



InBalance eNEWSLETTER

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InBalance is brought to you by the Society of Clinical Child and Adolescent Psychology, Division 53, American Psychological Association.

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PRESIDENT'S MESSAGE



Message from the President, Fall 2013

Marc Atkins, Ph.D., President, APA Division 53

This is my last newsletter column as Division 53 president and it is hard to believe that the year is coming to an end.

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2013 APA CONVENTION HIGHLIGHTS



Looking back at APA 2013

Lorie Ritschel, Ph.D., & Elise Cappella, Ph.D., Program Co-Chairs

For this year's APA Convention, Division 53 offers a packed program focusing on the science and practice of clinical child and adolescent psychology.

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EFFECTIVE CHILD THERAPY ONLINE EDUCATION



Online Education

Aparajita "Tuma" Kuriyan, Florida International University.

Tips for using the Division's online resources to enhance clinical practice, practicum, and courses.

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APA COUNCIL UPDATE: SUMMER 2013

APA Summer 2013 Meeting Summary

Martha E. Wadsworth, Ph.D. & Deborah C. Beidel, Ph.D., ABPP,



Div 53 Council Representatives.

At its August 2013 meeting, the Council of Representatives took historic action in two areas: adopting measures to promote quality of psychology education and training.

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THE STUDENT VIEW



Internship

Davielle Lakind, The University of Illinois

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President's Message

Message from the President, Fall 2013

Marc Atkins, Ph.D.,
 President, APA Division 53.



Marc Atkins, Ph.D.

This is my last newsletter column as Division 53 president and it is hard to believe that the year is coming to an end. I again thank my friend and presidential mentor, Mary Fristad, for all her help and support throughout the year. Our division as well as the Board is very fortunate to have Mary as involved as she has been, and will continue to be, as she was elected to be our representative to the APA council for the next three years. It has also been a pleasure to welcome our incoming president, Joan Asarnow, to the board. Joan has already made many contributions with her innovative ideas and thoughtful commentary on Division activities and is especially interested in furthering our Division's involvement with health care policy. The program that she and Elise Cappella, our 2014 program chair, are developing capitalizes on the conference's placement in D.C. next year and I encourage our members to consider contributing ideas for symposia and posters related to innovative applications of psychology to health care reform.

Speaking of the conference, those of us fortunate enough to have attended this year's conference in Honolulu were provided as strong a group of symposia and presentations as I have seen. Special thanks to Lorie Ritschel and Elise Cappella for organizing these talks, which as I have noted previously, included our division's inaugural sponsorship of research and practice related to supporting the mental health of military families. Due to Lorie's efforts and that of Muniya Khanna, our website editor, the entire group of presentations is available on our website <http://clinicalchildpsychology.org/APAConvention>. Somewhat daunting, this includes my presidential address, which Lorie filmed on an iPhone and arranged for the IT group at Emory to link to my slides.

As my friends and colleagues well know, and as I have mentioned before in these columns, this marks the end of a very difficult year for my family and me. My presidential address was an opportunity to merge my personal experiences of my son's military service and post-deployment difficulties with my professional interest in supporting children, youth, and families in the settings that matter most to them; home, work, school, and play. I am extremely grateful for the warm response to my talk that I received from several colleagues and friends and the opportunities that are developing to continue to work with others to advance our understanding of the ongoing needs of our military families, including ways that our civilian mental health workforce can engage with them to support their mental health and well-being. As I said in my presentations at the conference, I am confident that our members will rise to the challenge and insure that this year's efforts are just the beginning of our Division's involvement with military families, who as we know, live among us, work alongside us, and attend the schools our children attend.

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I thank our members for the opportunity to serve as president of our Division and I look forward to continuing to work this next year with this talented group of colleagues to advance research and practice for the mental health needs of children and youth. I welcome questions or comments at atkins@uic.edu.

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2013 APA Convention Highlights

APA 2013 Division 53 Presentations and Slides

Couldn't make it to Hawaii this year or forgot where you packed your handouts? Don't worry! Regardless of whether you were able to join APA in Honolulu for Convention this year or not, thanks to the generosity of our presenters, you can have access to all of the Division 53 presentations as well as a full video of this year's Presidential Address by Dr. Marc Atkins.

