

Clinical Geropsychology News

Society of Clinical Geropsychology

APA Division 12, Section II

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comment on the contents of this Newsletter.

*Published articles do not necessarily represent the
official views of Section II, Division 12, or APA

President's Column

Erin Emery, Ph.D.



As you now know, Martha Crowther has resigned as President of 12/II. We are grateful for her leadership thus far, and wish her the very best as she faces incredibly difficult challenges. In this time of transition, David Powers and I are also very grateful for the continuous support and hard work of the 12/II Board. I am continuously struck by the wonderful community we have in geropsychology – one of compassion,

teamwork, mentorship, and growth. It takes a village to treat older adults, and it takes a village to develop and support geropsychologists!

In that vein, I am very excited about the 12/II symposium panel on **Mentoring in Clinical Geropsychology** led by Drs. Michele Karel, Amy Fiske, & Patricia Arean (Thursday, 8/4, 12-1pm, Convention Center, Street Level, Room 148). And being honored for his extensive career in geropsychology research and education, Dr. David Gutmann will be accepting the **Powell Lawton Award**. His address, **“The Dynamic History in**

Later Life” will follow the mentoring symposium, just down the hall (8/4, 1-2 pm, Convention Center, Street Level 143A).

Please join us for the **Division 12/II Business Meeting** on Saturday, 8/6, 10am-12pm in the Division 12 Hospitality Suite – students and new members are encouraged to attend!

And for those who are still at the convention on Sunday morning (8/7, 9-10a, Convention Center, Street Level, Room 156), please join Barry Edelstein, Nancy Pachana, Greg Hinrichsen, and I in a discussion about **geropsychology training** in light of healthcare reform and policy changes internationally. Note that this session is marked Presidential Address in materials you may have received; we will be having a discussion in lieu of lecture.

Also, please join us for the **Division 20 -12/II Social Event** at Old Ebbitt Grill on Friday, 8/5, 6:30-7:30pm. Reservations and pre-payment are required – please contact me if you would like to attend (erin_emery@rush.edu). We have over 50 people already registered – it’s the place to be on Friday night!

Please see the list of aging sessions at the convention compiled by Debbie DiGilio for a more comprehensive view of available aging education. Looking forward to seeing all of you at APA!

Officers of the Society of Clinical Geropsychology

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Consider This!

Update from the Council of Specialties

Douglas Lane, Ph.D.

VA Puget Sound Healthcare System

In the last few months, professional geropsychology has been awarded formal specialty status by the APA Council of Specialties (www.cospp.org). This is a significant accomplishment for our specialty and is the result of long, difficult work by many people. It is a landmark event.

The other specialties are: Behavioral and Cognitive Psychology, Clinical Psychology, Clinical Child Psychology, Clinical Health Psychology, Clinical Neuropsychology, Counseling Psychology, Family Psychology, Forensic Psychology, Group Psychology, Psychoanalysis in Psychology, Rehabilitation Psychology, and School Psychology.

Each of the five major organizations in professional geropsychology has been asked to select a representative to form a fellowship (what COS calls a "synarchy") that will represent our specialty to the Council of Specialties. I am proud and grateful to have been selected as the representative for APA Division 12/2 (Society for Clinical Geropsychology). The other organizations in our synarchy are: Psychologists in Long Term Care, APA Division 20 (Adult Development and Aging), The Council of Professional Geropsychology Training Programs, and the APA Committee on Aging. Bob Knight, representing the Council of Professional Geropsychology Training Programs, is the lead member for our synarchy. The other representatives are:

Tammi Vacha-Hasse: Psychologists in Long Term Care
 Patricia A. Areán: APA Council on Aging
 Cameron Camp: APA Division 20 (Adult Development and Aging)

Dr. Knight has been involved in an initial teleconference with the COS. Emerging issues included the now increased ability to apply for APA accreditation for geropsychology postdoctoral fellowships. Also, a survey of our membership has revealed that a majority of responders would like for us to initiate the process of applying for the establishment of ABPP certification in geropsychology, although a small minority did not. If this step is taken, it would involve a lengthy, concerted effort by the five organizations in our specialty, as well as a cost of several thousand dollars. Lastly, we have begun a discussion of making a unified, formal announcement of our specialty status to allied organizations (e.g. American Geriatrics Society, American Association for Geriatric Psychiatry, Gerontological Association of America, etc.).

Please feel free to let me know your thoughts and concerns as we move ahead. Also, a warm handshake and a "thank you" to all of those who made this development possible.

Douglas W. Lane, Ph.D., ABPP
 Fellow, American Academy of Clinical Psychology
 Clinical Psychologist/Geriatrics
 Geriatrics and Extended Care Service
 VA Puget Sound Healthcare System

Table 1. List of web-based mental health resources appropriate for older adults

Mayo Clinic Senior Health Center:

<http://mayoclinic.com/health/senior-health/>

Browse short, informative articles on healthy aging. Examples include, "Sexual Health and Aging," and "Depression and Aging: Make Sure to Seek Treatment."

Geriatric Mental Health Online:

www.gmhfonline.org/

Click on "Consumer/Patient Information" to find brochures on mental health concerns such as anxiety, sleep problems, Alzheimer's disease, and coping with disasters.

NIH Senior Health: <http://nihseniorhealth.gov/>

Search for health information on topics such as, "Memory and Mental Health." Use the buttons at the top of each page to make the text bigger, change text color, or hear the text read aloud.

Intelihealth: www.intelihealth.com

Click on "Seniors' Health" to access a broad range of info on health and mental health issues, including "Wellness and Prevention," "Diseases and Conditions," and "Depression Self-Assessment."

Help Guide: www.helpguide.org

Click on "Aging Well" under the heading "Seniors and Aging" to access practical advice on topics such as "Senior Exercise and Fitness Tips," "Coping with Grief and Loss," and "Improving Your Memory."

ECouch: [Ecouch.anu.au.edu](http://ecouch.anu.au.edu)

Free online self-help for anxiety and depression.

Healthwise's "Healthy Thinking" conversation:

https://www.harvardpilgrim.org/portal/page?_pageid=213.264833&_dad=portal&_schema=PORTAL.

Easy-to-use and engaging psychoeducational module on how patterns of thinking relate to mood and behavior.

UCSF Memory and Aging Center:

<http://memory.ucsf.edu/>

Numerous resources for patients, providers, and caregivers on cognition, dementia, and mental health.

Internet-based Resources to Support Mental and Emotional Health in Older Adults

Rebecca Crabb, Ph.D.

