

The Clinical Psychologist

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Update and Plans

At its midwinter meeting, the Society Board of Directors began discussion of several important issues that we will continue to monitor throughout the year. In addition, we plan to experiment with better and more regular ways of communicating with our members. To this end, we plan to try making regular announcements on the Society's listserve. Please let us know how well this works for you.

One issue of central interest to Society members is the ongoing revision of APA's Ethics Code. Regular revision of the code is necessary in order to keep up with developments in the real world in which we all work. It is always a difficult and onerous task. The process is a lengthy one of soliciting suggestions and comments, testing drafts, seeking legal opinion, and repeated revision. The draft goes eventually to the APA Council of Representatives for further refinement and final approval. The end product, inevitably, is a compromise that fully satisfies very few. The current draft developed by the Task Force charged with the job has been published in the February issue of the APA Monitor. They



Karen S. Calhoun, PhD Professor of Psychology University of Georgia

President's Column

are soliciting comment from all members. I urge you to take the time to examine this draft, engage in the debate about its merits, and send your suggestions to the Task Force before the deadline of April 30. It will be much more difficult to influence the content later in the process. I know that there has been much dissatisfaction with some elements of the current code and it has even been suggested that APA should drop the whole idea of trying to "police" it's members in this way. While few disagree with the aspirational aspects of the Ethical Principles, many disagree with specific details of the Code of Conduct, finding some of them too restrictive, others too vague, and some not tough enough. Because an ethics code is meant to reflect the shared values of the members of a profession, it is not useful unless supported by the vast majority of members. So please take the time to examine the draft and send your comments to the Task Force. You might not see all your suggestions incorporated into the next draft, but I am confident that they will be read and considered.

The next Board meeting, in early June, will continue the tradition of "retreat" and planning. To this end, representatives from all the APA Directorates have been invited to interact with the Board members and bring us up to date on their plans and activities. Of special interest will be APA's plans for the use of special assessment funds under the new sister organization, and the progress of the group attempting to develop a taxonomy of specialities. These are issues that could have great impact on the future of our members. We will also be continuing discussions of how the Society can better represent the interests of members through collaboration with other groups and organizations. As always, your comments and suggestions are valued and welcomed.



Candidates for Division 12

President Elect



Note: Election ballots will be arriving in the mail very soon. Each of the following candidates are running for division office and have submitted a statement describing their goals and qualifications. Please keep this information in mind as you deliberate and please participate in the Division by voting.

Lawrence J. Siegel, PhD

Larry Siegel is Dean and Professor at Ferkauf Graduate School of Psychology of Yeshiva University. He received his Ph.D. from Case Western Reserve University in 1975. Previously he has been on the Clinical Psychology faculty at the University of Missouri and the University of Florida, and was Director of the Division of Pediatric Psychology at the University of Texas Medical Branch. He is a Fellow of Divisions 12, 37, 38, and 54 of APA and he is a Diplomate of the American Board of Clinical Psychology. He is also a Fellow of the American Psychological Society. From 1981-1982 he was a Congressional Science Fellow from the American Psychological Association. He was appointed to the President's Council on Children and Youth by President Carter. He has published more than 100 research articles and chapters in the areas of both clinical child and pediatric psychology. He is the author or co-author of five books in the field. In addition, he has obtained numerous research and training grants in these areas. He serves on the Editorial Boards of a number of journals in clinical and child psychology.

For more than a decade he has provided active service to Division 12. He served as President of the Society of Pediatric Psychology (Section V) and was the Editor of the Newsletter *Progress Notes* for the Section. In addition, he has been the Editor of Division 12's *The Clinical Psychologist*. More recently, he served as chair of the Publications Committee and is currently serving as Chair for the Membership Committee of the Division. Finally, he has served as Chair of the Program Committee for Division 12 for the APA convention.

As one of the largest Divisions of APA, Division 12 must work to establish a greater presence within the organization to influence its policies and agenda. Our Division has considerable potential to play a major role in helping APA respond to the major challenges facing our profession as service providers, researchers, and educators. Division 12 represents all of these diverse interests and it is important that our membership feel that these areas are being addressed through our activities and initiatives if we are to retain and attract new members. I am a strong advocate for *both* the science and practice sides of our profession, as I have demonstrated throughout my career, and believe that a unique emphasis of Division 12 is its focus on their integration and reciprocity. I am also committed to ensuring that the governance and committee structure of Division 12 reflects the diversity of our membership. If Divi-

sion 12 is to remain a strong advocate for the model of integrating science and practice both within APA and at the national level it is imperative that we enhance our activities which appeal to young scientists and practitioners who are the future of our profession. I would be honored to serve as President of Division 12 and I am deeply committed to promoting an agenda that furthers the basic mission of our Division.

