

BOARD OF DIRECTORS

February 15, 2022

APPROVED MINUTES

Board Members Present: Frank C. Worrell, PhD; Thema S. Bryant, PhD; Jennifer F. Kelly, PhD, ABPP; Jean A. Carter, PhD; Kathleen S. Brown, PhD; Arthur C. Evans Jr., PhD; Eric M. Butter, PhD; Anthony L. Chambers, PhD, ABPP; Susan D. Clayton, PhD; Mary Fernandes, MA; Candice N. Hargons, PhD; Debra M. Kawahara, PhD; Tamara S. Lyn, PhD, ABPP; Robin E. Mockenhaupt, PhD; David T. Susman, PhD

Board Members Absent: M. Lynne Cooper, PhD

- A. The Board voted to approve the signing of a Memorandum of Understanding between APA and the Barbados Society of Psychology, Consortium of Psychologists of Uruguay, Czech Psychology Network for Global Changes, Estonian Union of Psychologists, and Trinidad and Tobago Association of Psychologists.
- B. The Board received an update on the Policy Statement on Psychology's Role in Advancing Health.
- C. The Board voted to 1) determine that the Resolution Reaffirming and Building on APA's History of Support for Reproductive Rights poses no risk to the Association and 2) refer the Resolution to the Council Leadership Team for a content review and to make a recommendation to Council.
- D. The Board received an update on the EDI/Racial Equity Audit Report.
- E. The Board voted to approve a one-time Dependent Care Expense Reimbursement Policy for the virtual February 25 & 26, 2022, Council of Representatives meeting with the following provisions:
 - o APA will reimburse Council members and board/committee chairs for Council's virtual February meeting for amounts actually paid for care of their dependents while they are participating in the Council Meeting program, up to a maximum of \$300.
 - o For purposes of this policy, "dependent" means a child who is under age 13 *or* an individual who is physically or mentally unable to care for themselves and who the attendee would otherwise be obligated to care for during the Meeting.
 - o Reimbursement is available only for care provided by individuals other than the attendee's spouse or the dependent's parent, sibling, aunt, uncle, or grandparent.
- F. The Board received an update on the 2022 Public Interest Awards.
- G. In executive session, the Board voted to approve the appointment of Todd Allen Joseph, MA, to the Committee on Associate and Baccalaureate Education to replace Jaclyn Ronquillo-Adachi, PhD, who

recently resigned from the committee. Mr. Joseph's term will begin immediately and end on December 31, 2022.

BOARD OF DIRECTORS

February 24, 2022

APPROVED MINUTES

Board Members Present: Frank C. Worrell, PhD; Thema S. Bryant, PhD; Jennifer F. Kelly, PhD, ABPP; Jean A. Carter, PhD; Kathleen S. Brown, PhD; Arthur C. Evans Jr., PhD; Eric M. Butter, PhD;; Susan D. Clayton, PhD; M. Lynne Cooper, PhD; Mary Fernandes, MA; Candice N. Hargons, PhD; Debra M. Kawahara, PhD; Tamara S. Lyn, PhD, ABPP; David T. Susman, PhD

Board Members Absent: Anthony L. Chambers, PhD, ABPP; Robin E. Mockenhaupt, PhD

- A. The Board voted to approve the minutes of its December 10 & 11, 2021, meeting; its following 2021 calls: November 16, November 30; and its following 2022 calls: January 11, February 1.
- B. The Board voted to 1) determine that the Guidelines for Assessment and Intervention with Persons with Disabilities poses no undue risk to the Association and 2) refer the Guidelines to the Council Leadership Team for a content review and to make a recommendation to Council.
- C. The Board voted to recommend that Council adopt as APA policy the following Policy Statement on Psychology's Role in Advancing Population Health:

The Psychology's Role in Advancing Population Health

Population health focuses on improving the health, health equity, safety, and wellbeing of entire populations, including individuals within those populations. This approach is supported by a multidisciplinary science base from psychology as well as sociology, cultural anthropology, medicine, economics, education, and other disciplines. Population health aims to address the cultural, economic, systemic, historical, environmental, relational, and occupational contexts that influence health status, wellbeing, and functioning across the lifespan. Its ultimate goal is equitable human flourishing.