Rebecca.Crabb.Phd@gmail.com

The Internet offers a rapidly growing number of resources to support mental health care. Numerous reliable psychoeducational sites are easily accessible to the public and available in a variety of formats ranging from text articles, to podcasts, to interactive learning modules (for examples, see Table 1). Computerized cognitive-behavioral therapy (CCBT) programs go beyond presentation of information and engage users in interactive sessions to help them learn and practice CBT strategies such as self-monitoring, behavioral activation, and cognitive restructuring (e.g., ECouch, available at ecouch.anu.edu.au). Data from controlled trials indicate that CCBT is an effective treatment for depression and anxiety disorders, especially when accompanied by live support from a mental health provider (Andrews, Cuijpers, Craske, McEvoy, & Titov, 2010). A more recent innovation in the emerging field of mental health technology is the use of mobile phone applications to deliver interactive self-help programs. For example, the PTSD Coach allows users to track and manage symptoms of post-traumatic stress disorder; see <http://www.ptsd.va.gov/public/pages/PTSDcoach.asp>.

The increasing number of high quality, internet-based mental health resources presents an unprecedented opportunity to reach underserved populations, including older adults. Internet-based interventions for depression and anxiety offer a means of overcoming barriers to accessing traditional mental health services that are commonly experienced by older adults, such as stigma, transportation difficulties, and a lack of providers who are trained in geriatric mental health care. However, a relatively slower rate of technology adoption among older persons raises questions about how receptive older adults will be to these resources.

National statistics indicate that a growing minority of older adults are internet users, and that the majority of older internet users already use online health resources. In the United States, 38% of adults aged 65 years and

older use the internet, compared to 74% of all adults (Fox, 2010). Internet use among older adults is increasing rapidly, from 17 to 27% of adults aged 76 years and older between 2005 and 2008. Almost 70% of older Internet users go online to find health information; searching for health information is the third most common online activity among older adults, after email and undirected searching (Fox & Jones, 2009).

These data suggest that the internet is becoming a standard source of health information for older adults. However, there are no existing nationally representative data on whether or how often older adults use the internet for mental health related information. As part of my postdoctoral research at the Geriatric Research Education and Clinical Center at the VA Palo Alto, I recruited 50 older veterans at a VA primary care clinic and surveyed them about their current use of Internet resources and their interest in using web-based resources to manage aspects of health and mental health care (Crabb, Rafie, & Weingardt, 2011). Respondents ranged in age from 65-95 years, with a mean age of 80.3 years, and a mean of 12.3 active health problems documented in their medical records. Nearly three-quarters of survey respondents were regular Internet users and over half had experience in using the Internet to search for health information. Fewer than 10% of respondents reported that they had ever used the internet to search for information related to mental health, emotional, or drug and alcohol problems in the past, which corresponded to a low rate of diagnosed mental health and substance use problems in the sample. However, more than 50% of all respondents reported that they would be interested in using the internet to screen for common mental health problems and to learn new ways to improve mood and cope with stress.

As part of a comprehensive literature review, I also looked at how older adults had fared in published trials of computerized CBT for depression. Older adults tended to be under-represented in these studies, comprising less than 5% of study samples. However, those older adults who did participate were equally or less likely to drop out than younger adults and the intervention was just as effective.

Overall, my research supports the feasibility of using the internet as a means of making evidence-based information and interventions available to older adults. Although older adults seem to be willing to use, and capable of benefiting from CCBT, they are rarely targeted for studies of online interventions.

Based on my observations, one major factor holding older adults back from making full use of available resources may be negative perceptions about older adults and technology. I initially encountered much skepticism from providers about whether older adults would use the internet at all, let alone for mental health support. I, too, remember reacting with surprise upon one older veteran telling me that he was an avid follower of the stock market online. If we as providers believe that older adults are unlikely to use or benefit from online information or interventions, we may fail to encourage them to make full use of available resources. Interestingly, attitudes seem to have shifted just within the past two years, which may reflect increased rates of internet use in older adults. "Oh yes, they're online," a colleague recently said, without hesitation, about the patients she sees at an outpatient psychiatry clinic for people over 60. Meanwhile, providers at the primary care clinic where I conducted the study report that they now regularly ask older patients if they are internet users and direct them to the VA's collection of online health resources at MyHealtheVet (www.myhealth.va.gov).

In conclusion, I encourage mental health providers to consider suggesting web-based resources to support older patients' mental and emotional health. Table 1 presents online resources that provide reliable mental health information specific to the concerns of older populations. Many of these resources have been endorsed by Consumer and Patient Health Information (CAPHIS; <http://caphis.mlanet.org/consumer/seniorhealth.html>), an organization of medical librarians that maintains lists of credible web health resources.

References

Andrews, G., Cuijpers, P., Craske, M., McEvoy, P., & Titov, N. (2010). Computer therapy for the anxiety and depressive disorders is effective, acceptable and practical health care: A meta-analysis. *PLoS ONE*, 5, e13196. doi:10.1371/journal.pone.0013196.

Crabb, R., Rafie, S., & Weingardt, K. (2011). Older primary care patients' use of health-related internet resources. *Gerontology*. doi: 10.1159/000329340

Fox, S. (2010). Four in ten seniors go online (online). Retrieved November 1, 2010 from: <http://www.pewinternet.org/Commentary/2010/January/38-of-adults-age-65-go-online.aspx>

Fox, S. & Jones, S. (2009). The social life of health information. Retrieved on September 17, 2010 from: <http://www.pewinternet.org/Reports/2009/8-The-Social-Life-of-Health-Information.aspx>

<h2 style="margin: 0;">The Student Voice</h2>

Graduate-level Geropsychology Specialization

Shannon Foster, PhD and Joe Dzierzewski, MS
 Student Representatives
 Society of Clinical Geropsychology

Greetings fellow students! This Student Voice column is special in two ways: (1) It is the first time we have written a joint column for your reading pleasure, and (2) This will be Shannon's (AKA Dr. Foster's – congratulations!) last official act as your Student Representative.

Without further ado, the focus of the current article is on the choice of emphasizing/specializing in geropsychology while at the graduate-level of training versus attending a generalist psychology graduate program. Whereas Shannon attended the University of Colorado at Colorado Springs, which has an established emphasis in clinical geropsychology, Joe attended the University of Florida, which does not have a dedicated training track in clinical geropsychology. However, we have both known since the beginning of our graduate training of our desires to focus on issues of late-life. As student members of the Society of Clinical Geropsychology, it is clear that you all have at least some interest in older adults and we hope this column will help you consider the factors involved in apportioning your time towards an emphasis in geropsychology at the graduate-level, or at least bring to your attention to some of the potential outcomes of geropsychology specialization or generalist training at the graduate-level.