Danny Wedding, PhD, MPH

I'm a clinical psychologist trained at the University of Hawaii. Following my internship at Hawaii State Hospital, I completed a postdoctoral fellowship in clinical neuropsychology and behavioral medicine at the University of Mississippi Medical Center. Following this, I spent a decade working at two medical schools, East Tennessee State University and Marshall University.

I left Marshall to spend a year as the first psychologist ever selected to participate in the Robert Wood Johnson Health Policy Fellowship Program; three months of this program were devoted to an orientation by the Institute of Medicine; the next nine months were spent working on the personal staff of Senator Tom Daschle as a health policy legislative assistant. I subsequently gave up tenure at Marshall to spend a second year on the Hill working as an APA Congressional Science Fellow on the Staff of the House Government Operations Committee.

I returned to academia in 1991 to become the Director of the Missouri Institute of Mental Health (MIMH), a mental health research, training and policy center associated with the School of Medicine at the University of Missouri – Columbia. In this position I also serve as a tenured Professor of Psychiatry. I spent my 1999 sabbatical as a Fulbright Senior Scholar teaching psychotherapy to psychiatry residents at the Chiang Mai University School of Medicine (Thailand).

I have actively supported APA Governance and have served on the Continuing Education Committee (CEC) and the Committee for Accreditation of Continuing Education Sponsors (CACES), and I'm currently serving on the Board of Professional Affairs (BPA). I'm also a Past President of the Missouri Psychological Association (MOPA) and currently serve as the Missouri Representative to the APA Council of Representatives. I'm a charter member and Past President of the Association of Medical School Psychologists (AMSP; Section VIII of the Society of Clinical Psychology), and I'm cur-

rently the Section VIII representative to Division 12. I am a Fellow of Divisions 12 and 38 (Health Psychology) and I'm active in Division 52 (International Psychology).

Most of my professional writing has been in the areas of neuropsychology and psychotherapy. My books, many co-authored or coedited, include *Current Psychotherapies* (with Ray Corsini), *Movies And Mental Illness, Behavior And Medicine, Case Studies in Psychotherapy, Screening for Brain Impairment, The Neuropsychology Handbook*, and *Clinical and Behavioral Neuropsychology*.

I'm deeply committed to the Scientist/Practitioner model of training; believe in the importance of expanding our scope of practice; strongly back the funding of our training programs under Graduate Medical Education (GME) regulations, and support the APA's decision to pursue prescriptive authority for appropriately trained clinicians. I also strongly support modifying state laws to permit the licensure of clinical and counseling psychologists at the conclusion of their internship training (i.e., eliminating the mandatory year of postdoctoral supervised training which is typically not reimbursed by third party payers). I have been a member of Division 12 since the completion of my own internship training, and I am honored to have been nominated to be President of the Society.

Diane J. Willis, PhD

My professional career in psychology has been devoted to the education and training of clinical child and pediatric psychologists, and to the development of new service models for meeting the mental health needs of children, youth, and families. As President of the Division, I would bring my commitment and experience with these issues, and provide leadership for the organization through four primary initiatives.

First, as a psychologist committed to issues that affect the growth and development of children (and the underserved such as minority children, youth and families), I would use the prestige of the Division to work with the Practice Directorate to assure mental health coverage for children. There is tremendous underutilization of the state Child Health Insurance Program (CHIP) and the Division must provide leadership to include a role for psychology in the implementation of CHIP for our members who are practicing in clinics, hospitals, and schools across the nation.

Second, as past editor of the Journal of Pediatric Psychology and the Journal of Clinical Child Psychology, I have had experience in helping to shape the direction of research and dissemination of new knowledge. However, to competently meet the service demands of the next generation, we must put forth efforts to further our knowledge in a variety of new research areas. I hope to sensitize our membership to these issues.

Third, as an American Indian, I am committed to a more culturally diverse division. I would hope to increase involvement of minorities throughout our governance and, given the changing demographics in our schools and our population, I would focus on training and publishing brief reports for our members on how to work with our growing ethnic and racial diversity. The Division is fortunate to have as members several nationally prominent minorities whose talent and expertise could be tapped.

Fourth, I would forge a close relationship with Divisions 29, 53, and 54 (Psychotherapy, Clinical Child Psychology, and Pediatric Psychology) all of whom grew out of this Division, to encourage continued membership in Division 12. By working on joint projects of benefit to the education, training, and livelihood of our members, psychology (& this Division) can only be strengthened.

