Welcome to this special issue on Health Policy and Advocacy! The articles contained in this newsletter are written by psychologists and psychology trainees who are seeking to improve health policy through advocacy. In this issue you will get insider commentary about a health psychologist’s role when advocating on Capital Hill in DC; you will hear from our SfHP SAC Chair-Elect discussing her vital work in advocacy and social justice; and you will learn about the missions of the SfHP Health Policy Council and APAGS Advocacy Coordinating Team. Be sure to also check out the timely and relevant resources below and at the end of this newsletter. We hope you enjoy!

- Val and Allison

Have you ever thought...

- How can I increase the impact of my clinical work and research?
- How can I help more people?
- Even if some behavioral interventions have been found to be effective, how can people keep up behavior change given environment and policy challenges?
- How can I increase my role in advocacy?
- My background is not in health policy. How can I participate and make an impact anyway?

Questions provided by Joanna Buscemi, PhD; read about her experience going to Capital Hill to advocate for healthy policy on page 2!

SfHP Health Policy Council Teleconference

**Title:** “Influencing Health Policy: How to Write Health Policy Briefs”

**When:** Thursday, May 31, 2018 at 1:00 pm ET

**How To Register:** Please RSVP to apadiv38@verizon.net by 5:00 pm ET on Friday, May 25, 2018. You may also submit questions in your RSVP email. Please put “Health Policy” in the subject line.

**APA Science Advocacy**

http://advocacy.apascience.org/
We are living in a time when psychologists and psychologists-in-training are increasingly motivated to expand the impact of their work and to advocate for important policy changes to improve population health. In my role as the Health Policy Committee (HPC) Chair of the Society of Behavioral Medicine (SBM), I have had the opportunity to do just that by learning how to translate our research to policy recommendations at the congressional level.

Over the past 5 years, I have learned that there is a serious gap between research and policy. Typically, researchers do not receive training in how to communicate with policy makers, and policy makers do not have the scientific evidence they need to make informed, evidence-based policy decisions. The HPC aims to close this gap by developing and disseminating health policy briefs and taking annual visits to Capitol Hill to advocate for health policy change.

The first time I participated in “Hill Visits,” I felt really intimidated. I wasn’t sure if the legislative staff would be responsive or if I’d be able to effectively communicate my message. Over time, I have found that (overall) legislative staffers truly listen to their constituents. Many of them are young professionals, like me, who want to make a difference by impacting policy-level change. During visits, they regularly take notes and contribute to the conversation, which makes me feel as though they are listening and they will bring these messages back to their Senators. I have now taken 3 trips to Capitol Hill, and these visits have been the most meaningful experiences of my professional career to date.

Some important lessons I have learned throughout my experience on the Hill:
1) You (or someone you’re with) have to be a constituent of the Senator’s state to schedule a meeting with a particular legislative aide.
2) Meetings are short (20 minutes max). Prepare brief, concise, “asks” (no more than 3).
3) Develop catchy written materials that the aide can take to their Senator that summarize your positions.
4) Ask what YOU can do for THEM. What health policy issue is important to that Senator, and how can you support them?
5) Follow up with the aide. Relationship building is key – if an aide asks you to provide them for the research evidence on a particular topic, make sure to send a follow up email with this information and keep in touch as new evidence emerges.

The more timely the issue, the more responsive the legislative aides will be. For example, in November, many of the staffers expressed interest in learning more about research related to opioid treatments and rural health issues. As an organization, we are now working to provide those staffers with the latest evidence and associated policy recommendations on these issues.

Student members of SfHP who are interested in getting involved should reach out to the Health Policy Council [see page 3] to find out how to become more involved in advocacy work. The earlier you start gaining experience, the better! Policy work requires a different skill set for most psychologists, but we CAN be involved in advocacy, and the work is extremely important and rewarding.
"Vision: Visibility and impact of behavioral sciences and evidenced-based behavioral interventions will be broad and well-integrated into national health care policy and practice."

What is “health policy,” and why is it important for health psychologists to be involved in advocacy?
The World Health Organization defines ‘health policy’ as the decisions, plans, and actions that are undertaken to achieve specific health care goals within a society. Health policies are created in the United States, for example, through federal and state laws and regulations. Health or health care policies related to reimbursement for services, research funding, and public health initiatives, for example, impact the work of health psychologists. Therefore, it is important that health psychologists use their voices to make sure these policies are evidence-based and do not further widen the health disparities gap.

