

Testimony from the American Psychological Association (APA)
To Senate Appropriations Subcommittee on Labor-HHS-Education
Fiscal Year 2009

The APA, in Washington, DC, is pleased to submit these recommendations. APA is the largest scientific and professional organization representing psychology in the United States and is the world's largest association of psychologists. APA's membership includes more than 148,000 researchers, educators, clinicians, consultants and students. Through its divisions in 54 subfields of psychology and affiliations with 60 state, territorial and Canadian provincial associations, APA works to advance psychology as a science, as a profession and as a means of promoting human welfare.

Many of the programs in this appropriations bill directly impact the health and quality of life of populations that are now underserved by the health care and education systems. Ethnic and racial minorities and rural and urban families in poverty are especially vulnerable to the current economic downturn and would benefit from targeted research and services. In addition, special populations, including children, individuals with disabilities and older adults have specific health needs. Below are APA's funding recommendations for needed research and services to improve health and education for all, particularly for these underserved populations.

National Institutes of Health: APA supports the recommendation of the Coalition for Health Funding of a 6.5 percent increase for NIH in FY 09. APA is concerned about falling success rates, falling grant application rates, and the increasing age of first-time grant recipients that have been exacerbated by sub-inflationary funding increases over the past five years.

Research on behavior and health is an integral part of the NIH research portfolio, and must remain so to reduce the complications of the chronic conditions that are such large contributors to health care costs. Behavioral research on diabetes is a case in point. Diabetes can lead to devastating complications such as heart disease, stroke, blindness, and premature death. Diabetes is growing at an epidemic rate, with more than 20 million Americans currently affected, and 54 million with pre-diabetes. For many years, scientists believed that medication was the only tool to prevent and treat diabetes. Medication can prevent some complications, but does not eliminate all the adverse consequences. A landmark study called the Diabetes Prevention Programⁱ demonstrated that lifestyle interventions – modest weight loss and regular physical activity – can reduce the risk of developing Type 2 diabetes in high-risk adults by 58 percent, compared to 31 percent reduction with medication alone. These findings led to "Small Steps, Big Rewards", the first national diabetes prevention campaign.

NIH funding of research on substance abuse is key to realizing the national goal of eliminating health disparities. The consequences of drug abuse disproportionately impact minorities, especially African American populations. The National Institute of Drug Abuse (NIDA) encourages research in this population, particularly in geographic areas where HIV/AIDS rates are high and or growing among African Americans, including in criminal justice settings. NIDA's promising research among the Native American community has the potential to make an impact on methamphetamine abuse in those rural populations.

Increase the power of research on HIV-AIDS: Speed translation of research to the affected communities. NIH-supported behavioral research aimed at reducing the likelihood of HIV infection should include the necessary structural, environmental, and socio-economic variables to ensure that the end product can be evaluated as appropriate for racial and ethnic minority populations.

Congress needs better data in order to track which NIH programs train minority scientists most effectively, and which disciplines are best attracting minority trainees. APA recommends that Congress a) urge the National Center for Minority Health and Health Disparities (NCMHD) to collaborate with all Institutes and Centers to produce an integrated and coordinated NIH-wide science trainee data tracking system, and b) suggest that NCMHD engage trainees actively in the data tracking process to document trainee outcomes such as funding awards for trainees or fellows, including those programs that are targeted to underrepresented minorities. APA also recommends that Congress urge the Center to continue its efforts to build a foundation of talented researchers who will create the knowledge base needed to address the many complex issues underlying health disparities in communities of color, and to collaborate with other I/Cs on existing efforts to enhance recruitment and retention of underrepresented minority scientists.

Health Resources and Services Administration: improve access to care for the underserved. The Graduate Psychology Education (GPE) Program is the nation's only federal program dedicated solely to the education and training of psychologists. The activity is authorized by the Public Health Service Act [P.L. 105-392 Section 755 (b)(1)(J)] and funded under the "Allied Health and Other Disciplines" account in the Labor-HHS Appropriations Bill. Established six years ago, GPE provides grants to accredited psychology doctoral, internship and postdoctoral training programs. An exemplary "two-for-one" federal program, GPE supports the interdisciplinary training of psychology graduate students while they provide supervised mental and behavioral health services to underserved populations, such as older adults, children, the chronically ill, and victims of abuse and trauma, including returning military personnel and their families, especially in rural and urban communities. GPE currently supports 18 grants across the country at academic institutions and training sites. Prior to recent budget cuts, one major program component had been devoted to geropsychology – the area of practice focusing on needs of the elderly. Providing \$7 million in FY 2009 will restore funding to allow HRSA to run a national competition to produce approximately 30 general GPE training grants and 10 new geropsychology grants.

National Health Service Corps (NHSC): address health professions shortages, particularly in mental and behavioral health. There are currently 2,724 mental health professional shortage areas (HPSAs) across the country accounting for an estimated underserved population of over 56 million. Psychologists, as health professionals eligible to participate in the NHSC Loan Repayment Program, are a critical component in meeting the mental and behavioral health needs of these underserved populations. While the NHSC supports a field strength of over 4,000 practitioners, HRSA estimates that an additional 30,000 practitioners are needed to achieve the target HPSA practitioner/population ratios. However, in the past 5 years funding for the NHSC has been cut by \$47 million, over 27 percent of a budget that was already insufficient in FY 2003. Consequently, the NHSC has reduced annual scholarship and loan repayment awards by over 25 percent during that period (from 1,351 awards in FY 2003

to 1,012 in FY 2007). At its current funding level, the NHSC is unable to award qualified loan repayment applicants, and 13 practitioners in underserved areas are turned away for every one accepted. To address the deficiencies and to ensure an increase in psychologists serving in the NHSC, we strongly urge a steady and sustainable increase starting with a \$200 million appropriation for the NHSC in FY 2009.