Graduate-level geropsychological specialization

If you have a sincere passion for older adults and truly know that this is the population that interests you, then having an early opportunity to get clinical and research experience within that population can broaden your understanding and lay the foundation for future work and experiences. Many of the clinical skills essential in working with older adults are very similar to those skills required to successfully work with individuals of all ages (i.e., understanding the individual in terms of the full biopsychosocial model with an

emphasis on contextual and historical data). Early geropsychological specialization allows for training in the foundational knowledge base and skill set as outlined in the Pikes Peak Model. Early involvement within a specialty area allows for increased networking and professional development opportunities that might not present themselves otherwise. Additionally, there are an increasing number of internship sites with geropsychology tracks; students who have specialized in geropsychology may find that they are in demand at these internship sites.

Graduate-level generalist training

If you are coming directly out of undergraduate training and have not yet developed a strong passion for older adults, a program with a strong generalist training may be preferred. Generalist programs afford greater exposure to populations across the lifespan. During the course of your generalist training, you may find that you love working with older adults (and we think you would ultimately find this work very rewarding). Regardless, through greater contact with individuals at different stages of development from childhood to adulthood, you will have the opportunity to discover which population is most interesting to you or which population really drives you. Depending on what type of internship you apply for following your graduate training, you may find that there are some internship sites that prefer students with broad graduate-level training. It seems to us that graduate school is inherently a time for growth, as a scientist, clinician, and person. Generalist training allows for broader exposure and growth as a clinician and researcher, along with identity formation as a general clinical psychologist.

Certainly, there are compelling reasons for selecting a specialized geropsychology or generalist psychology graduate training program. Despite some of the differences described above, the primary goal of both types of programs is to train students for independent careers in clinical psychology. Regardless of the type of graduate program you choose, it is possible to specialize in geropsychology after receiving a PhD from a generalist graduate training. Likewise, it is also possible to work with a broad range of adult populations after receiving your graduate degree in geropsychology. If you're trying to make a decision between different types of programs, we encourage you to talk with 12/II student and professional members about their experiences in generalist and geropsychology training programs.

As we near the end of our training and look back on our experiences and forward to our career trajectories, we realize that the most important factor was that we found programs that suited our training needs and provided the experiences we needed to grow and develop in our own ways. It is more important to be mindful of where you are now and where you are headed as you make your decisions! Remember, geropsychology is a relatively new field and some of the most skilled and successful geropsychologists are those that did not specialize until very late in their careers.

A Special Note from Shannon

It has been a pleasure to serve as one of your Student Representatives for the previous 2 ½ years. This has been a wonderful experience! Again, thank you for allowing me to be your Student Representative!

Shannon Foster: Shannon.Foster@sharp.com

Joe Dzierzewski: joedz@PHHP.UFL.EDU

Facebook group: <http://www.facebook.com/group.php?gid=53793187809>

Announcements and Member News

This is a new section of the newsletter intended to highlight the accomplishments of the Section's members. If you have received any local or national awards, or want to let the Section know about recently accepted publications, or recently published books, please email updates to Erin Woodhead (Erin.Woodhead@va.gov) and Kaci Fairchild (JenniferKaci.Fairchild@va.gov).

Announcements

Division 12/II Welcomes New Newsletter Co-Editors

We are pleased to introduce our new Newsletter Editors, *Drs. J. Kaci Fairchild and Erin Woodhead*, who spearheaded this issue. Welcome Kaci and Erin! We have enjoyed serving as Newsletter Editors for the past 3 1/2 years and look forward to continuing to serve the Society of Clinical Geropsychology in other capacities in the future. See you all at APA!

Brian and Sherry

12/II Student Paper Award Winner Announced

We are pleased to announce that Sheri Gibson, MA has received the Annual Student Paper Award from the Society of Clinical Geropsychology. Sheri is a doctoral candidate at the University of Colorado at Colorado Springs. Sheri's paper is entitled, "Assessing Knowledge of Elder Financial Abuse: A First Step in Enhancing Prosecutions." Sheri will present a poster based on her paper at the Division 12 Awards reception at this year's APA convention. Congratulations to Sheri!

American Board of Clinical Neuropsychology certified its 800th psychologist!

The American Board of Clinical Neuropsychology (ABCN) is pleased to announce that it has now awarded board certification to more than 800 psychologists who specialize in the assessment and treatment of patients with brain disorders. The 800th board-certified neuropsychologist passed the oral examination held during April 2011 at Rush University Medical Center in Chicago. ABCN was incorporated in 1981 and is a member board of the American Board of Professional Psychology (ABPP), the organization that oversees board certification of professional psychologists. ABCN-certified neuropsychologists practice in 49 states and 4 provinces. About 40% provide services to pediatric patients. Similar to board certification in medical specialties, ABCN applicants must document appropriate education and training, and pass written and oral examinations. For applicants trained since 2005, a formal two-year post-doctoral residency is required. A directory of neuropsychologists who are board-certified by ABCN is available online at www.theacn.org/diplomates/database/view.php.

For more information go to www.theabcn.org or contact ABCN at:

American Board of Clinical Neuropsychology
 Department of Psychiatry (F6332, MCHC-6)
 University of Michigan Health System
 1500 East Medical Center Drive
 Ann Arbor, MI 48109-0295
 voice (734) 936-8269
 fax (734) 936-9761

The American Psychological Association's Office on Aging has added new information to its website!
Updates include:

-The 2011 APA Guidelines for the Evaluation of Dementia and Age-Related Cognitive Change:
<http://www.apa.org/pi/aging/resources/dementia-guidelines.aspx>

-The Public Description of the Professional Geropsychology Specialty:
<http://www.apa.org/ed/graduate/specialize/gero.aspx>

-Programs and CE offerings planned for the APA 2011 Convention, including the CONA Conversation Hour and the Research Mentoring Event for Students and Early Career Investigators in Neuropsychology and Geropsychology (see Office on Aging update in this newsletter for more information about these events).

Member News

Awards and Recognitions

David Gutman will be presented with the M. Powell Lawton Award for Lifetime Contribution to Clinical Geropsychology at the APA Convention in August. Dr. Gutman was nominated for the award due to his founding of Northwestern University's Older Adult Program and his work towards understanding the psychological development of middle-aged and older adults. His speech will be dedicated to his late wife, Joanna.

Peter Kanaris received the Presidential Award at the New York State Psychological Association annual convention for his dedicated service to the association as well as his mentorship of future leaders.

Brad Karlin was the recipient of a Spotlight Award as well as Outstanding Administrator Award from the VA Section of Division 18 of the American Psychological Association.

Jennifer Zimmerman and Amy Fiske organized and guest edited a special issue of Educational Gerontology on "Mentoring in Clinical Geropsychology". This work was the result of their work on 12-II Mentoring Committee. Please read more about this work in the Committee Updates Section of this Newsletter.

Recent Member Publications

Kanaris, P. (2011, June 26). Focus given to psychologist's role in universal education. *National Psychologist*, page 7.