Robert H. Woody, PhD

Robert H. Woody is Professor of Psychology (and former Dean for Graduate Studies and Research) at the University of Nebraska at Omaha. He received a Ph. D. from Michigan State University, an Sc. D. from the University of Pittsburgh, and a J. D. from the Creighton University School of Law. He is a Fellow of the Division of Clinical Psychology, and a Diplomate in Clinical Psychology and a Diplomate in Forensic Psychology, ABPP. He is admitted to the Florida, Michigan, Nebraska, and Tennessee Bars, and is a Licensed Psychologist in Florida and Michigan. He has authored/edited thirty books, and approximately one hundred and fifty articles. He has served on the APA Ethics Committee, and is presently on the Board of Directors and Treasurer for Division 12. In 2001, he is President of the Florida Psychological Association.

Clinical psychology is a unique integration of behavioral science and practice, which requires a special effort to unite members with diverse interests. As President-Elect, I intend to promote collegialty, and emphasize the positive contributions made to society by clinical psychology. I believe that Division 12 must enter the current debate over the proposed revision of the APA ethics code, seeking to assure that clinical psychologists will not be disadvantaged when monitoring sources, such as licensing boards and courts of law, make use of the ethics code in adversarial situations. I would convey the justifiable consternation about managed care to government sources, and assert that clinical psychologists must shape managed care organizations as much or more than they shape our practices. Licensing boards must provide equal protection for consumers and psychologists by assuring a level playing field for processing complaints. I particularly hope to help clinical psychology be more in command of the standards that apply to judging psychological practices. In representing clinical psychology, such as with opponents, I would strive to be scholarly, rational, assertive, and persuasive. Pursuing benefits for clinical psychology is pursing benefits for society. Thus, there is no place for cowardice or hesitancy. I will bring a creative and high-energy approach to problem solving on behalf of clinical psychology. Being trained in both psychology and the law, I am confident that I can offer unique strategies to improve clinical psychology. I will appreciate your support for my candidacy for President-Elect of the Division 12.



Candidates for Division 12

APA Council Representative



Norman Abeles, PhD

As always we face many issues that impact clinical psychology. It is important for us to retain junior as well as senior members and to encourage our students to join the Division.APA has made some strides forward. For example, Graduate Medical Education (a multimillion dollar program which pays for hospital training of psychologists) is now almost within our grasp since the regulations have been posted by the Health Care Finance Administration. You will recall that this agenda along with aging was one of the major efforts Norm undertook when he was President of APA in 1997.But we need to do more. We need to provide more avenues for funding for our researchers; we need to help practitioners cope more effectively with managed care; we need to provide more job opportunities inside and outside of academe for our graduate students. We need to encourage more efforts on behalf of our older adults in terms of both research and practice; and of course, we must not forget about the needs of children and families and underserved populations.

Norm is well experienced with the highways and byways of APA governance and he will work hard to further the interests of all of us in Division 12.He also served as President of our Division and as secretary of one of our sections (section 2 clinical geropsychology). By the way, APA has just placed on the web a helpful Medicare Handbook: A guide for psychologists. Norm appreciates your support. If you have questions, feel free to contact him at abeles@msu.edu.

Asuncion Miteria Austria, PhD

Asuncion Miteria Austria received her doctorate in Clinical Psychology from Northwestern University, did her internship at the Institute for Juvenile Research in Chicago, and postdoctoral fellowship at the Neuropsychiatric Institute, University of Illinois Medical Center. She is currently Professor, Chair, and Director of Clinical Training, Department f Psychology, Cardinal Stritch University. She also maintains a small private practice.

A Division 12 Fellow, she has held leadership positions within the Division since 1981 including committees on Membership, Fellowship, and Nominations and Elections. She chaired the Task Force on Diversity Representation in the Society Governance; she was a member of the Task Force on Women in Academia, and Chair of EOAA (the precursor of Sections IV and VI). Within Section IV (Women), she was

President; Editor of the *Clinical Psychology of Women*; Chair of the Awards and the Mentoring Award Committees. Within Section VI (Ethnic Minorities), she is Section Representative to the Division Board and served as Treasurer. She has also been active in APA governance, serving as CEMA Chair. She currently serves on the Policy and Planning Board and is the Lead Consultant for the APA/NIGMS Project

I am informed of the many challenges facing Clinical Psychology. With my extensive experience within the Division for two decades, I believe I can provide an effective voice in representing the Division on Council and would be honored to do so.