[Click here to see video and presentations from APA 2013](#)

APA Highlights: Presidential Address

By *Davielle Lakind*,
The University of Illinois at Chicago



Davielle Lakind, Div 53 Student Representative

Marc Atkins, the current president of Division 53, has established himself as a leader in the field of school-based mental health services research. For his Presidential Address at this year's APA Convention, however, he spoke on a different topic, delivering a speech titled, "The Soldiers Among Us: Veteran Suicide, Public Health, and Community." In it, he outlined the complicated and overwhelming mental health needs of the veterans of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF), the laudable treatment efforts of the Department of Defense and Veterans Administration and a public health-oriented approach to filling some of the many gaps in services that remain.

Veterans returning from our most recent military actions present with complicated and novel needs. Twenty percent of veterans of the wars in Afghanistan and Iraq suffer from PTSD or depression, 20% from Traumatic Brain Injury and 37% from alcohol dependence. Suicide rates for members of the armed forces are at a historic high – since 2012, more members of the Army have committed suicide than died in battle. The repercussions extend to veterans' families, as well, with Army wives more likely to receive a mental health diagnosis and Army children more likely to be rated as behaviorally disordered. With 2.3 million military service members in OEF and OIF, the scale of this problem is vast.

The Department of Defense and the Veterans Health Administration have poured millions of dollars into better understanding and treating soldiers. They have doubled the number of mental health providers, trained them in evidence-based treatments for PTSD and insisted on involving families. Unfortunately, even this effort has proved inadequate to meet veterans' needs. In part, this is because the need is simply too great. The VA has essentially been saturated with veterans from past wars and, even its

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remarkable expansion of services, cannot feasibly accommodate the enormous numbers of new veterans. In part, too, the work of the DOD and VA cannot meet veterans' needs because of less tangible barriers: stigma, for example, and concerns about the impact of treatment on military records. Fifty percent of OEF and OIF veterans burdened with serious mental health issues choose not to seek treatment. This indicates that if traditional mental health settings remain the sole source of care, great mental health needs will continue to go unaddressed.

Dr. Atkins laid out a compelling argument for the need for innovation in service delivery. He described the potential for helping more soldiers and families by incorporating a public health approach, drawing on an expanded workforce of service providers, and integrating greater emphasis on care and awareness for veterans' needs in the settings in which they find themselves naturally – the workplace, universities, and the community at large. All of these approaches can strengthen the informal networks that support individuals every day. With whole family systems stressed by the health burdens associated with war, with alienation and stigma regarding traditional treatment functioning as such salient barriers, and with the remarkable strengths that communities and various settings can bring to bear to ameliorate these issues, it seems that such approaches may fill gaps in service that even perfectly operated, well-funded traditional service models cannot.

Although the subject of Dr. Atkins' talk seemingly marked a departure from the work on which he has built his career, in fact it signified an extension. As in his work in urban school systems, he highlighted the importance of thinking outside the traditional bounds of mental health services and enhancing community capacity to provide readily available and meaningful support. For those of us who work with him and had the opportunity to think with him about the challenges for veterans and their families, it was exciting to apply the lenses that we have been using to think about urban schools to a new, and no less urgent, set of challenges.

The following link brings you to Division 53 highlights from the APA Convention:

<https://clinicalchildpsychology.org/APAConvention>



Marc Atkins, Ph.D.

[Click here to view a recording and slides from Dr. Atkins' talk](#)





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Effective Child Therapy Online Education

Tips for Using the Division's Online Resources to Enhance Clinical Practice, Practicum, and Courses

By *Aparajita "Tuma" Kuriyan*
Florida International University.



As many of you know by now, Division 53 has an online education website accessible through www.effectivechildtherapy.com that houses three types of videos: parent videos, keynote overviews, and workshops. We would like to share some ways that professionals can make the most of the information available on the online education website.

The parent videos consist of a brief interview with the expert on a particular topic related to youth mental health. The interview covers a description of the disorder or problem, how to decide if a child needs treatment, and a description of evidence based treatment options. In addition to being a useful resource to parents, clinical trainees may find it instructive to listen to the way experts answer questions that are important to many parents. These videos are also available with Spanish language closed captioning.