Karlin, B. (2011). Cognitive behavioural therapy with older adults. In K. H. Sorocco & S. Lauderdale (Eds.), *Cognitive behavioral therapy for older adults: Innovations across care settings* (pp. 1-28). New York: Springer Publishing Company.

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Mast, B. (2011). *Whole person dementia assessment*. Baltimore, MD: Health Professions Press.

Qualls, S.H., Scogin, F., Zweig, R.A., Whitbourne, S.K. (2010). Predoctoral training models in professional geropsychology. *Training and Education in Professional Psychology*, 4, 85-90.

Snyder, R.J. & Zweig, R.A. (2010). Medical and psychology students' knowledge and attitudes regarding aging and sexuality. *Gerontology and Geriatrics Education*, 31, 235-255.

Committee Updates

Education Committee Update Submitted by Erin Woodhead and Erin Emery

The Education Committee of the Society of Clinical Geropsychology recently started data collection for a survey of students' geropsychology training experiences in the USA, Canada, Australia and New Zealand. The project is funded by an award from the Council of Professional Geropsychology Training Programs. The goal of the project is to assess training opportunities and student competencies in geropsychology and determine the factors that influence students to pursue or not pursue a career in geropsychology. We recently sent the link to the survey out to many listservs, including the Society's listserv. The survey is open to clinical/counseling graduate students, interns, and postdoctoral fellows.

Please encourage your trainees to participate! The link for the survey is <http://psy.uq.edu.au/ger>

Mentoring Committee Update Submitted by Amy Fiske, PhD

The Mentoring Committee is pleased to announce publication of a special issue of *Educational Gerontology* (issue 5, May 2011) focused on mentoring. Committee members Jennifer Zimmerman, Amy Fiske and Forrest Scogin served as guest editors for the special issue. The issue was based on the Mentoring Committee's 2009 GSA symposium, at which award-winning mentors provided guidance for mentoring geropsychology trainees at different levels, ranging from predoctoral through early career. Jen, Amy and Forrest provided an overview for the special issue, highlighting the urgent need for training in geropsychology to keep pace with projected demands, describing current training programs and resources and outlining the role of mentoring in the training process. They also reported on a web-based survey conducted by the Mentoring Committee to assess needs of current geropsychology trainees and professionals. Bob Knight contributed an article considering mentoring within a doctoral training program from the perspective of the Pike's Peak Model. Michele Karel and Carolyn Stead co-authored an article on mentoring during internship and postdoctoral training, providing both mentor and mentee perspectives on this transitional period. Peter Lichtenberg introduced the RESPECT model for mentoring junior faculty. Keith Whitfield and Christopher Edwards offer observations on special challenges and opportunities associated with mentoring geropsychology trainees who are members of ethnic minority and other special populations. The Mentoring Committee is grateful to the contributors for these thought-provoking and inspiring articles.

Multicultural Committee Update

Submitted by Yvette Tazeau, PhD, Section Chair

The Multicultural Committee is planning to start a website repository of articles on diversity issues in working with older adults. The committee would like to encourage members to send their favorite diversity article citations/references for inclusion in this forthcoming website section. Please send your citations to Yvette Tazeau at ytazeau@ix.netcom.com. Thank you!

Interdivisional Healthcare Committee (IHC) Update

Submitted by Cheryl Shigaki, Representative for Division 12-2

New Orleans, LA
February 12, 2011

I. Louisiana's Act 251: Emerging developments and concerns

Background: In Louisiana's (LA) Act 251, the definition of "medical psychologist" (MP) is legally authorized and exclusive and as such, prohibits other practitioners in Louisiana from using the term. A key concern is that potential ethical problems arising from RxP practice will be reviewed by the LA Medical Board which has a different standard of ethical conduct than that of the LA Psychology Board. Furthermore, MP training now comes under the auspices of the Medical Board and thus, may conflict with traditional psychology training standards. There is much that remains unclear. Note that the American Board of Medical Psychology (ABMP) president submitted a letter to the editor which was published in the March issue of the Psychology Times (Independent publication for LA psychologists). The letter notes that psychologists with prescriptive authority will not be able to keep their diplomate status active with the ABMP unless they retain their licensure under the Psychology board as well as the Medical board. According to the article there are currently over 30 ABMP diplomates and it is anticipated that about 15 will be lost due to this issue.

States/territories/federal entities that currently have RxP models: New Mexico, Guam, Department of Defense, Indian Health Service and Louisiana. States/territories that currently have pending legislation for RxP: Hawai'i, Oregon, Ohio, New Jersey, Tennessee, Arizona, and Virgin Islands. At least two of these have the term "MP" in them – occurred prior to concerns raised by IHC, CAPP, BEA and BPA; one has removed the term.

In the course of discussion, the following issues were noted: a) The Louisiana Association of Medical Psychologists (LAMP), which is the group that moved Act 251 through to its present state, is a registered PAC (Political Action Committee – organization whose sole purpose is to lobby); b) the Louisiana Medical Board has a subcommittee that regulates MPs and LAMP is currently responsible for nominating providers who will be on the subcommittee; c) MPs are required to obtain a minimum of 25% of their CEs from LAMP; d) CAPP, the oversight board of the APA Practice Organization, awarded a legislative grant to the Louisiana Psychological Association to promote RxP legislation and LPA used the same lobbyist as LAMP to represent their shared interests in RxP (before the current negative fallout).

Recent action by APA: APA's CAPP has adopted a policy that they will no longer fund state RxP legislation efforts that use the term "Medical Psychology" or use models where prescribing psychologists place themselves under Medical Boards. Following our meeting in August, 2010, the IHC submitted a letter to the APA Ethics Committee expressing concern regarding Act 251's mandate for licensing "Medical

Psychologists” under the auspices of the LA Medical Board. The APA BOD is now forming a task force to look at the origins, process and outcomes of LA 251, including ethical issues. The IHC plans to write a letter to the BOD to request assurance that said task force reflects a cross-section of psychologists historically involved in medical settings.

II. H&B Codes – update

Use of the assessment code (96150) was down; Medicare may be restricting use in some areas. The hassle factor and lower reimbursement than for 90801 remain issues. It was noted that anomalies exist in the private insurance sector. One major insurer has created an H&B billing code for "chart review" and has allowed for payment for this activity. Also, private insurers may *require* that a DSM code be used with H&B procedure codes. Members of the committee have been successful, however, using: Ax I: 799.90 (*dx deferred*), with Ax III: (*whatever appropriate*). (Note the code for “no diagnosis” (V71.09) being a “V-code” would not be reimbursed.) For relevant local information, psychologists should contact the major, request to speak with provider relations, and ask for a list of the covered procedure codes, including H&B codes.