Sheila Eyberg, PhD

Sheila Eyberg obtained her Ph.D. in Clinical Psychology from the University of Oregon and completed her clinical internship and a postdoctoral fellowship in pediatric psychology at the Oregon Health Sciences University. She is currently Professor of Clinical and Health Psychology and Director of the Child Study Laboratory at the University of Florida. Dr. Eyberg has served as an associate editor of the Journal of Clinical Child Psychology and Behavior Therapy, and has been a member of the NIMH Child Psychopathology and Treatment review committee. She has been President the Society of Pediatric Psychology and the Society of Clinical Child and Adolescent Psychology (formerly Sections 1 and 5 of Division 12), and is currently President of the Division of Child, Youth, and Family Services (Division 37) and the Southeastern Psychological Association. Within Division 12, she has presented Post-Doctoral Institutes on child and adolescent assessment and on parent-child interaction therapy and has served on the board as a representative from Sections 1 and 5, as a member of the Publications Committee, and as Chair of the Finance Committee, the Program Committee, and the task force that developed the Clinical Psychology Brochure.

I am honored to have been nominated to be a Council Representative for Division 12. Our division is the primary clinical division of APA that brings issues of science and practice. Assessment and treatment studies by our members have provided support for the significant roles that Clinical Psychologists fill in service delivery and continue to demonstrate the value of psychosocial interventions as first line or concurrent treatments for mental disorders. It is important that we continue to support the development and dissemination of effective assessment procedures and interventions across the

life span and that we work to establish guidelines for effective psychotherapeutic practices from within Clinical Psychology.

Lynn Rehm, PhD

APA is engaged in many important activities relevant to all psychologists. APA's federal advocacy efforts for science, practice, education and the public interest continue to be critical to the future of psychology. APA has developed an exciting public education campaign and is instituting new efforts to publicize psychological research findings. APA has established a great track record in the courts fighting the abuses of managed care. A number of things at APA are in transition as well. APA publications are undergoing the transition to electronic format while scientific and practice books are an immense service to the members and continue to be a significant source of income for APA. The 2002 convention in Chicago will be experimenting with a new convention format. The new practice companion organization is planning new initiatives and should expand our advocacy possibilities.

As all of this is going on APA is also facing a number of critical issues such as a strained budget. APA needs to deal with the problems of an aging membership with a seeming plateau in new memberships. APAGS has grown immensely but many of their members do not become full members on graduation. Scientific members seem not to be aware of or appreciate the many activities of the Science Directorate and do not join as they should.

Council is APA's policy making body and critical policy decisions will need to be made in the next few years. I believe it is important that Division 12 be represented assertively in these policy decisions and that a balanced scientist-professional perspective best represents us. I have experience with APA (e.g., Council Rep for two terms, BEA Chair) and with Division 12 governance (e.g., former President). I believe that I can represent the Division well and help to influence APA's future in positive ways.

Jerome H. Resnick, PhD

Jerome Resnick, Professor of Psychology at Temple University, has served for a decade as Director of the Department's Psychological Services Center and also as Director of Graduate Studies of the Department's five doctoral programs.

He is the 1999 recipient of the Society's Award for Distinguished Professional Contributions to Clinical Psychology. In 1991 he served as President of Division 12 and has previously worked for the Division as its representative to the APA Council. For 10 years he served as editor of the Division's bulletin, *The Clinical Psychologist*.

Within APA, he is past-Chair of the Board of Professional Affairs, and of its Committee of the Structure and Function of Council. He held office as a member of APA's Finance Committee, and served two terms of APA's Policy and Planning Board.

He is a Fellow in six APA Divisions and holds the ABPP in Clinical Psychology.

He was President of the Pennsylvania Psychological Association and was a member of his state's Licensing Board. He was an invited participant at the 1990 National Conference on Scientist-Practitioner Education, and the 1994 National Conference on Post-Doctoral Education. For seven years he served as Eastern Regional Vice-President of Psi Chi.

Division 12, representing the *field* of Clinical Psychology, is pivotal in *two* ways: First, as representing science *and* practice as a mutually reinforcing entity. Second, as representing the *range* of arenas in which our field functions. This range includes both the life-span and the myriad of activities and sites in which we find ourselves operating. We need to work to broaden our base while keeping our standards for membership high.

With a record of involvement in these various aspects of our field *and* in the corridors of policy-making now extending for over three decades, if elected with your help, I believe I can continue to be an effective leader for our interests.