Substance Abuse and Mental Health Services Administration (SAMHSA): protect students at risk of suicide. The APA urges the Committee to increase funds for the Campus Suicide Prevention program. This program, administered by SAMHSA and authorized as part of the Garrett Lee Smith Memorial Act, has made 56 grants to 2- and 4 -year colleges and universities throughout the nation. Still, with nearly 4,000 institutions of post-secondary study in the United States, \$5 million cannot meet the needs that exist.

Those needs are significant. The most recent National College Health Assessment noted, “the rate of students reporting ever being diagnosed with depression has increased 56% in the last six years, from 10 percent in spring 2000 to 16 percent in spring 2005.” A 2007 Survey of College Counseling Center Directors found that the greatest concerns facing centers was finding referrals for students requiring long term help (62 percent), followed administrative considerations of handling of students with more serious psychological problems (61 percent), and the growing demand for services without an increase in resources (59 percent). Finally, and of great significance, suicide is the 2nd leading cause of death among college students. When students receive help for their psychological problems, counseling can have a positive impact on personal well-being, academic success, and retention. A survey conducted by the University of Idaho Student Counseling Center (2000) found that 77 percent of students who responded reported that they were more likely to stay in school because of counseling and that their school performance would have declined without counseling.

Center for Mental Health Services: expand the Minority Fellowship Program (MFP). There is an urgent need to address health disparities as the demographics of our nation are changing dramatically. While minorities are projected to comprise 40 percent of the U.S. population by 2025, only 23 percent of recent doctorates in psychology, social work, and nursing were awarded to minorities. The MFP’s mission is to address this need by increasing the number of minority mental health professionals and by training mental health professionals to become culturally competent. APA recommends the Committee include \$6 million for the MFP.

Emergency Mental Health and Traumatic Stress Services Branch: increase attention to child trauma. Traumatic events can have a significant impact on the physical, mental, emotional, and behavioral health of children and families. SAMHSA has made tremendous efforts in this area through the outstanding National Child Traumatic Stress Network (NCTSN) program and its coordinating center, the UCLA-Duke University National Center for Child Traumatic Stress. APA recommends increased funding for NCTSN programs supporting the recovery of children, families and communities impacted by a wide range of trauma. APA also encourages SAMHSA to strengthen the expertise of this critical program through programmatic support of experienced child trauma professionals, and to increase attention to the needs of children and families affected by trauma.

Center for Substance Abuse Prevention (CSAP): train providers to identify substance use and mental disorders of persons with HIV. According to recent reports, almost half of persons with HIV/AIDS screened positive for illicit drug use or a mental disorder, including depression and anxiety disorder. APA encourages SAMHSA and CDC to collaborate with HRSA to train health care providers to screen HIV/AIDS patients for mental health and substance use problems.

CDC's National Center for Health Statistics (NCHS): improve surveillance of eating disorders. Eating disorders are a significant public health problem for individuals across the lifespan. They may have serious, chronic effects on one's quality of life and often co-occur with significant physical and mental health problems. However, the impact of these disorders has not yet been appropriately investigated. Therefore, APA urges the Committee to encourage the CDC to increase support for surveillance and research efforts regarding the incidence, morbidity, and mortality rates of eating disorders, including anorexia nervosa, bulimia nervosa, binge eating disorder, and eating disorders not otherwise specified across age, ethnicity and gender subgroups.

Administration on Aging (AoA)'s National Family Caregiver Support Program (NFCSP): fund critical program for family caregivers. Family caregivers play an essential role in providing a significant proportion of our nation's health and long-term care for those who are chronically ill and aging. Research suggests that respite provides family caregivers with the relief necessary to help maintain their own health, bolster family stability, keep marriages intact, and avoid or delay more costly nursing home or foster care placements. APA urges Congress to fund the Lifespan Respite Care Act at its authorized level of \$53.3 million.

Administration for Children and Families (ACF): increase attention to prevention of maltreatment of Children with Disabilities. APA is committed to preventing child maltreatment and ameliorating its adverse health effects. In particular, children with disabilities are a distinct high-risk group for abuse and neglect. An estimated 300,000 children with disabilities are maltreated each year, which is approximately two to three times more than children without disabilities. APA recommends targeted support for appropriate research, and the implementation of evidence-based prevention and early intervention efforts for children with disabilities.

The Department of Education's Office of Safe and Drug-Free Schools (OSDFS): expand use of threat assessments. Research shows that threat assessment techniques are more effective in preventing school violence and shootings than zero tolerance measures and similar disciplinary strategies. Threat assessment is a process of evaluating the threat, and the circumstances surrounding the threat, to uncover any facts or evidence that indicate the threat is likely to be carried out. APA recommends the adoption of standardized, research-based threat assessment techniques, including the creation of interdisciplinary school-based threat assessment teams that address threats on a case-by-case basis.

Office of the Director: Enhance Culturally and Linguistically Appropriate Education. APA urges the strengthening of programs that meet the unique cultural, linguistic and educational needs of ethnic minority and American Indian/Alaska Native students from pre-school to graduate-level education. Ethnically diverse children and American Indian/Alaska Native children are performing at far lower levels than other

students. APA recommends support for educational systems that reflect the unique needs of these populations.

¹ Knowler WC, Barrett-Connor E, Fowler SE, et al.; Diabetes Prevention Program Research Group. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. *N Engl J Med.* 2002 Feb 7;346(6):393-403.