III. Negotiations with UBH on reimbursement for neuropsychological testing

Representatives of Div 40, NAN, AACN and IHC have been in discussion regarding UHC decision that all authorizations/reimbursement for neuropsychological testing has been given back to UBH for management rather than management under medical benefits– this is a nationwide phenomenon. This policy goes against CMS policy in which neuropsychological evaluations are defined as a neurodiagnostic procedure and a covered medical benefit. The change in policy may have significant ramifications regarding reimbursement rates, which are lower for behavioral health services than for medical services. UBH administrators have said they are working on “customary and fair” reimbursement rates and reviewing on a case-by-case basis whether a service provided is more medical or behavioral. But it is unclear how this is being carried out and whether this process is effective. It may be that there is not much that can be done at this point with UHC/UBH decisions. NAN has developed a guide to assist providers in billing UBH-UHC (attachment available upon request: ShigakiC@health.Missouri.edu), but this may be of limited help. Also, a contact person has been identified at UBH (nationwide) “who can assist with billing questions.” *David Lauter, MA, LPC, Director of Provider Services, United Behavioral Health-CNS, 13655 Riverport Dr., Maryland Heights, MO 63043, david.lauter@optumhealth.com.*

IV. APA Priorities and the future

APA is focusing on getting psychologists included in federal definitions of “physician.” Key allies in the Senate (S. 483) and the House of Representatives have now introduced legislation to include psychologists in the Medicare “physician” definition. Inclusion would give the profession a better advantage in a range of negotiations.

The IHC is planning to have members initiate discussion with their respective divisions/sections to obtain thoughts on APA’s funding and advocacy priorities. After gathering this information, the IHC will draft a letter to CAPP to provide recommendations.

Division 12 Update
Submitted by Brian D. Carpenter
Section II Representative

Teleconference of the Division 12 Board of Directors
June 22, 2011

Below is a summary of topics discussed during the recent Division 12 Board Meeting.

Elections

Dr. Goldfried reported election results for next year's Board, with Mark Sobell chosen President Elect and Robin Jarrett Treasurer. The Division lost a seat on APA Council this year, so no election was needed for a replacement position.

Awards

Dr. Marv Goldfried announced the following awards, which will be presented at the August convention:

- Award for Distinguished Scientific Contributions to Clinical Psychology – Catherine Lord
- Florence Halpern Award for Distinguished Professional Contributions to Clinical Psychology – Steven Dennis Hollon
- Stanley Sue Award for Distinguished Contributions to Diversity in Clinical Psychology – Steven Regeser Lopez
- Toy Caldwell-Colbert Award for Distinguished Educator in Clinical Psychology – Thomas F. Oltmanns
- Theodore H. Blau Early Career Award for Distinguished Professional Contributions to Clinical Psychology – Cortney Soderlind Warren
- David Shakow Early Career Award for Distinguished Scientific Contributions to Clinical Psychology – E. David Klonsky

Membership

The Division gained 54 new members as of June 1st, though this did not keep up with the number of members lost so far this year, continuing the trend from previous years. To combat the trend, the Committee has started to identify student representatives in APA approved programs to promote the Division at their schools. In addition, when new students join, they can mention a faculty member who referred them, and these mentors will be recognized in *The Clinical Psychologist*. The Committee has also expanded its Facebook presence for early-career members. The Committee Chair, Tony Cellucci, will be representing the Division at the Committee on Division/APA Relations Conversation Hour at the convention, one of a series of activities that APA is undertaking to increase divisional membership. If you're interested in seeing more details about the current Division membership, you can look over demographics and other characteristics at <http://www.apa.org/about/division/div12-2010.aspx>.

Convention Program

There is an extensive range of clinically-related offerings on tap for the APA convention in August, including multiple opportunities to receive continuing education. There has been discussion within APA

about reformatting hours for the convention in the future, the result of which would reduce the Society's hours by approximately 20%, which could have a particular impact on each Section. The Society's Council representatives are strategizing about how to address this at the Council meeting in August. Looking ahead, planning is already underway for the convention in 2012 in Orlando.

Publications

Section 10 has suggested that the Division could save money (approximately \$4,500) by foregoing student subscriptions to *Clinical Psychology: Science and Practice*, since most students have access through their academic libraries. This suggestion was adopted by the Board. Recent monitoring of the Society's website has indicated that, beyond the homepage, the most visited pages are for *The Clinical Psychologist*, suggesting the value of having this publication on-line.

Website and Listserv Developments

An extensive Clinician's Toolkit is now available on the Society's website, which includes free, downloadable templates that address a variety of practice needs (e.g., sample forms for progress notes, mental status exams, releases, clinical interviews, intake reports, and discharge reports). Also online, Society's members are contributing a series of consumer-oriented Fact Sheets that address basic questions about psychotherapy, such as how to choose a therapist, basic differences in therapeutic orientations, and differences among the mental health disciplines. If you are interested in contributing a fact sheet, you can contact Dr. David Tolin, the Section 3 representative.

Education and Training

A number of awards will be presented to students at the upcoming convention:

- Distinguished Student Research – Edward Selby
- Distinguished Student Practice – Kaitlin Gallo
- Distinguished Student Service – Sujata Swaroop

Fellowship Committee

Dr. Carole Rayburne reported that nine current Fellows were forwarded to APA for consideration.

Section Reports

Section 2 has been involved in efforts to pursue the ABPP credential, in concert with related geropsychology organizations. Section 3 has been discussing the continued internship match problem, with no clear solution on the horizon. Section 4 will offer two presentations at the Convention, one focused on women and the military, the other on sexual perpetrators in court testimony. The latest issue of the Section's newsletter will focus on the "new feminism." Section 6 has organized a regional conference for psychologists in the Caribbean, which will take place in November. As part of his affiliation with Section 8, Dr. Barry Hong has been involved in the revision of the MCAT and reported that approximately 25% of the revised exam will include questions about behavioral items, which may eventually prompt changes in medical student education as well. In another development, in the revised national healthcare program, psychologists were left out of the definition of a healthcare provider. Section members, in collaboration with APA, have been advocating for the inclusion of psychologists in the new legislation. Section 10 has organized two programs at APA, one on academic career paths in clinical psychology, the other on obtaining a postdoc in clinical psychology. In its efforts to improve membership, the Section has continued to expand its website, Facebook page, and has just rolled out a newsletter. The Section is also collaborating with the Diversity Committee to expand its mentoring program.

Council Reports

Council has been analyzing a Taskforce report on ways to modify and improve the Convention, with some possible restructuring of conference hours. Next, APA is turning its attention to a new Taskforce on Good Governance which will analyze the structure of APA. Finally, in continuing progress on the lawsuit between APA and the Insurance Trust, the suit was settled, but the Trust's Board of Directors have appealed the decision.