Consistent with a social-ecological framework (see Figure 1), APA affirms that an individual's health cannot be considered in isolation from the relationships, communities, and societies to which they belong. There are major influencers and social determinants of health outside of the traditional healthcare system that include, but are not limited to, education, work and work setting, environment, legal and regulatory frameworks, income, racism and discrimination of other historically marginalized groups, social connectedness, and stigma; these often exist systemically and structurally, outside of individuals. To advance population health, a biopsychosocial perspective is important across the lifespan, and across the communities and settings where people live, work, learn, and play.

The term “population health” has different connotations in various contexts. While it is sometimes used interchangeably with public health, a population health lens focuses on both promoting health *and* reducing health inequities between populations. For its own activities, APA describes population health as a multi-tiered approach that includes: 1) universal provision of preventative tools and health promotion for all people, families, and communities; 2) monitoring, anticipatory guidance, and early intervention for those with risk factors for physical, mental health, and substance-related conditions; and 3) psychosocial and mental health/substance use care for those experiencing illness and/or escalating physical health and mental distress. (See Figure 2).

Many of today’s key population health issues - including vaccination, climate change, addiction, violence, and trauma - involve important psychological components. The science and expertise that psychology brings to these challenges should continue to be recognized and promoted. Psychological scientists, educators, consultants, practitioners, and trainees are encouraged to engage in the design, implementation, operation, and evaluation of new and existing population health models. It is crucial for such models to be grounded in, and to promote, human rights and ethics. Because the pace of change in society is so rapid, it is important to continually evaluate the effectiveness, cost-effectiveness, efficiency, and impact of these models.

APA calls on the discipline and profession of psychology to support a population health approach. APA encourages its members, committees, divisions, and boards to use the following principles as a “lens” through which activities for health promotion can be viewed:

(1) Work within and across diverse systems to advance population health.

Psychologists can be essential partners in the development, promotion, and dissemination of science-based solutions to advance population health, but we cannot do it alone. Population health science and its applications continue to develop through the efforts of multiple disciplines. As such, it is important for psychologists to work collaboratively with partners across diverse systems and settings.

Society’s understanding of “health” should include traditional healthcare systems and expand beyond them. Psychologists and trainees can cooperatively partner with community leaders, local institutions, faith-based organizations, schools, employers, and others, that – when properly empowered – play a pivotal role in identifying and shaping solutions to unique challenges for that community, setting, and culture. Such solutions must be tailored, and culturally and linguistically aligned with the specific needs and available resources of the community. Social determinants of health must also be addressed; these include safety, housing, access to quality education, economic stability, healthy neighborhoods and workplaces, healthy food, and social connectedness.

It is important for psychologists and trainees to develop a deep understanding of the communities, systems, and settings in which they work. To be effective with varied and distinct settings and communities, it is crucial for all psychology professionals and trainees to have and to maintain competence in working with diverse populations and settings. Psychologists are encouraged to understand the cultural, financial, and operational models within the systems and settings in which they operate, especially the written policies, unwritten procedures, and organizational politics that guide strategy, priorities, and allocation of resources that affect

health. This is essential to fostering inclusion and developing successful population-level interventions.

Alignment of payment systems and financial incentives supporting psychologists' involvement in population health efforts should be explored in order to increase access to research monies, education and training, community engagement, workplace and industry initiatives, and professional services within healthcare and hospital settings, independent practice, and all settings within and outside of the traditional healthcare system that can promote population health. Psychologists alone cannot change mechanisms to fund population health initiatives, but they can advocate for financial reforms alongside key partners, and across sectors and settings.

(2) Work “upstream” by promoting prevention and early intervention strategies.

Prevention and early intervention are crucial aspects of a population health approach. In collaboration with others, psychologists contribute to the development, dissemination, and implementation of science-based models of prevention and early intervention, as well as validated tools to screen and monitor unmet health needs. Early-intervention methods are known to improve resilience and coping, stress reduction, and adaptation. These methods also offer financial and practical benefits to families, employers, health systems, schools, payors, and others; people or communities at risk can receive assistance before escalating into a crisis. As an example, APA can advocate for innovative population-focused initiatives, such as mental/behavioral wellness checks.

Psychologists are encouraged to advocate for systemic changes that support prevention and early intervention. This can include increasing attention on mental/behavioral health within healthcare, universities, schools, workplaces, and other settings; practice-based research; applied interventions to facilitate the utility and sustainability of population health models; and routine engagement with communities and people with lived experience. An example of success has been school-based programs that identify at-risk students and families and provide wrap-around community, social, and mental/behavioral health services; such programs have demonstrated improved health, communication and social skills, and school performance, as well as reductions in bullying, substance use, asocial or antisocial behavior, and legal involvement.