What is the role of health psychologists in advocating for health policy?
Health psychologists can play several roles in advocating for health policies including being involved in a national organization that recommends health policies, such as the U.S. Preventive Services Task Force, writing policy briefs and sharing them with policy makers, or conducting research studies to understand the implications of the policy on public health as well as the process of implementation and dissemination.

What platforms can/do health psychologists use to advocate for policy?
There are several opportunities for health psychologists to be involved in advocacy, including responding to request for public comments on proposed policies, writing a policy brief, or visiting the Hill.

1. The Health Policy Council will be sponsoring a teleconference called “Influencing Health Policy: How to Write Health Policy Briefs” on Thursday, May 31st at 1pm EST (must be a member of the SfHP to register).

2. The APA has a toolkit on how to advocate for psychology.

What is the purpose of the Health Policy Council with SfHP?
The purpose of the Health Policy Council is to facilitate and promote any efforts by APA or external national organizations to broaden the visibility and impact of behavioral sciences and evidence-based behavioral interventions. The Council will serve the SfHP by coordinating requests from APA or external organizations to create, collaborate, or review statements, briefs, etc. related to health psychology advocacy and national policy.

How and why should students/trainees become involved in health policy?
The policies that are being implemented today will have an impact on clinical practice and research in the future. It is important for future generations of health psychologists to be aware of these policies and use their voice (via policy brief, policy statement, Hill visit, or research) to ensure evidence-based and equitable policies are implemented.
In November 2016, a group of interested faculty, graduate students, interns, and post-doctoral fellows in the Department of Clinical and Health Psychology at the University of Florida (Gainesville, FL) established the Education & Advocacy Committee (EAC) to raise the program’s awareness of social justice issues and facilitate professional growth. As one of the founding student members, I am excited to share an overview of our progress with the hope that our committee can be a model for other graduate psychology programs around the country.

Our community mobilizing effort began with one committed faculty member (Lori Waxenberg, PhD, ABPP) and an informal assembly of volunteers. We have now grown to include several faculty members and 5–10 trainees. Since its inception, the EAC has organized 11 didactic presentations on diversity topics, moderated two “common reading” book discussions, coordinated a food drive, and developed a public-facing website.

“**The primary goals of the Education & Advocacy Committee are to foster open dialogue about difficult issues, provide exposure to innovative ideas, and brainstorm local and global strategies for addressing injustice; we see these as the key to developing (and continually refining) cultural humility.**”

To achieve this, we have focused on organizing monthly presentations for the department, using group consensus during our planning meetings to determine the topics. One to three highly interested volunteers take the lead for each monthly presentation with back-up support from the broader group.

**Some of our favorite presentations have included:**

- Getting Woke: An Interactive Discussion about Social Justice
- “They Said What?” Responding to Racism, Sexism, and Homophobia in Therapy
- Professional Women: The Fear and Power of Failure
- Inclusive Care: Addressing Mental Health Disparities in the Transgender Community

*(Continued on the next page)*
Change does not come without challenges. The EAC has functioned without financial support to pay for outside speakers or provide refreshments, which is a barrier to expanding our reach within the university. We have struggled with having limited time to commit to planning presentations and difficulty finding external experts with availability to participate on panels. Nevertheless, we persist, and our department’s response has been overwhelmingly positive. Attendance at EAC presentations is consistently higher than at other departmental didactics. In a recent survey of our graduate students and interns, EAC programming was among the highest rated didactic activities. With support from the department’s leadership, we plan to continue presenting once per month during the department’s Friday colloquium series.

We have identified several components from our experience that we believe could work across psychology training programs:

1) Attendees respond most positively to interactive panels/discussions rather than one-sided lectures.
2) Repeated department-wide advertising (e.g., multiple reminder e-mails with fun facts or helpful vocabulary terms) lead to better attendance.
3) Distributing supplementary educational materials after the events provides tangible takeaways to impact clinical practice and research.
4) Most importantly, coordination by a diverse group of volunteers is essential to developing the focus of our committee; we cannot expose our department to a breadth of experiences if those experiences are not represented and respected within our own ranks.

It is important to note that the EAC does not take a political stance. Rather, our group hopes to advance knowledge and skills so that we may bring about positive outcomes for those we serve. Health psychologists are in a unique position to be leaders in our field, in medicine, and in the political sphere. However, psychologists are not typically taught how to advocate for the people and causes we care about. The EAC fills that gap by focusing on topics related to multiculturalism, cultural humility, personal and professional growth, and social justice.