Clinical Specialty Status

The Clinical Psychology Specialty is up for renewal this year, and Dr. Irv Weiner is leading the charge on this application and has started to collect information from Division and Section members. This is a major effort and key to the Division's vitality. The report is due in January, and Dr. Weiner expects to have a draft prepared for review by the Board in time for the APA convention.

APA Office on Aging and Committee on Aging Update Submitted by Deborah DiGilio

The Office on Aging and Committee on Aging (CONA) are devoting considerable energy to assure that Psychology is given significant attention in the report to be developed by the recently convened IOM study, the Mental Health Workforce for Geriatric Populations. During the past two months, APA submitted a number of documents to inform the work of the IOM. APA CEO, Dr. Norman Anderson sent a letter to the IOM commending the launch of the study and offering APA as a resource to the Committee. The letter was accompanied by a white paper, Psychology's Role in Addressing the Mental and Behavioral Health Needs of the Geriatric Population for the IOM's consideration. APA also provided data for psychology and the specialty of geropsychology on services provided, populations served, education and training, core competencies for work with older adults, challenges in recruitment and retention, and recommendations for strengthening the geriatric mental health workforce.

We also work in concert with many other organizations to address the needs and support the strengths of older adults and to secure the inclusion of geropsychology in these efforts. Recently APA endorsed The Partnership for Health in Aging's Position Statement on Interdisciplinary Team Training in Geriatrics: An Essential Component of Quality Healthcare for Older Adults. The 35 members of this coalition, convened by the American Geriatrics Society, represent healthcare professions caring for older adults (http://www.americangeriatrics.org/pha/partnership_for_health_in_aging/interdisciplinary_team_training_statement/). We also have long standing collaborative relationships with the National Coalition on Mental Health and Aging Eldercare Workforce Alliance, National Respite Coalition, and Elder Justice Coalition

Please join the members of CONA (Sara Qualls, PhD, Chair, Patricia A. Areán, PhD, Adam Brickman, PhD, Kelly O'Shea Carney, PhD, Neil Charness, PhD and Manfred Diehl, PhD) at the following CONA-sponsored events at the 2011 APA Convention:

- CONA Conversation Hour, Psychology & Aging: Priming the Pipeline, Saturday, August 6th from 5:00 - 6:30 p.m., Renaissance Washington Hotel, Rooms 12/13/14. Please join us to provide input on this critical issue and for the presentation of the CONA Award for the Advancement of Psychology and Aging. Refreshments will be served.

- Building a Research Career in Neuropsychology and Geropsychology---Practical Advice from Those Who Have Been There, Saturday, August 6th from 11:00 a.m. to 12:50 p.m., Renaissance Washington Hotel,

Congressional Hall A. CONA, Division 40, and the Committee on Early Career Psychologists invite students and junior investigators to attend this interactive mentoring experience with senior investigators and NIH program representatives. Lunch will be served.

•Successful Models of Integrated Care---Psychological Programs That Address Health Care Disparities, Saturday, August 6th from 3:00 – 4:50 p.m., Convention Center, Street Level, Room 152B.

•All day preconvention CE Workshop: What Psychologists Should Know About Working with Older Adults, Wednesday, August 3rd from 8:00 a.m. - 3:50 p.m., Hyatt Regency Washington Hotel Lobby Level, Capitol Room A.

•Half day CE Workshop: Practice Opportunities for Working With Family Caregivers, Sunday, August 7th from 8:00 – 11:30 a.m., Hyatt Regency Washington Hotel, Ballroom Level, Concord Room.

Visit the Office on Aging website at: <http://www.apa.org/pi/aging/index.aspx> to learn more about these events. Our annual booklet, Convention Sessions on Aging Issues, that lists all programming on aging, will be available on this site in mid-July and at the Public Interest Directorate booth in the Exhibit Hall at Convention.

Updates from the Board

Membership Update Submitted by Rebecca Allen

The section currently has 197 paid members (172 regular members and 25 student members). Over half of our regular and student members also belong to Division 12. We are up about 10 regular members. Although we are down 13 student members from where we were last year at this time, we often see that students pay their membership dues before APA. As a reminder to members, payments received after October 31, 2011 will be credited to the 2012 calendar year.

The Membership Committee has a service opportunity for students: Up to three student members are needed to help with sending reminder emails about membership renewal to the Section. Additional tasks include contacting members and encouraging them to involve their own students in the Section and contacting other colleagues to try and grow Section membership. This is a great service opportunity for students and would be a great addition to a CV! If you're interested, please contact the Membership Committee at geropsychology@yahoo.com.

Executive Board Meeting Minutes Submitted by Karen Skultety Meeting via Teleconference, May 20, 2010 Minutes approved June 20, 2011 Society of Clinical Geropsychology (APA Division 12, Section 2)

The meeting was called to order by Past President David Powers at 9:05am (PST). In attendance were Erin Emery, Karyn Skultety, Sherry Beaudreau, Deb DiGilio, Norm O'Rourke, David Powers, Erin Woodhead, Jon Rose, Cheryl Shigaki, Olga Rosito and Kaci Fairchild.

APA 2011- David Powers

David reviewed the draft list of aging events put together by Deb DiGilio for APA. Deb will incorporate the 12/2 meetings into this list prior to it being distributed.

Treasurer update - Norm O'Rourke

Norm discussed his process in setting up a HBSC Bank account in Canada that allows him to access to the account for the society. This has been difficult due to Norm living in Canada and complications from HBSC. He will work with Erin Emery, President- Elect, to put her on this account as well.

Norm reviewed our current finances and conveyed the financial strength of the society. The current cash on hand is \$6517.46. There is an additional \$3000 still in an account Rick Zweig is seeing over which will be put into an account with ING. Rick will continue to oversee the ING account which has over \$23,000 and is earning interest. Norm is working on setting up a Paypal system for paying dues.

Newsletter update - Erin Woodhead, Kaci Fairchild

Erin and Kaci reviewed the current status of the newsletter. The 1st edition of 2011 will go out in June/July and will include calendar of Aging Events at APA. Kaci and Erin are meeting and planning for the future newsletters. They have been working with Brian and Sherry to learn about how to set up newsletter, print, etc. The four of them will work together for next edition.

Website update – Olga Rosito

Olga reviewed that the website is functioning well. She discussed with the board that she is considering switching to a different domain manager to provide more services and quicker follow-up. She expects this transition will happen in next month or two. The change will not change cost of maintenance or updates.

Olga encouraged people to submit new links for “News Flash” section of the website which will feature new information each month. Board members continued to give positive feedback about the site particularly about internships and Geropsych programs. She is working on updating this listing that will appear on the web

The board discussed the possibility of the newsletter editions available through website. It was discussed that the new editions will be available to members only but an older edition might be available for no cost to encourage people to join

Convention planning- David Powers, Debbie DiGilio and Erin Emery

Debbie DiGilio discussed the policy event that APA/CE office is hosting. It is on the Wednesday prior to the convention. At the event, there is a review of major issues and advocacy training occurs in the morning and then attendees go to advocate to legislators in the afternoon. There are usually three focus areas and attendees can choose which to focus on. Debbie also reviewed that there is a new policy rep for aging issues, Dr. Kelly Bulger.