John D. Robinson, EdD, MPH, ABPP

Having served as a member of the Membership Committee for the Society for nine years (five as chair), and currently as a member of the Fellows Committee, I have shown my dedication to the Society. In addition, I have been the Society's liaison to the American Psychological Association for Graduate Students (APAGS) for 10 years. My major goal has been to increase the diversity of the division in terms of gender, race, and ethnicity. The Society of Clinical Psychology is now well represented by a very diverse number of psychologists who may otherwise feel disenfranchised in our profession. I have increased the number of students and "new" psychologists as members of the Society and developed innovative ways to recruit and retain members. After receiving undergraduate and graduate degrees from The University of Texas at Austin, I received my EdD from the University of Massachusetts at Amherst, an MPH in Psychiatric Epidemiology from Harvard University School of Public Health, and a Doctor of Humane Letters, Honoris causa, from the Massachusetts School of Professional Psychology (MSPP). Currently, I am a professor of psychiatry and surgery at the Howard University College of Medicine and a clinical professor of psychiatry at Georgetown University School of Medicine. I hold ABPP board certification in both Clinical and Clinical Health Psychology and am president elect of the American Board of Clinical Psychology. Having served on a number of committees and task forces of APA, I am very familiar with the governance structure of the organization. I hope to continue to represent the diversity and interests of the Society by being a member of the APA Council of Representatives.



Candidates for Division 12

Secretary



Sheila Woody, PhD

I am on the faculty in the Psychology Department at University of British Columbia in beautiful Vancouver, Canada. I earned my Ph.D. in 1992 from American University after a clinical internship at Western Psychiatric Institute and Clinic in Pittsburgh. I spent two years at UBC as a postdoctoral fellow before beginning my first academic position at Yale University. Although I am deeply involved in research on anxiety disorders, I am also committed to high quality clinical training and service, having served as director of the training clinic and director of clinical training while at Yale. I have also maintained a small practice and have collaborated with community-based practitioners on clinical training, workshop development, and outcome research. In furtherance of my commitment to a dialogue between scientists and practitioners, in 2000 I published a book (with Peter McLean) that combines an accessible discussion of recent treatment research in anxiety disorders with detailed instruction in how to conduct these interventions.

I have been a member of Division 12 since graduate school, and in more recent years I have been active in Division governance. Since 1998, I have chaired the Dissemination Subcommittee of the Committee on Science and Practice. Under my leadership, the subcommittee developed a web page that provides user-friendly information about the reports on empirically supported treatments developed by the Society since 1994. This web page is now featured on the Society's website as a public resource. I serve on the editorial boards of two journals, including the Society's journal Clinical Psychology: Science and Practice. At the 2000 APA meeting, the Society honored me with the David Shakow Early Career Award. I also have experience on the Society's Board of Directors, having served a term as Representative from Section III (Society for a Science of Clinical Psychology) from 1997-1999. As a member of the Board, I was active in constructing and supporting bridges between the applied and research branches of our field. If given the opportunity to serve the Society in the role of Secretary, I will continue in this effort while fulfilling the important task of maintaining a full and accurate record of the Society's activities.

Annette Brodsky, PhD

I have enjoyed my term of office as Section 4 representative to the Society's Board of Directors so much that I want to continue to be centrally involved with its issues and participants. As secretary, I will be trying to convey the gist of all the critically important issues, controversies, and actions with which the board struggles at its meetings through preparing minutes for the board and the entire membership. I have been involved with various APA boards and committees throughout the last 30 years, and I have a broad perspective on a range of Division 12 issues from clinical training and medical school politics, to professional practice issues impacting academia, women and minorities. In APA I have served on BPA (Chair), Membership, Ethics, and Council of Representatives. I have been president of Division 35, and Board member of 29, and 12.

My background in psychology goes back to my 1963 clinical internship at Walter Reed Army Hospital, military service at the Ft. Leavenworth Disciplinary Barracks, my Ph.D. from U. of Florida in 1970, positions at Southern Illinois University, and U. of Alabama, and since 1980, as Chief Psychologist and Director of Training at Harbor-UCLA Medical Center. My research and forensic practice has focused on sexual intimacies between therapists and patients, but I have also worked hard for issues of the severely mentally ill public sector patients in Los Angeles County. Finally, I have been quite active in California Psychological Association's Education & Training Division, and as a consultant/expert witness for the State Board of Psychology.



Division 12 Central Office, P.O. Box 1082, Niwot, CO 80544-1082. Telephone (303) 652-3126. Fax (303) 652-2723.

New Articles

The APA Task Force on Envisioning, Identifying, and Accessing New Professional Roles, chaired by Ronald Levant, has resulted in the publication of three articles on this topic in the current issue of Professional Psychology. The citations are listed below.

Levant, R., Reed, G., Ragusea, S., Stout, C., DiCowden, M., Murphy, M., Sullivan, F., & Craig, P. (2001). Envisioning and Accessing New Professional Roles. Professional Psychology: Research and Practice, 32,79-87.