If you’re interested in learning more about our experiences, please visit our resource-rich website (chp.phhp.ufl.edu/multiculturalism) or contact Dr. Lori Waxenberg at lwaxenbe@phhp.ufl.edu.
In the process of developing their professional identities, psychology trainees are exposed to many roles: student, teacher, researcher, clinician, consultant, and advocate. Depending on the training, mentorship, and opportunities presented through graduate education, certain competencies may develop more than others. For example, within the realm of advocacy, advocating for students or for clients is likely a more familiar experience than advocating for peers or the profession. Students often defer to seasoned psychologists or administrative figures when publicly advocating for psychology because they doubt the merit of their own expertise or feel uncomfortable speaking in settings where they perceive a systemic power differential. This experience is lamentable.

Inclusion of psychology trainee voices is crucial because institutional or policy decisions made about social justice issues, such as the opioid crisis, immigration reform, human rights, healthcare reform, National Institutes of Health funding, and student loan forgiveness directly impact trainees in the present and will impact their clinical practice in the future. Psychology trainees are valuable stakeholders and can offer unique insights to these hotly debated issues. Therefore, it is imperative that students take action to develop advocacy as an integral facet of their professional identity.

The American Psychological Association of Graduate Students Advocacy Coordinating Team (APAGS-ACT) is tasked with facilitating student involvement in advocacy and raising awareness on behalf of the science and profession of psychology. ACT is involved in a range of initiatives from the campus to the national level. These include collaborating with APA’s Campus Ambassador Program to provide advocacy training, facilitating the distribution of APA’s Federal Advocacy Network Action Alerts, attending the yearly APA Practice Organization Practice Leadership Conference in Washington D.C., and involvement in each member’s state, provincial or territorial psychological associations (SPTA).

A great way to gain experience is by becoming a graduate student member of your SPTA. Involvement in your SPTA opens networking and mentorship opportunities with students and professionals who share your interests. SPTA’s are often pursuing local initiatives and sponsor student engagement in State Lobby Days. Some even offer student advocacy training programs. In fact, APAGS-ACT, in conjunction with CAPP and Division 31 of APA, annually recognizes one SPTA with the “SPTA of the Year Award” for its dedication to graduate students.

Promoting change is hard, and advocacy work is no different. It is easy to feel discouraged when your advocacy efforts face resistance or are stifled, not to mention the risk of reprisal or discrimination from those who hold opposing viewpoints. Building a strong support network, along with finding allies that share your dedication to making a difference, will be essential in overcoming these barriers and maximizing the personal and professional benefits of engaging in psychology advocacy.

Our mission is to empower students to bring their voices to bear on the important issues affecting our discipline and the public health through education, training and advocacy.

APAGS-ACT comprises a Chair and six Regional Advocacy Coordinators (RACs):

- Chair: Travis Loughran
- Northeast: Haley Sterling
- Southeast: Marilyn Paradoa
- South Central: Blanka Angyal
- North Central: Laura Minero
- Northwest: Divya Jain
- Southwest: Elyse Mowle

To get started: contact the RAC for your region or access our free advocacy training materials here.
Call for SfHP Student Advisor Council Members!

Student Council members must be current SfHP student members with specific interests in health psychology. We are especially seeking motivated and enthusiastic students with an interest in providing service through involvement in the SfHP student council.

- Communication Committee (2 positions/2-year term)
- Membership Committee (1 position/2-year term)
- Diversity Committee (1 position/2-year term)

To apply, please email the following documents to div38studentreps@gmail.com by June 4, 2018:

1) Statement of Interest: Describing which position(s) you are interested in filling and why, including examples of how you would contribute to the council (limited to 1 page in length)
2) Curriculum Vitae
3) Statement of support from your primary mentor

Looking for a job or fellowship?
New postings to the DIV38 listserv about jobs and postdoc positions are being compiled (see the webpage here). Spreadsheets are updated weekly, so continue to check back!

"The platform championing systems transformation to move health integration forward."
Learn more at MakeHealthWhole.org.
In addition, read about the 8 core competencies of behavioral health here.

Student Advisory Council Members:

Council Chair: KayLoni Olson, Alpert Medical School Brown University
Past chair: Jenny Warnick, University of Florida
Chair-elect: Aviva Ariel-Donges, University of Florida

Membership Committee
♦ Hannah Holmes, Wayne State University
♦ Jessica Naftaly, Rosalind-Franklin University

Communication Committee
♦ Allison Carroll, Medical University of South Carolina
♦ Valeria Martinez-Kaigi, VA Connecticut Healthcare System

Diversity Committee
♦ Tamara Chavez, John F. Kennedy University