The keynote videos provide a one-hour summary of the research base for interventions for a particular mental health problem. During health-care visits, it may be difficult for clinicians to find the time to explain in-depth everything that a parent would want to know about a mental health problem. At the same time, parents may find it tough to absorb large amounts of information about their child's diagnosis in one session, thus, clinicians can refer families to this section of the website to review information at their own pace. In addition, training programs could refer their students to these videos especially when a department does not have an expert in a particular area of child psychology. Professors can use the keynote overviews as a supplement to readings and the downloadable reference list is a useful tool for creating course syllabi for treatment or psychopathology courses.

Finally, the website also contains intensive skills-based workshops on specific treatments. Within the workshop courses, several resources are available, including ways to obtain additional consultation or training, downloadable slides and reference lists. Without the cost of travel or the cost of hiring a professional presenter, agencies may save money on the introductory portion of training in order to allocate more resources to follow-up consultation and supervision. Many of the videos include role-plays or case-examples and some even include live sessions, which professors and clinical supervisors may find helpful for instructing their trainees.

Several professors and supervisors have already begun using these videos in their courses and we welcome you to share your ideas with us!



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APA Council Update: Summer 2013

August 2013 APA Council of Representatives Meeting Summary

By *Martha E. Wadsworth, Ph.D., & Deborah C. Beidel, Ph.D. ABPP, Division 53 Council Representatives*



Martha E. Wadsworth, Ph.D.



Deborah C. Beidel, Ph.D., ABPP

At its August 2013 meeting, the Council of Representatives took historic action in two areas: adopting measures to promote quality of psychology education and training and revising elements of APA governance to make it more effective.

First, the council approved changes recommended by the association's Good Governance Project, aimed at increasing alignment of APA governance with the strategic plan, enhancing the nimbleness of governance and increasing member engagement. The changes are intended to focus council's time and expertise on the mission-focused issues that confront the discipline. Changes include:

- Enhanced use of technology to expand communication.
- Developing a program to create a new pipeline for leadership in APA governance.
- Creating a triage system to enable governance to work efficiently and nimbly on new issues, without duplicative efforts.
- Expanding the council's scope to focus on directing and informing major policy issues.
- Delegating responsibility for budget and internal policy matters to APA's Board of Directors for a three-year trial period.
- Changing the composition of APA's Board of Directors to be more representative of APA's membership, including six members-at-large elected by and drawn from the membership.
- Forming an implementation working group charged with developing an implementation plan for each of the motions approved by the council, in addition to further developing the two proposals to change the council's structure.

The working group will begin to share its recommendations with council at its February meeting.

In the area of education, the council adopted three measures to strengthen psychology teaching and training across the continuum of psychology education. At the undergraduate level, council adopted revised guidelines for the psychology major, which now include new teaching tools and student learning and benchmarking measures. At the graduate level, the council adopted a resolution on accreditation of doctoral programs training psychologists for work in health service settings. APA policy now states that to practice as an independent health service psychologist, candidates must graduate from an APA/Canadian Psychological Association accredited doctoral program and internship or programs accredited by a U.S. Secretary of Education-

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recognized accrediting body for the accreditation of education and training programs that prepare students for entry into professional practice. The resolution gives unaccredited graduate programs five years to become accredited and seven years for internship programs to gain accreditation. At the professional development and continuing education level, the council adopted a resolution that details and codifies quality standards, and calls for evidence based continuing-education methods and program content.

Also during the meeting, the council adopted a resolution that reconciles APA's policies against torture and other forms of cruel, inhuman or degrading treatment or punishment and those related to psychologists' work in national security settings. This reconciled policy rescinds the APA Presidential Task Force on Psychological Ethics and National Security (PENS) report and retains the Association's 2006 policy concerning torture and the 2008 member petition on psychologists' work in national security settings.

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The Student View

Internship

By *Davielle Lakind*,
The University of Illinois at Chicago



Davielle Lakind, Div 53 Student Representative

I was encouraged to write on internship for this issue of In Balance. That makes sense – Internship is never far from anyone’s mind after the first semester of a graduate program in Clinical Psychology. It can often feel like the zenith of the Clinical Psychology graduate school experience, and matching the confirmation of one’s worth.

