PSYCHOLOGY AND HEALTH IN ACTION

THE CENTER FOR PSYCHOLOGY AND HEALTH PRESENTS A COMPENDIUM OF RECENT AND ONGOING ACTIVITIES

FALL 2016 UPDATE
Expanding psychology’s role in advancing health is one of the primary goals of the American Psychological Association (APA) and its companion organization, the American Psychological Association Practice Organization. This goal includes the following priority areas for action:

+ Enhance the identity and role of psychology and psychologists in health care
+ Promote interprofessional training to work in integrated care
+ Advocate for the inclusion of access to psychological services in health care reform using science and data to demonstrate psychology’s contributions to health care.
+ Advocate for funding and policies that support psychology’s role in health

APA’s Center for Psychology and Health was created in 2013 to coordinate and advance activities to expand psychology’s role in advancing health. Following are highlights of APA and APA Practice Organization initiatives addressing this goal across the four priority areas for action from 2014 to 2016.

ENHANCE THE IDENTITY AND ROLE OF PSYCHOLOGY AND PSYCHOLOGISTS IN HEALTH CARE

+ Center for Psychology and Health Website. The center was launched as a resource for psychologists, other health professionals, and the public on vital contributions psychology as the science of behavior makes to health care. The center’s website includes information on training opportunities for psychologists to work in integrated care, links for those who want to get involved in state-level advocacy, and access to health-related resources. The center has released a video series titled *Psychologists in Integrated Care*. The videos provide a glimpse of how psychologists practicing in diverse areas and with diverse populations collaborate with their medical counterparts to treat both mental and physical health problems of patients across the lifespan. From pediatrics and family practice to obstetrics/gynecology and geriatrics, the videos highlight psychologists’ unique contributions in these settings and include testimonials by medical staff and patients of the value added when psychologists are integrated members of the health care team.

+ Briefing Series on the Role of Psychology in Health Care and Related Products. The briefing series was produced to increase the understanding of health professionals, policymakers, and the public as to how psychological interventions can promote health. In collaboration with APA’s Interdivisional Healthcare Committee, an initial set of 12 briefing sheets was developed. The briefing sheets covered a wide range of topics, including the role of psychology in *integrated health care*, *primary care*, and in treating health conditions such as chronic pain, obesity, cancer, and heart disease.

+ The Integrated Primary Care Alliance. A total of 81 key health care stakeholders, including presidents and CEOs of 25 health organizations, convened at the Integrated Primary Care Alliance meeting. Led by Dr. Susan H. McDaniel, PhD, APA President, and Dr. Frank V. deGruy III, Chair, Department of Family Medicine, University of Colorado, the goal of the meeting was to develop an action plan to move the agenda forward on integrated primary health care and to promote interorganizational collaborations on these issues.

+ Health and Aging Social Media Presence. For Older Americans Month, the Office on Aging collaborated on an Older American and Mental Health Twitter Chat to raise awareness about older adults at risk for or living with mental health disorders. The chat resulted in 2.2 million impressions. Twenty-three *Psychology Benefits Society* blogs on health and aging issues have been developed. The most recent was Health Disparities and Successful Aging.

+ Beneficial Collaborations. APA staff across the organization have formed collaborations with groups such as APA’s Interdivisional Healthcare Committee; State, Provincial, and Territorial Psychological Associations; the Society of Behavioral Medicine; the Patient-Centered Primary Care Collaborative (PCPCC); and multiple medical and other specialty organizations including the:
  - Health Resources and Services Administration (HRSA)
  - Eldercare Workforce Alliance, the National Coalition on Mental Health and Aging, the National Alliance for Caregiving, and the Partnership for Health in Aging, a coalition convened by the American Geriatrics Society
  - National Committee for Quality Assurance regarding both patient-centered medical homes and patient-centered specialty practice
  - American Academy of Pediatrics regarding integration of health and mental health services
  - Primary Care Organizations Consortium regarding integrating health and mental health services
APA is also developing joint meetings with the American College of Physicians, American Medical Students Association, and Students of Osteopathic Medicine Association, and in January 2016, the Public Interest Health Disparities Program began a partnership with the Centers for Disease Control and Prevention (CDC) on its Tips from Former Smokers Campaign.