Reed, G., Levant, R, Stout, C., Murphy, M., & Phelps, R.(2001). Psychology In the current mental health care marketplace. Professional Psychology: Research and Practice, 32, 65-70.

Stout, C., Levant, R, Reed, G. & Murphy, M. (2001). Contracts: A primer for psychologists. Professional Psychology: Research and Practice, 32, 88-91.

Call for Nominations

2002 David Shakow Award for Early Career Contributions

The recipient will be a psychologist who has received the doctoral degree in 1992 or later and who has made noteworthy contributions both to the science and to the practice of clinical psychology. Letters of nomination should include the nominee's vita and a summary of his/her contributions. Send nominations to:

> Karen S. Calhoun, PhD, Chair 2000 Awards Committee c/o Division 12 Central Office P.O. Box 1082 Niwot, CO 80544-1082

Deadline: October 30, 2001

The award will be presented at the 2002 APA

Convention.

New Interest Group

ANNOUNCEMENT AND INVITATION TO BECOME A MEMBER OF A POSSIBLE NEW INTEREST GROUP ON CLINICAL PSYCHOLOGY IN THE SCHOOLS

The Division 12 Board of Directors is giving consideration to forming an interest group on the topic of: Clinical Psychology in the Schools (CPS). The interest group might evolve to being a Section of the Division.

For the CPA interest group, the definition of clinical psychology (as stated in the bylaws) remains the same, but the focus will be promoting and enhancing the provision of clinical psychology in the context of schools.

Recently, the U. S. Surgeon General and other authoritative sources have given emphasis to schools' dealing with the mental health needs of children. Of course, clinical services to children extend benefits to their families and the community.

Certain contemporary societal problems (e.g., violence, substance abuse, unwanted pregnancies, delinquency) create a strong press for immediate expansion of clinical psychology services to children. Clinical psychology holds a peerless position for offering services to counteract the myriad of problems that plague children.

If you have interest in becoming a member of the interest group on Clinical Psychology in the Schools, please mail or e-mail your name, mailing address, and e-mail address to:

Robert Henley Woody, PhD, ScD, JD Professor or Psychology Department of Psychology University of Nebraska at Omaha 60th at Dodge Omaha, NE 68182

e-mail: psychlegal@aol.com

Clinical Emergencies and Crises

Statement of Purpose of Section VII

Section VII represents practitioners and researchers interested in the clinical, scientific, and professional aspects of behavioral emergencies (a state of mind where there is risk of imminent action or inaction likely to result in serious harm or death to self or others).

The purposes of the Section are:

- 1) To develop and improve the clinical assessment, treatment, and management of behavioral emergencies, and promote the scientific understanding of such emergencies through research on suicide, violence, and vulnerability to victimization by violence.
- 2) To advocate for state-of-the-art graduate education and professional training in the clinical abilities and scientific knowledge of psychologists require to evaluate and treat behavioral emergencies.
- 3) To further the understanding of the professional, forensic, and ethical issues involved in emergencies, as well as the clinical abilities needed to evaluate and manage them.

Activities of Section VII

The Section provides a forum for the development and exchange of scientific information and research about clinical emergencies as well as about the underlying psychological contexts from which emergencies develop.

The Section also seeks to understand the impact of crisis-oriented clinical work on the clinicians in handling the often-intense psychological impact of emergency situations.

The Section exchanges clinical, professional, and scientific ideas, experiences, and information by newsletter and listserver, presents a program at APA meetings, and advocates through Task Forces and Committees with APA Governance entities.

<u>For membership information</u> about Section VII, please contact Lillian Range, PhD, Secretary, Section VII, Department of Psychology, University of Southern Mississippi, Hattiesburg, MS 39406-5025.

Call for Nominations

Division 12's 2002 Distinguished Contribution Awards:

Florence C. Halpern Award for Distinguished Professional Contributions to Clinical Psychology

Award for Distinguished Scientific Contributions to Clinical Psychology

Send nominee's name, recent vita, and a concise (1-2 page) typewritten summary of his/her achievements and contributions to:

Karen S. Calhoun, PhD, Chair 2000 Awards Committee c/o Division 12 Central Office P.O. Box 1082 Niwot, CO 80544-1082

Deadline: October 30, 2001

The awards will be presented at the 2002 APA

Convention

Clinical Psychology Brochure

The popular brochure "What Is Clinical Psychology?" is available from the Division 12 Central Office. It contains general information about Clinical Psychology, and is suitable for both the general public and high school/college students. The cost is \$15 per 50 brochures. Orders must be pre-paid. For more information, contact: Division 12 Central Office, P.O. Box 1082, Niwot, CO 80544-1082. Phone (303) 652-3126. Fax (303) 652-2723. E-mail: lpete@indra.com