Erin Emery discussed the plans for the Society of Clinical Geropsychology and Division 20 Social Event. Erin reviewed that there will be a cocktail reception from 6-7:30 on Friday evening with Division 20. This will be \$20 per member. The board discussed subsidizing this for students who wish to attend.

David reviewed the Society's meeting schedule. The Saturday Business Meeting will be in Division 12 hospitality suite from 10am-noon. The board discussed that this will overlap some events that begin at 11am

so we will aim to have meeting end by 11am. The board also discussed when to schedule Board Meeting. It was decided that 9-11am on Friday would be best time. David Powers will schedule this.

Elections and awards – Erin Emery and David Powers

Erin announced that Greg Hinrichsen is resigning as Historian. We will need to find a new person to serve this purpose. Sherry Beaudreau volunteered to serve this role.

Erin also discussed that the current student representatives are stepping down. They are requesting changing the term to the academic year, rather than calendar year. Joe D is currently seeking new representatives to serve. The board discussed staggering the representatives so that new rep will start while previous rep is still working. The Board voted to approve the change in term to academic year.

Erin reviewed the upcoming elections for President and Secretary. The President, President-elect and Past President will meet and discuss candidates. They have set a goal to have candidates by June 7th. Karyn Skultety ends her term this year so elections need to be held for this position. Karyn nominated Sherry and she accepted nomination. David will put out an open call for additional nominations.

Erin discussed that CE representative, Doug Lane, has stepped down from this position. The board discussed the challenges in this position, particularly in terms of how competitive it is. The CE process has changed at APA where many more CE workshops are being offered which means the market is more competitive to have people attend. The Board discussed possible candidates for CE representative.

David Powers discussed awards. He will review this year's awards and nomination process with David Coon. David has informed the board that the M.P Lawton and Clinical Mentorship award have been selected. The student paper award nominees have been submitted and a winner will be selected soon. Award winners will be announced in newsletter and then be presented at award ceremony on Thursday at 1pm at APA

Student update- Erin Emery

Erin reviewed a report submitted by Joe Dzierzewski. The report stated that a student-focused GSA symposium was submitted ("Clinical, Research, and Service with Diverse Elders: What Students Should Know"). Also Joe informed the board that he had received several emails from potential candidates for the new Student Rep position inquiring about the details of the position.

IHC- Cheryl Shigaki

Cheryl gave her report from the meeting of the IHC. She discussed that a Prescriptive Authority Bill in Louisiana has been a major concern of this committee given that medical board would oversee psychologists who prescribe. The committee sent a letter to APA and there is now a committee at APA who is addressing this and setting up rules for future bills in this area. The Committee for the Advancement of Psychological Practice has adopted some policies in response to this issue limiting funding for efforts that lead to "medical psychologists" who are overseen by medical boards or limit this term to those who prescribe.

Cheryl also discussed that United Healthcare has changed the neuropsych reimbursement to United Behavioral Health. Division 40 and NAM have fought this change, but appears permanent. UBH has agreed to review if reimbursement is too low on a case by case basis.

Cheryl also stated that the IHC discussed the continuing implications of healthcare reform. The APA Liaison informs IHC that APA has been working on including psychologists in definitions of “physicians” for federal healthcare reform.

Next Meeting- David Powers

David agreed to schedule a follow-up call for next month.

Meeting adjourned at 10:35am PST.

Executive Board Meeting Minutes
Submitted by Karen Skultety
Minutes approved June 20, 2011
Meeting via Teleconference, December 20, 2010
Society of Clinical Geropsychology (APA Division 12, Section 2)

The meeting was called to order by President David Powers at 9:30am (PST). In attendance were Brian Yochim, David Powers, Jon Rose, Karyn Skultety, Erin Emery, Rick Zweig, Olga Rosito, Amy Fiske, and Martha Crowther. Minutes from the teleconference held on April 2010 were approved.

Geriatric Workforce Study in Professional Geropsychology- David Powers

David presented a request from Dan Segal and Sara Qualls to update a past workforce study on professional geropsychology. They have requested \$500 from the society, Division 20 and COGTP in support of these efforts. The efforts will include updating the survey, performing the survey and then performing an analysis of the results. The hope is to have a white paper to present by APA and that the report can be published soon after. It is hoped that this report can help with lobbying efforts. The board approved to grant these funds and David approved this to come from the presidential initiative fund.

AMA Dementia Workgroup- Jon Rose

Jon discussed a workgroup put together by AMA in which they discussed appropriate standards of care and guidelines for screening for dementia, including what screening tools should be used by primary care physicians. Although the AMA reported that psychologists were invited to participate, there has not been one identified at this time. The workgroup has now published a draft report for comment. There are a number of concerns with the report, such as utilizing the MMSE without appropriate norms for education/ethnicity. Division 40 has written an official reply stating that clients should be referred to neuropsychologists for assessment. The board discussed other ways to comment and provide feedback. We agreed to coordinate efforts with Deb Digilio to respond as necessary.

Treasurer Report- Rick Zweig

Rick reported that he has been in communication with Norm O'Rourke (incoming treasurer) who is now reporting that it is unclear if Simon Fraiser will continue to host the webpay option for our membership renewals. It now appears we will need to pursue a different option in 2011. Norm plans to follow-up on this issue in 2011. His recommendation is that the membership renewal requests go out as soon as possible so we can continue to use this service as of now. Ann is planning on sending out the first notice of membership renewals at the end of December and a reminder in January so hopefully members will respond. Rick also discussed that he is in the process to transitioning Norm O'Rourke as treasurer, which involves having Norm put on our accounts. The board thanked Rick for all of his efforts as treasurer and service to the society.

Geropsychology Council of Specialties- David Powers and Martha Crowther

David presented to the board that this council has stated that annual dues for being a part of this council will be \$200-300. Additionally, the council is asking for funds to support the geropsychology specialty representative (Bob Knight) attending the APA General Council meeting. It is unclear what the exact amount is that is being requested. Martha Crowther will obtain a more exact cost, but the estimate of \$600-800 was discussed. Rick discussed the financial implications of this. Rick proposed that for 2011 the society offer \$250 per year for dues and up to \$500 for travel for a total of \$750 per year. The board voted and approved this. The board also discussed nominating a representative to be on the geropsychology council of specialties. Martha has asked Doug Lane to serve as our representative and will follow-up on this issue.

2011 Officers- David Powers

David reviewed the list of the 2011 officers.