ADDRESSING SPECIFIC HEALTH CONDITIONS

**Stress in America Survey.** APA conducts and releases the annual *Stress in America Survey* as part of the *APA Mind/Body Health Public Education Campaign*. The campaign uses national and local outreach activities to educate the public about stress and the connection between psychological and physical health. It also highlights the pivotal role of psychologists in supporting healthy lifestyles and behavior change. The *Stress in America™* survey measures attitudes and perceptions of stress among members of the general public and identifies leading sources of stress, common behaviors used to manage stress, and the impact of stress on our lives. The results of the survey draw attention to the serious physical and emotional implications of stress, such as obesity, and the inextricable link between the mind and body. *Stress in America: The Impact of Discrimination*, released in March 2016, found that nearly half of U.S. adults report they have experienced a major form of unfair treatment or discrimination, such as being unfairly questioned or threatened by police, being fired or passed over for promotion or treated unfairly when receiving health care. These acts of discrimination are associated with higher reported stress levels and poorer reported health, the survey found.

**Clinical Practice Guidelines.** Clinical practice guidelines provide research-based recommendations for the treatment of particular disorders. Following standards developed by the National Academies of Sciences, Engineering, and Medicine (the National Academies), the guidelines are based on systematic reviews of the scientific literature and are produced by multidisciplinary teams of researchers, clinicians, and patient representatives, with input from peer and public reviewers. The initiative includes fostering relationships with other organizations and entities and developing educational materials for providers and the public based on the final recommendations. Clinical practice guidelines were developed for the treatment of obesity in children aged 2-18 years, PTSD in adults, and depression in adolescents and adults.

**Diabetes Education**
- A joint education effort is planned with the American Diabetes Association for 2017 to prepare licensed psychologists to treat the mental health challenges of people living with diabetes through an online and in-person CE certification program. A list of psychologists with this certification will be made available to physician and other providers seeking behavioral health expertise for their patient referrals.
- APA participates in the National Diabetes Education Program (NDEP), a partnership with the National Institute of Diabetes and Digestive and Kidney Diseases, CDC, and about 200 other public and private organizations. APA’s representative on the NDEP Strategic Directions Group is Gareth Dutton, PhD (University of Alabama Medical Center). NDEP offers a vital opportunity to increase public awareness and knowledge of the seriousness of diabetes, its risk factors, and effective prevention strategies.

**HIV/AIDS and Aging.** APA submitted written testimony to the Senate Special Committee on Aging for the hearing on “Older Americans: The Changing Face of HIV/AIDS in America” regarding the contribution of psychology to prevent and treat HIV-related disease in older adults. The Committee on Psychology and AIDS (COPA) collaborated with the journal *Behavioral Medicine* in publishing a special issue that highlights the biopsychosocial aspects of HIV and aging, a culmination of more than a year of work. This special issue is available online at the *Behavioral Medicine* website.
Other AIDS-related activities include:

- **Psychology and AIDS Exchange.** The most recent issue is “Current Issues in Intimate Partner Violence and HIV.”

- **Blog series.** Recent posts include “PrEP: One Essential Tool in the HIV Prevention Toolkit” (June 27), “Health and Health Care Injustice: Why We Really Should Care About HIV Disparities” (April 26), and “Why HIV Providers Should Care about the Orlando Shooting” (July).


- **Cyber Mentors (in collaboration with OEMA).** This is a career development program for early career social science investigators.

- **AIDS Awareness Day Observations (including dedicated Web pages, e-cards, tweets, and social media postings, flyers, etc.).** Recent examples include National Black HIV/AIDS Awareness Day (February 7), National Women and Girls HIV/AIDS Awareness Day (March 20), and National HIV Testing Day (June 27).

- **Committee on Psychology and AIDS.** A recent initiative, adopted by the Council of Representatives in February 2016, is the Resolution Opposing HIV Criminalization.

- **End of Life Care.** The Office on Aging staffs the Working Group on End of Life Issues and Care. Its charge is to update the 2001 APA Resolutions on End of Life Care and Assisted Suicide so that they are informed by current psychological research and practice; examine if, and how, the roles of psychologists in the end of life arena have changed, including their roles in research, practice, education and training, and policy; consider how diversity and health disparities influence choices about end of life and access to care; and recommend how to increase the visibility of psychologists going forward in this area.

- **Webinar on Smoking and Mental Health.** In April 2016, a webinar titled “Treating Tobacco Use Patients With Mental Health Conditions” was held in cosponsorship with the National Center for Primary Care–Morehouse School of Medicine.

- **Cancer Moonshot Initiative.** As part of APA’s commitment to the Cancer Moonshot Initiative, the association pledged to Vice President Joe Biden’s office to accelerate its work to advance data sharing in psychological research. A planned special issue of APA’s flagship journal *American Psychologist* will focus on ethical and practical complexities and best practices in data sharing. APA will also explore the development of a workshop to help researchers work through common data-sharing issues, such as confidentiality, data security, procedures of access, and cost.