2001 Dissertation Award

The Section on Child Maltreatment (Section 1 of Division 37, APA) announces its second annual dissertation award. A \$400 prize will be awarded to one successful graduate student applicant to assist with expenses in conducting dissertation research on the topic of child maltreatment. Applicants are requested to submit:

1) a letter of interest, indicating how the applicant would use the award funds toward the completion of the dissertation research,

2) a 100 word abstract, and

3) a five page proposal summerizing the research to be conducted

Please submit applications by April 1, 2001, to:

Dr. Patricia Hashima Institute on Family and Neighborhood Life Clemson University 158 Poole Agricultural Center Clemson, SC 29634-0132 (864) 656-6711 or 656-6271

Applicants will be notified of the decision in mid-June. The award will be presented at the annual meeting of the Ameican Psychological Association in San Francisco, CA August 24-28, 2001

Congratulations Fellows!

The following individuals have been accepted for the Initial Fellow Status for the Society of Clinical Psychology:

Stephen R. Rapp, Ph.D. Victor Molinari, Ph.D.

3rd Annual Convention

July 6, 2001
3rd Annual Convention of the International Society of
Clinical Psychology
London, Great Britain

Contact: Gloria B. Gottsegen, Ph.D., President, 22777 Meridiana Drive, Boca Raton, FL 33433 Telephone 561-393-1266;

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APA DIV 12
Professional
Development
institutes

Better to the Editor

We Must Be "There" Stanley Moldawsky, Ph.D.

"There" is Changing

There are many developments swirling around us as we go about the business of being professional psychologists. But let us think... Where we want to be and how to get there.

Long Term Therapy

There are attempts by managed care to force us into a short term model of treatment that never allows for any intensity in the relationship in fact, it has taken the relationship out of therapy. But this is an important part of who we are and we should never give up. As business interests attempt to change the way we practice, we must not succumb. We must be there to protect our patients and our profession. Long term therapy has been shown to be effective and has been shown to be better than short term therapy. The Consumer Reports research documents this as well as much other research. However, more research is necessary and we must be there to encourage its use. We must resist falling into the managed care trap and continue to work in a way that makes the utmost use of ourselves as the instrument of change. We must be there and protect the relationship in therapy from being marginalized by managed care. In our training programs we must continue to teach long term therapy methods as well as short term methods. People will demand our experise as they find the band aid approaches don't work.

Where is "There"?

Telehealth

Modern communication in the electronic age has revolutionized the providing of professional help. The internet is being used to diagnose, refer, consult, treat, and Telehealth has erupted in our midst. Psychology Must Be There as we explore this new medium. Our expertise is very much needed and we must adapt. Rural folks can sometimes get to a computer sooner than they can get to a city and psychologist. There is room for us to become consultants using this medium. We can call on experts who will listen to the overt signs of a person's pain or distress and be able to make some preliminary recommendations before actually seeing the person. There is a natural resistence to changing the way we do things. In spite of the fact that people are used to responding on the internet, we are hard pressed to see it as a medium for use with our patients. But we are in the "Internet" Age and we need to position ourselves to be fully there. Some psychologists are already expert in dealing with long distance patients.

There are many cautions to be noted. We are in a gray area in regard to the ethics and legalities but we must be there to help resolve the ethical dilemmas posed by the new ways of working. We can't sit i our offices and let the other

professions tell us how to be. We must be there and fashion our own destinies while providing psychological services in this new medium.

<u>Prescription Privileges</u>

Prescription privilage has become a rapidly evolving movement and Psychologists Must Be There to prepare themselves academically and profesionally we must create the legal avenues to lead us into the new millenium. As the APA has moved into a stronger position of support for the movement, a National Examination has been created by the College of Professional Psychology. APA awarded \$200,000 towards the building of this national exam and set up APA guidelines which set out a model curriculum for training in this modality. Psychologists are getting the training in many places and if they meet thecriteria spelled out in the APA guidlines they will be eligible to take the examination. Meanwhile, many states are planning legislation to obtain the previlege and Guam is the first place that actually has a law permitting qualified psychologists to prescribe. The 10 Psychologist graduates of the Department of Defense program in Psychopharmacology have been very busy touring the country demonstrating their knowledge and encouraging others to get the training if they are interested. We Must Be There to see that the training is respectable and do the polictical work to help the states enact enabling legislation. CAPP has an ambitious program of furthering all these efforts and the APA Council of Representatives has given its full support by financing site visits of trained psychologist prescribers.

