Janet Cain, Ph. D. at [drjcain@earthlink.net](mailto:drjcain@earthlink.net).

*Note: Participants will be able to make a donation to the American Cancer Society or the United States Holocaust Museum in memory of Art Aaronson. Please use a separate check for donations.*

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*Division 38,*  
*Health Psychology*  
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**DIVISION 38 WEB SITE**

www.health-psych.org



# 2009 APA CONVENTION Toronto, Ontario August 6-9



## *The Health Psychologist*

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**Lisa Maria E. Frantsve**  
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Yale University School of Medicine

Deadlines for Submissions:

**September 15, 2009**

**February 15, 2010**

**June 7, 2010**

*Please address comments and submissions to:*

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