- **Global Climate Change.** In June 2016 APA hosted a webinar series Making the Connection: Climate Changes Health.
REDUCING HEALTH DISPARITIES

+ **Health Disparities Program Health Focus.** APA’s Health Disparities program focuses on substance use, stress, and obesity. Funding from the Agency for Healthcare Research and Quality and the University of California–San Francisco Smoking Cessation Leadership Center, support programs to strengthen psychology’s efforts to address smoking/tobacco health disparities in health priority populations.

+ **Smoking Cessation Training and Resources.** A variety of online trainings and resources are available for psychologists and the general public. They include a 2015 webinar in collaboration with the Smoking Cessation Leadership Center on smoking in health priority populations presented by Westley Clark, MD, JD, a former director of the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment.

+ **Vulnerable Boys and Men.** Health disparities in boys and men of color and sexual minorities are being addressed by a multidisciplinary working group. This group is preparing a report covering stress, trauma, violence, substance abuse, depression, and suicide in this population. Activities and resources developed include a conference cosponsored with SAMHSA on behavioral health in vulnerable boys and men. On May 24, 2016, a congressional briefing, “Eliminating Health Disparities Among Boys and Men,” based on the work of the Working Group on Health Disparities in Boys and Men, was held. The briefing was sponsored by Reps. Donald Payne Jr. (NJ) and Markwayne Mullin (OK), cochairs of the Men’s Health Caucus.

+ **Morehouse School of Medicine Oversight Committee.** APA serves on the oversight committee of the Transdisciplinary Collaborative Center for Health Disparities Research (TCC), a program that supports policy research primarily in the southeast.

+ **Summit Meetings to Address Health Disparities.** APA convened a series of summit meetings focused on health concerns (e.g., stress, obesity, and tobacco use) related to chronic disease (e.g., hypertension, diabetes, and cancer). APA has prepared a report in collaboration with participants of the Summit on Obesity in African American Women and Girls (which was convened with the Association of Black Psychologists) to offer concrete action steps to effectively address obesity and excess weight in African American girls and women. The goal is to increase public understanding of and support for research, training, and interventions to reduce disparities and improve the overall health of underserved and vulnerable populations.

+ **Minority Fellowship Program (MFP).** The APA MFP is an innovative, comprehensive, and coordinated training, mentoring, and career-development program that enhances psychological and behavioral outcomes of ethnic minority communities. MFP is committed to increasing the number of ethnic minority professionals in the field and advancing our understanding of the life experiences of ethnic minority communities. APA’s MFP currently supports 17 individuals committed to impacting racial/ethnic minority health in a variety of focus areas.
PROMOTE INTERPROFESSIONAL TRAINING TO WORK IN INTEGRATED CARE

The National Academies Global Forum on Innovations in Health Professions Education. APA continues to participate in this forum. In April 2016, the forum offered a workshop, “Breaking Professional Silos through Accreditation,” and included a keynote by psychologist Susan Dorcas Phillips, PhD. In addition, in February, the Global Forum released a report on educating students in health professions about the social determinants of health. Promoting resilience for students in health professions is also a topic generating some interest.

Interprofessional Professionalism Collaborative (IPC). The IPC recently completed a study of the factor structure of a measure of interprofessional professionalism it had developed. Members of the IPC were recently invited to tour the interprofessional classroom and assessment facilities at the Western University of the Health Sciences.

The National Academies Third Annual DC Public Health Case Challenge. APA participated as a judge in a competition among area university teams. The topic was aging, and the specific focus was older veterans and mental health. The Case Challenge is intended to promote interprofessional, problem-based learning in public health and to foster engagement with local universities and the local community.

Quality Assurance in Health Service Psychology. APA’s new standards for accreditation of education and training programs in health service psychology will go into effect January 2017.

Continuing Education. APA introduced a new online academy continuing education program, “Therapeutic Opioid Addiction: When Chronic Pain and Addiction Collide.”

Collaborative Primary Care. APA is developing a publication with PCPCC on education and training in collaborative primary care. The PCPCC launched a searchable online database of nearly 100 training programs from academic and training institutions throughout the United States. This project was supported by APA’s Education and Training Task Force. The database is designed to provide visitors with detailed information about existing training programs, including their host organizations, formal curricula, educational components, and core competencies. The database can be used by professionals across all disciplines to learn more about innovative models that support team-based training within emerging delivery models, such as patient-centered medical homes and accountable care organizations (ACOs).