Interdisciplinary Collaboration

The role of psychology in serious mental illnes as well as in heart disease, cancer, immune diseases is becoming more and more recognized. We are working with physicains, nurses, and others in the treatment and diagnosis of those diseases. Psychologists are publishing books on the methods of serious illness. Response to treatment has been clearly shown to be influenced by psycological factors. These are not just "feel good" reactions to enhance health. Being willing to listen (this is one of the things we do best) and allow for feelings to emerge (we're good here to) is conductive to more rapid recovery from serious illness. But this area of collaboration is reletively new and deserves our fullest attention. It calls for a capacity to be truely able to engage in group process and join a professional "family" and give up some autonomy. It calls for a willingness on the part of other professionals to do the same. We are entering a field that is crying out for our participation and expertise. Psychology Must Be There as the area expands.

How We Get "There"

Advocacy

In all of the above mentioned areas, advocacy is implied. In order to work towards inculsion in telehealth,

psychologists will have to be advocates. Laws will have to be written covering the ethics, the standards of care, what is and is not acceptable, Psychology Must Be There in the word of advocacy. Nothing happens unless we make it happen. We must be there, politically sophisticated, on the cutting edge and not behind the curve. We must be in the halls of Congress educating our legislators to the new developments and not be in the wings waiting. Regarding Prescrition Previliges we must be advocates and politically vigilant. No one is going to give us anything. "Who gave you the black eye?" asked one fellow of another. "No one gave it to me. I had to fight for it." State Associations are the key in this regard. They will be working with the Practice Directorate to strategize about obtaining enabling legislation and political action is necessary. As so often happens only a few psychologists work in the political trenches. We will have to become advicates of ourselves and bring more troops into the political world to accomplish these goals.

Our educational institutions will need to train to the cutting edge without giving up our heritage in long term therapy methods. This can be done as long as we maintain respect for the breadth and depth of psychology and not just respond to the latest fads. However, adapting our methods to the areas such as telehealth, psychopharmacology, and the seriously ill is a task that is challenging but doable. Continuing Education for practicing psychologists where these new techniques can be taught will have to be part of our responsibility.

Public Education

Education

APA has developed a remarkably successful public education campaign. With an intial endowment of \$1.5 million a and \$1 million a year earmarked for five years, the campaign has engaged coordinators in every state who have been putting on programs to educate the public about violence, stress in the workplace, marital distress, children at risk and so forth. These programs need to continue and be expanded. The MTV "Warning Signs" program (the collaboration between APA's Practice Directorate and MTV) has been shown to thousands of schools and been part of a nationwide educational effort to deal with the shootings and fear aroused in Americans... Psychology Must Be There. We don't have the resources to do national TV ads to promote psychology. But we have shown creativity with a limited budget and this should continue.

In closing, Psychology is not yet a household word. Give it time. But stay hopeful and optimistic. We will be there!

Dr. Stanley Moldawksy, a former representative of Division 12 to the APA Council of representatives was recognized with the 2000 Gold Medal for Life Achievement in the Practice of Psychology by the American Psychological Foundation. Dr. Moldawsky will be a candidate for APA President in this year's election.

1/4 Page Ad Here

Instructions for Placing Position Ads

Want ads for acedemic or clinical positions will be accepted for publishing in the quarterly editions of *The Clinical Psychologist*. Ads will be at charged \$2 per line (approximately 40 characters).

Submission deadlines are: January 15 (March 1 edition) May 15 (July 1 edition) September 15 (November 1 edition) November 15 (January 1 edition)

Originating institutions will be billed by the APA Division 12 Central Office. Please send billing name and address, e-mail address, and advertisement to:

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Instructions to Authors

The Clinical Psychologist is a publication of the Division of Clinical Psychology of the American Psychological Association. Its purpose is to communicate timely and thought provoking information in the broad domain of clinical psychology to the members of the Division. Topic areas might include issues related to research, training, and practic, as well as changes in the field and social changes that may influence all or part of clinical psychology. Also included will be material related to particular populations of interest to clinical psychologists. Manuscripts might be either solicited or submitted. Examples of submissions include: position papers, conceptual papers or data base surveys. In addition to highlighting areas of interest listed above, *The Clinical Psychologist* will include archival material and official notices from the Division and its Sections to the members.

Material to be submitted should conform to the format described in the *Publication Manual* of the American Psychological Association. It is perferred that a single electronic copy of a submission be sent as an attachment to e-mail. Alternatively, submit four copies of manuscripts along with document file on computer disk for review. Manuscripts should not exceed 20 pages including references and tables. The Editor must transmit the material to the publisher approximately three months prior to the issue date. Announcments and notices not subject to peer review would not be needed prior to that time. Inquiries may be made to:

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