A degree of angst and trepidation is not unfounded. The “Internship Crisis” is real – for the 2013 Match, 4,051 applicants competed for 2,515 available positions at APA- and CPA-accredited internships sites and 861 APPIC member, non-APA/CPA accredited sites, meaning that the number of applicants in 2013 exceeded the number of positions by 675, and the number of APA- or CPA-accredited positions by 1,536. Nine hundred fifty seven applicants (23.6%) did not match anywhere in Phase I.

APPIC recently announced that the match will be limited to students from APA or CPA accredited graduate programs beginning in 2017. APA also has a call for applications to create and accredit more internships. Some individuals and schools are also opting out of the APPIC match. A few schools have created in-house internships, and others have encouraged students to create their own internship opportunities. Still others have reported eliminating the internship requirement for students with clear academic goals. Limiting eligibility for the match, creating new positions, and self-selecting to opt out of the process may alleviate the imbalance somewhat, but it doesn’t seem that people think these efforts will fully solve the problem.

Further, the intense competition for internship spots obscures what should be equally important questions. First, are the experiences we’re garnering in graduate school intrinsically meaningful to us, or are they, instead, simply geared toward preventing a no-match situation? Therapy and assessment experiences with diverse clientele are critical to our education, but if we believe we are accruing hours engaged in specific tasks with specific types of people because we need to for internship, as opposed to engaging in the work because we want to, we actually run the risk of leaching the pleasure, meaning, and the breadth and depth of learning opportunities from these experiences – our friends over in social psychology who study cognitive dissonance can tell us that much. And are we so busy pursuing the experiences we believe will make us good internship applicants that we disregard the opportunities that may better map on to our passions?

Lastly, are internships providing students with meaningful training opportunities? I took part in a discussion at a conference this

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summer in which a number of current interns, who created their own positions rather than participate in the match, explained that the available internships did not speak to their interests; they found so unappealing the notion of spending an entire year engaged in work that pulled them away from the settings and practices in which their interests lay that they chose an alternative route.

The internships these students had created had no clinical component at all. A clinical component to an internship is, to my mind, critical, but the majority of internship sites do not reflect the breadth of service settings and configurations that we know do comprise the current mental health landscape. Instead, unfortunately, the internship field seems to reify a notion that mental health care occurs only in inpatient and specialized clinical settings.

But really, internship is only a single year. Even as I have become aware of the seemingly ubiquitous culture of crisis and anxiety that has grown out of the imbalance between positions and applicants, I have been reminded that internship can, and probably should, be conceptualized as one more graduate school experience in and of itself, rather than the zenith of our graduate career, or of our clinical psychology career more generally. Even students who do not match their first time around will have full, meaningful careers!

This month the Division 53 Student Advisory Board launched a new website feature, a bimonthly "Career Column" that can be found on the Student Mentorship page from our Student Resources tab (<https://www.clinicalchildpsychology.org/StudentMentorship>). Each month we invite different guest columnists – clinical child or adolescent-focused psychologists – to describe their careers and the paths that brought them there. By highlighting the diverse careers and career trajectories of our field, we hope to demonstrate to students the myriad opportunities available to them and the unlimited paths they can take throughout their professional lives. Perhaps the columns can also serve to emphasize the possibilities that open up to us after graduate school and after internship.





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Division 53 2013 Student Achievement Award Winners

Announcing the Winners of the Third Annual Division 53 Student Advisory Board Student Achievement Awards!

For the third year running, Division 53's Student Advisory Board presented The Division 53 Student Advisory Board Student Achievement Award to four incredibly deserving students. All applicants submitted a cover letter, a C.V., a sample of a research project, and a faculty letter of recommendation. We received applications from a very strong pool of applicants, and struggled to select just four winners. As you'll see, though, our recipients have done wonderful clinical work, mentoring, and volunteering, in addition to building truly stellar track records conducting thoughtful cutting edge research. Each award winner received a \$250 prize, as well as recognition of their great work in the small descriptions you see here. It's thrilling (though also somewhat daunting!) to know that as we transition out of student-hood and into our professional careers, we can look forward to working within a field of such high caliber colleagues.

Congratulations to our four award winners!