“Cost Effectiveness of Psychologists in Integrated Care.” The Center for Psychology and Health awarded five small grants for research on the “Cost-Effectiveness of Integrated Health Care.” The funded research ranges from impact review of providing psychologists’ services on patient outcomes in chronic heart disease patients in Ohio to a review of health services utilization with psychologists on-site versus traditional referral models in Colorado to a review of cost effectiveness for a large regional center for children with diabetes.

Continuing Education in Geropsychology for Practitioners. The Office on Aging develops and disseminates educational materials including Assessment of Older Adults With Diminished Capacity: A Handbook for Psychologists and What Mental Health Providers Should Know About Working With Older Adults. It works with the Office on Continuing Education to offer online, continuing education offerings of the handbook and Blueprint for Change: Achieving Integrated Health for an Aging Population and annual preconvention workshops, including Expanding Your Practice to Include...
Work With Older Adults and Behavioral Strategies for Dementia Prevention. The office also maintains and regularly updates the APA Family Caregiver Briefcase, an online resource that provides practical information, tools, and resources to help psychologists and other health and social service professionals assist family caregivers. It garnered more than 400,000 hits in 2015.

+ Competencies for Health Care Service Providers. APA disseminates and promotes key APA documents related to competencies for health care service providers, including those working in primary care:

- “The Blueprint for Education and Training From the Health Service Psychology Education Collaborative,” published in the September 2013 issue of The American Psychologist

- Report of the Task Force on Primary Care Psychology Training of APA’s Board of Educational Affairs, which addresses prioritized recommendations

- Report of the Interorganizational Work Group on Competencies in Primary Care Psychology Practice, which was convened as an initiative of 2012 APA President Suzanne Bennett Johnson, PhD

+ Information and Resources. APA and the APA Practice Organization disseminate information through ongoing member communications: APA: Monitor, APA.org, APA Access, MyAPA, broadcast email, APA convention, a monthly newsfeed on current topics and resources in psychology and health, etc.; and the APA Practice Organization: Practice Update, Good Practice magazine, advocacy action alerts, etc. APA’s publishing program produces scholarly products and publishes research to assist members in acquiring skills needed to work on interdisciplinary health care teams and engage in federal and state advocacy in support of health care reform activities.


+ Psychology Summer Institute. Each July, the Minority Fellowship Program hosts its annual Psychology Summer Institute, which provides educational, professional development, and mentoring experiences to advanced doctoral students of psychology and psychologists in the early stage of their careers. Sessions provided to the participants include health disparities and integrated care.

+ Recovery Practice Initiative. Alongside the University of Texas Health Science Center, San Antonio, the Recovery to Practice project team disseminated its free RTP curriculum to APA-accredited doctoral, internship, and postdoctoral programs in Texas through a grant from the Hogg Foundation. Designed for doctoral, internship, and postdoctoral training programs, the curriculum contains health-focused modules such as (1) “The Recovery Movement: Role of Psychologists and Health Care Reform”; (2) “Health Disparities”; and (3) “Systems Transformation.”

+ Outreach to High School Onward/Compendium of Primary Care Training Programs. APA educates high school and undergraduate students about psychology’s role in health and expanding opportunities for graduate, internship, and postdoctoral education and training related to interprofessionalism, integrated health care, and primary care. APA also continues to promote and update the APA Directory of Primary Care Psychology Education and Training Programs at the doctoral, internship, and postdoctoral levels.
ADVOCATE FOR THE INCLUSION OF ACCESS TO PSYCHOLOGICAL SERVICES IN HEALTH CARE REFORM USING SCIENCE AND DATA TO DEMONSTRATE PSYCHOLOGY’S CONTRIBUTIONS TO HEALTH CARE

+ **Psychologists on Interprofessional Health Care Teams.** APA continues to pursue opportunities individually and with partner organizations. As an executive member of the Patient-Centered Primary Care Collaborative (PCPCC), APA promotes the inclusion of psychologists on interprofessional health care teams in primary care. Likewise, the APA Practice Organization continues to challenge state corporate practice of medicine statutes that prevent psychologist-physician partnerships.

+ **Integrated Health Care for Older Adults.** APA advocates for policies to support the integration of mental health services in primary care and other settings for older adults. APA also continues to highlight the Integrated Health Care for an Aging Population Initiative to enhance the involvement in and contributions of psychologists to the expanding model of integrated health care.