Mentoring Committee- Amy Fiske

Amy discussed the numerous activities the membership committee. The first is that the committee presented a symposium at GSA last year that is now being written up as a series of articles. This symposium may also be presented at APA. In addition, they have developed a section on the society website. Amy also discussed an R25 grant that they are working on with Pat Arean to support mentoring efforts. They have joined with CONA as this committee is also quite interested in mentoring. The committee has also published an article in the COGTP newsletter. Dolores Gallagher-Thompson has volunteered to join the committee. Amy raised the possibility of the mentoring committee becoming a standing committee and the board discussed this. Amy also discussed finding a new committee chair over the next year.

Newsletter- Brian Yochim and Sherry Beaudreau

Brian discussed that 2011 will be the final year that he and Sherry will serve as editors. The board discussed ways of finding new editors. Brian shared that he and Sherry thought it would be helpful to have two editors. We discussed the possibility of one editor being a student.

Website- Olga Rosito

Olga expressed appreciation for the board's acknowledgement of her work. She has been updating the website. She discussed being able to post announcements and calls for new officers on the website. She also shared that she is working on a news reel which would have news and lists of important events ongoing for members to access. Olga is also working on getting past newsletters up on the website. These will be in the members section. We discussed putting a "teaser" from the newsletter in the public area that would then have a link to encourage people to join if they want to learn more. We also discussed putting the membership directory in the membership only area.

2011 APA Conference- David Powers

Martha reviewed that she has submitted the hours for our division. The hours will include the Lawton award winner presentation, presidential address and business meetings as well as a symposium on mentoring. Martha also plans to invite the past presidents and officers of the society to attend the business meeting to provide recognition of their contributions and to bring the society together. This will also provide a mentoring opportunity.

Meeting was adjourned at 3:35PST.

CALL FOR ARTICLES

The 12/11 Editors are currently seeking:

- Editorials
- Opinion pieces on current issues in geropsychology
- Professional development articles for budding geropsychologists
- Summaries of your geropsychology research
- Critical reviews on innovations and new directions in geropsychology
- Cartoons or other creative pieces on aging

If you have an idea about something you'd like to contribute, run it by us today!
We'd love to hear from you!

Please contact Erin Woodhead at Erin.Woodhead@va.gov or Kaci Fairchild at JenniferKaci.Fairchild@va.gov

RESEARCH MENTORING EVENT FOR STUDENTS AND EARLY CAREER INVESTIGATORS

“Building a Research Career in Neuropsychology and Geropsychology:
Practical advice from those who have been there”

sponsored by

Division 40 (Clinical Neuropsychology) Science Advisory Committee
APA Committee on Aging (CONA)
APA Committee on Early Career Psychologists (CECP)

119th APA Annual Convention

Saturday, August 6, 2011

11:00 AM – 12:50 PM

Renaissance Washington Hotel -- Congressional Hall A

Students and junior investigators are invited to attend this interactive mentoring experience. A panel of successful mentor-mentee pairs will share their perspectives on pursuing research career paths in neuropsychology and geropsychology. Then, senior investigators and NIH program representatives will be on hand to answer questions in informal small-group and one-on-one discussions on issues regarding the development and implementation of early career research programs.

Session Organizers

John Lucas, PhD, ABPP-CN: Chair, Div40 Science Advisory Committee
Robert H. Paul, PhD, ABPP-CN: Incoming Chair, Div40 Science Advisory Committee
Michelle Braun, PhD, ABPP-CN: APA Committee on Early Career Psychologists
Adam M. Brickman, PhD: APA Committee on Aging

Panelists

Robert Bilder, PhD, ABPP-CN & Rachel Casas, PhD, UCLA Neuropsychiatric Institute
H. Gerry Taylor, PhD, ABPP-CN, University Hospitals, Cleveland, OH & Lisa Schwartz, PhD, Childrens Hospital of Philadelphia
Peter Lichtenberg, PhD, Institute of Gerontology, Wayne State University & Brian Carpenter, PhD, Washington University

Participants

Jennifer Manly, PhD, Columbia University
Paula Shear, PhD, University of Cincinnati
Molly Wagster, PhD, National Institute on Aging
Jovier Evans, PhD, National Institute on Mental Health
Toni C. Antonucci, PhD, University of Michigan

Jennifer Vasterling, PhD, VA Boston Healthcare System
Ramona Hopkins, PhD, Brigham Young University
Jessica Chapin, PhD, Aurora Advanced Healthcare
Neil H. Charness, PhD, Florida State University

Food will be provided

For additional information about this research mentoring program contact: jlucas@mayo.edu

**APA Division 12, Section II: The Society of Clinical Geropsychology
2010 MEMBERSHIP DUES FORM**

Name (Print)	Degree	Membership Status (Please check one) <input type="checkbox"/> Renewal <input type="checkbox"/> New Member	
APA Member No. (Required) _____ (You must be a member of APA to join Section II. Student applicants must have their application endorsed by a faculty advisor who is an APA member)			
APA Membership Status (Please check one) <input type="checkbox"/> Fellow <input type="checkbox"/> Member <input type="checkbox"/> Associate <input type="checkbox"/> Emeritus (retired member of APA) <input type="checkbox"/> Student Member (graduate, internship, postdoc)			
Street Address			
City	State	Zip Code	
Phone ()	Fax ()		
E-mail _____ (Note: E-mail is crucial for our records, and therefore strongly encouraged) <input type="checkbox"/> CHECK HERE TO OPT OUT OF THE LISTSERV			
Are you a member of Division 12 (The Society of Clinical Psychology)?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes (as a student)	<input type="checkbox"/> No
Please list other Divisions you are affiliated with:			
Special Interests within Geropsychology			
What is your PRIMARY emphasis as a Geropsychologist? (Define primary as 51% or greater) <input type="checkbox"/> Clinical practice <input type="checkbox"/> Research <input type="checkbox"/> Teaching <input type="checkbox"/> Administration			
PAYMENT OF DUES (USD)			
\$25.00 for Members, \$10.00 for Students, Emeritus members are dues exempt			\$
B. Added Contribution to Section II (donations are strictly voluntary, but greatly appreciated!)			\$
C. Total Amount Enclosed (Please make your check in U.S. dollars payable to APA Division 12, Section II)			\$
Signature			Date
If Student, Faculty endorser (print)			
Faculty signature			Date
Mail this form, along with your check payable to "APA Division 12, Section II" to Norm O'Rourke (treasurer): Norm O'Rourke, Ph.D., R.Psych., Department of Gerontology, Simon Fraser University - Vancouver Campus, #2800 - 515 West Hastings Street, Vancouver, BC, Canada V6B 5K3 E-mail: ORourke@sfu.ca; Phone: 778-782-5175			
CHECK HERE TO BE INCLUDED IN THE MEMBERSHIP DIRECTORY			