- Daryaneh Badal** (University of Southern California)
- Stephen Becker** (Miami University in Ohio)
- Kelly Donahue** (Indiana University – Bloomington)
- Kate Humphreys** (University of California – Los Angeles)

In this issue, we introduce you to Daryaneh Badal and Stephen Becker. In the Spring Issue, we will introduce you to Kelly Donahue and Kate Humphreys.

2013 Student Achievement Award Recipient:

Daryaneh Badaly, MA, University of Southern California

Daryaneh Badaly, M.A., a doctoral student in Clinical Science at the University of Southern California, is currently working on her dissertation, a longitudinal multi-informant study assessing the impact of peer relationships on body image and weight control strategies among ethnically diverse adolescents titled "Actual and perceived social reinforcements of weight-related cognitions and behaviors in adolescent peer groups." Her advisor, Dr. David Schwartz, has said that Daryaneh has a passion for research. Indeed, this is evident from her work in four research labs that have led to four peer-reviewed journal articles, two book chapters, and sixteen conference presentations. Aside from research, Ms. Badaly has demonstrated her interest in and ability to mentor students, both in the classroom and in the research lab, successfully mentoring students through the graduate school application process and through the professional presentation process. Ms. Badaly's clinical work also closely aligns with her overall interest in improving the well-being of adolescents. Over the past year, she conducted neuropsychological assessments with children and adolescents at The Help Group, a neuropsychology program at UCLA, as well as provided evidence-based treatments (including parent training, cognitive-behavioral, and family systems approaches) with children, adolescents, and families. She will be continuing to work with children and adolescents this year at the Greater Hartford Clinical Psychology Internship Consortium. It is clear that Ms. Badaly has accomplished a lot in her graduate career and that she will continue to thrive as a researcher advancing the science of clinical child and adolescent psychology.

Stephen Becker, MA, Miami University in Ohio

Stephen Becker won his award as a 5th year Clinical Child graduate student at Miami University in Ohio. He will complete his

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clinical internship at Cincinnati Children's Hospital Medical Center this year. Stephen's accomplishments as a researcher during his time in graduate school are quite remarkable, collaborating with numerous faculty and graduate students to gain 37 publications (20 as first author), as well as over 20 conference presentations. Stephen's research, funded by a grant from the Ohio Department of Mental Health, is in the area of ADHD, with a specific focus on comorbidity, social functioning, and academic adjustment. Relatedly, his interest in the construct of Sluggish Cognitive Tempo has driven much of his recent research and has resulted in an upcoming Special Section in one of the top psychology journals, Journal of Abnormal Child Psychology, which he thought up and organized. In addition, Stephen has completed a clinical research placement with Dr. Joshua Langberg in which he supervised the implementation of evidence-based interventions to middle school students with ADHD. Stephen's advisor, Dr. Aaron Luebbe, said it best when he explained that many professors in the department often joke about whether tenure can be granted to a graduate student. In short, Stephen has had an outstanding graduate school career and appears to be on his way to becoming a true leader in the field as a professional.

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2013 Award and Grant Opportunities

We've compiled a list of the awards and grant opportunities available for students and professionals in the field of Child & Adolescent Clinical Psychology. We hope you will find this to be a valuable resource to you!

We will continue to keep this list updated on our website so don't forget to mark www.clinicalchildpsychology.org as a "favorite" and check our Award Opportunity Pages:

- [Award Opportunities for Students](#)
- [Award Opportunities for Professionals](#)
- [Award Opportunities for Programs](#)



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APA President-Elect Elections Open!

The APA President-Elect election is now open!

APA members can vote from September 16 until October 31. Most members will receive (or already have received) an email with an individual link to vote. If you experience any difficulty accessing your ballot, you can contact Garnett Coad, Director, Elections at (202) 336-6087 or at gcoad@apa.org.

The candidates are:

- **Barry S. Anton, Ph.D.**
- **Kurt F. Geisinger, Ph.D.**
- **Jeffrey J. Magnavita, Ph.D.**
- **Steven J. Reisner, Ph.D.**
- **Rodney L. Lowman, Ph.D.**

You can find more information including candidate biographies and position statements here: <http://www.apa.org/about/governance/president/elect-2013.aspx>



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InBalance is brought to you by the Society of Clinical Child and Adolescent Psychology, Division 53, American Psychological Association.

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Division Announcements

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