APA should explore billing codes and value-based incentives within and outside of the healthcare system that are more flexible than those currently available; new financial incentives may facilitate innovative and evidence-based evaluation and treatment methods; psychotherapies of depth, insight and relationship; as well as health promotion, health equity, and social determinants of health.

(3) Educate psychologists and community partners on population health.

Advancing a population health approach requires investment in education of psychologists and trainees in all settings, specialties, and communities. It is important for the psychology workforce to understand population health concepts and community-engagement strategies. This requires incorporation of population health competencies into the identity and functions of the discipline and profession of psychology. It is important to consider how population health can be included in post-secondary educational contexts. For example, instruction in multi-level research could include community examples drawn from studies of health and well-being.

Interprofessional education for the health and mental/behavioral health workforce is essential to building collaborations focused on health and wellness. Psychologists can support and work alongside other professionals - for example, by serving on integrated teams for clinical care or in a consultative role within an organization to address issues such as change management, workplace bullying, implicit bias, or wellness promotion.

Through EDI (equity, diversity, inclusion) -centered education about population health, psychologists can proactively work in partnership with local, state, and national experts, community leaders, and the broader public. In many underserved populations, broader societal issues, such as systemic racism, sexism, heterosexism, cisgenderism, etc., as well as poverty, discrimination, and poor social determinants of health are key stressors. Through education-focused initiatives, psychologists can be prepared to collaborate within communities and systems to help define, measure, and achieve better health outcomes. For example, embedding population health interventions in occupational settings can improve equitable recruitment and retention strategies, decent and dignified work environments, access to healthcare, worker protections and safety, and healthy lifestyles, among others.

(4) Enlist a diverse array of community partners.

Collaboration with a broad array of national, state, and local stakeholders is crucial to effectively implement a population health approach. Partnerships may include health care allies such as professional health care associations, hospitals and other healthcare services, indigenous and tribal healthcare authorities, and community mental health organizations. It may also include partners outside of traditional healthcare settings, such as a broad array of community-based institutions and organizations such as neighborhood, civic, and faith-based organizations; employers; schools and educational institutions; local businesses and business associations; non-profit organizations; government (federal, state, and local); law enforcement; media outlets; and others.

Psychologists can expand our efforts to promote population health by seeking partnership and leadership opportunities in local, state, or national coalitions or boards, community organizations, government entities, and global organizations. It is important to learn from population health strategies of other countries and global communities (e.g., United Nations, World Health Organization) so that efforts by psychological scientists and applied, health, clinical, and other psychologists can create linkages between new and existing population health efforts within the United States and around the world.