+ **The Bipartisan Comprehensive Addiction Recovery Act (CARA),** signed into law in 2016, will save lives by addressing the critical need to prevent heroin use and prescription opioid misuse, improve access to effective substance use disorder treatment, and expand training and resources for first responders, health care providers, and law enforcement. While there is still more work to be done, CARA is a significant achievement and marks an important shift from viewing addiction solely as a criminal justice issue to viewing it more broadly as a matter of public health.

+ **Access to Effective High-Quality Care.** APA advocates for research, clinical services, and training at the Departments of Defense (DOD) and Veterans Affairs (VA) to ensure access to effective, high-quality health care for military personnel, veterans, and their families. DoD and VA research leads directly to improved care; behavioral health expertise in suicide, evidence-based treatment, and assessment are critical for prevention and intervention efforts in these populations. Furthermore, training and supporting psychologists through DoD and VA are vital to maintaining a military and civilian workforce with cultural competence and expertise.

+ **Capitol Hill Briefings.** Both independently and in partnership with coalition groups, APA holds several Capitol Hill briefings each year to illustrate the value of psychological science in improving public health. Some recent topics include: the impact of addiction on infant mortality, treatment of co-occurring alcohol use disorders and PTSD, and the heroin and opioid addiction epidemics. Also, APA submits comments on the strategic plans of federal agencies with health-related missions, including various divisions of the National Institutes of Health.
ADVERTISE FOR FUNDING AND POLICIES THAT SUPPORT PSYCHOLOGY’S ROLE IN HEALTH

+ Focus on Payment Models. The Office of Health Care Financing is a component of the APA Center for Psychology and Health. Its objective is to focus at the national policy level on payment models that are fair and sustainable for both health systems and practicing psychologists. The office plans, coordinates and executes APA’s participation in the American Medical Association’s (AMA) CPT Editorial Panel process, where the Current Procedural Terminology (CPT) codes describing psychologists’ work are developed, and in the AMA’s Relative Value Scale Update Committee, where those procedure codes are valued. The work done by this office through its team of staff, volunteer psychologists, and expert advisory groups has a direct bearing on reimbursement policies regarding psychological services in the Medicare program and the U.S. health care system at large and is supported by the APAPO.

A priority of the office is to increase recognition of the value of psychological services in the treatment of physical health and mental health conditions in integrated care settings. As well, staff participate in key AMA work groups focusing on national health care financing policies for telehealth services and on new and emerging models for valuing care services in the country’s health system.

+ Psychologists in Medicare’s New Payment Models. The APA Practice Organization is participating in lobbying and grassroots and comment submittals to the Centers for Medicare and Medicaid Services (CMS) to ensure psychologists’ services are valued fairly under any new Medicare payment models. In addition to repealing the Sustainable Growth Rate, the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) created the Merit-Based Incentive Payment System (MIPS). This is a new payment model that links provider reimbursement to its ability to demonstrate quality and value. APA is advocating with CMS on psychologists’ behalf in advance of psychologists being added to MIPS in 2019.

+ Medicaid Reimbursement for Psychologists. The APA Practice Organization is working directly with state psychological associations to advocate for appropriate reimbursement for services provided by psychologists in independent practice, including mental health, health and behavior, integrated team CPT codes, and reimbursement for psychology interns working under the supervision of licensed psychologists.

+ Multi-State Health Care Summits on Alternative Practice Models and Integrated Care. APA Practice Organization developed a series of summits to bring experts from the insurance, legal, and health care industries together to offer nuts-and-bolts advice to psychologists looking to work in various integrated care settings. The Affordable Care Act has opened the door to a range of alternative practice models for psychologists. Management service organizations, ACOs, independent practice associations, and an array of integrated models offer new and refined opportunities for making psychological services available to the public. Psychologists wishing to participate in alternative models face myriad challenges, including clinical integration, reimbursement processes, and legal and risk management implications. Summits were organized with regional State Psychological Associations in New York City in May 2015; Washington, DC, in May 2016; and Chicago, IL, in 2016 to help address these challenges. Additionally, the opening session and several panels at the 2016 State Leadership Conference were dedicated to these topics. Future summits are being planned.

+ CMS Transforming Clinical Practice Initiative Support and Alignment Network. CMS announced it has awarded APA $2 million dollars over the next 3 years for a training in integrated care. Psychologists interested in this opportunity will learn more about delivering integrated care and connect with like-minded individuals seeking to be vanguards of health care transformation. APA will also develop training for physician groups about how to integrate psychological services in their practices.