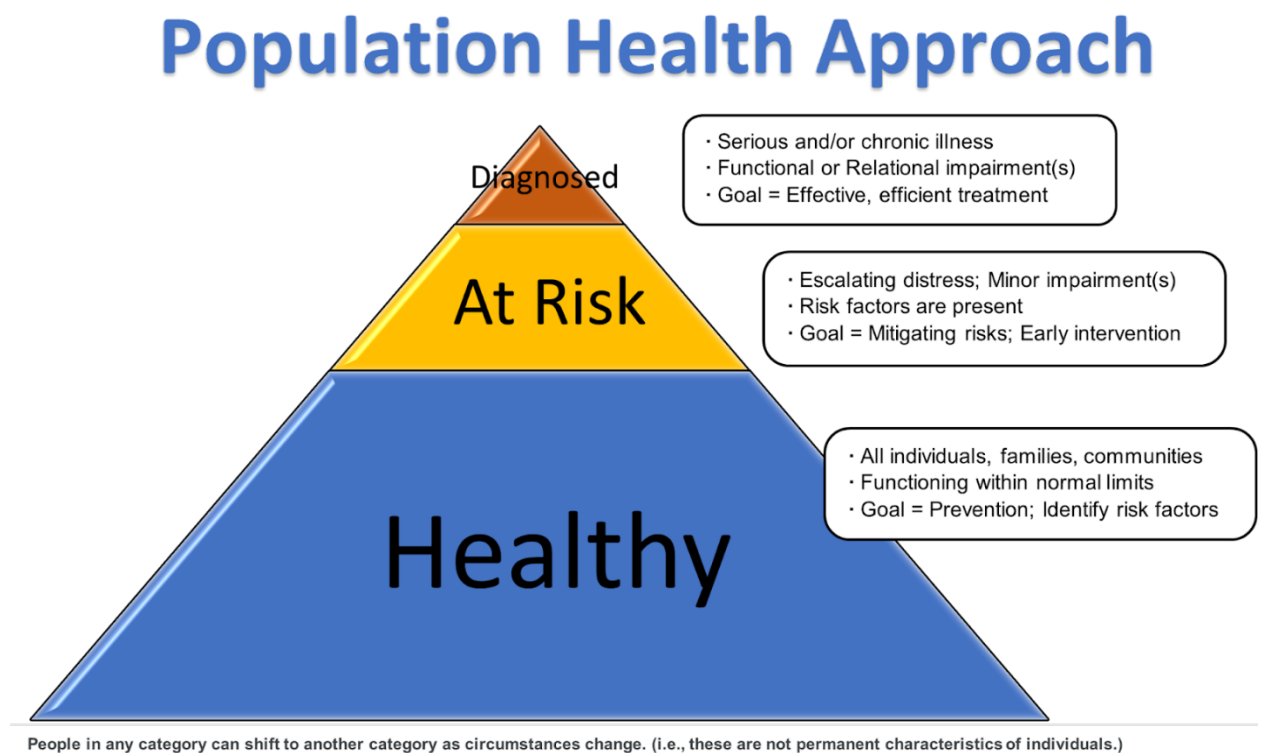
APPENDICES

Figure 1: Social-Ecological Framework



Retrieved from: <https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html>

Fig. 2 – Biopsychosocial Population Health Pyramid



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BOARD OF DIRECTORS

March 1, 2022

APPROVED MINUTES

Board Members Present: Frank C. Worrell, PhD; Thema S. Bryant, PhD; ; Jennifer F. Kelly, PhD, ABPP; Jean A. Carter, PhD; Kathleen S. Brown, PhD; Arthur C. Evans Jr., PhD; Eric M. Butter, PhD; Anthony L. Chambers, PhD, ABPP; M. Lynne Cooper, PhD; Mary Fernandes, MA; Candice N. Hargons, PhD; Debra M. Kawahara, PhD; Tamara S. Lyn, PhD, ABPP; Robin E. Mockenhaupt, PhD; David T. Susman, PhD

Board Members Absent: Susan D. Clayton, PhD

A. The Board met with members of the Needs Assessment, Slating and Campaigns Committee to discuss the desired expertise and characteristics for candidates for two Board member-at-large positions. The members will be elected in 2022 for a three-year term on the Board of Directors starting in 2023.

B. The Board voted to approve the revised Accreditation Operating Procedures.

C. The Board voted to reaffirm APA's policies regarding COVID-19 and in-person meetings, including requiring that members sign a COVID-19 waiver and daily attestation forms and wear masks when not eating or drinking.

D. The Board voted to approve San Diego, California, as the site for the 2030 Convention with the dates of August 8-10, 2030.

E. The Board voted to encourage the celebration of psychology during the third week of April when the UN community and certain other institutions recognize Psychology Day. The Board asked staff to report back after the third week of April with a recommendation about whether a request should be made to Council to recognize an official APA Psychology Day or Psychology Week during the third week of April in future years.

F. The Board discussed the latest APA membership trends and satisfaction data.

G. In executive session, the Board voted to approve the following appointments to the Commission on Accreditation (CoA):

- o Candace Ganz, EdD, as a public member on CoA for a term beginning immediately and ending on December 31, 2022. Dr. Ganz replaced Tiffany Hill who recently resigned from CoA.
- o Sakina M. Butt, PsyD, ABPP-CN, to an open seat on CoA for a term beginning immediately and ending on December 31, 2024.

BOARD OF DIRECTORS

April 5, 2022

APPROVED MINUTES

Board Members Present: Frank C. Worrell, PhD; Thema S. Bryant, PhD; Jennifer F. Kelly, PhD, ABPP; Jean A. Carter, PhD; Kathleen S. Brown, PhD; Arthur C. Evans Jr., PhD; Eric M. Butter, PhD; Anthony L. Chambers, PhD, ABPP; Susan D. Clayton, PhD; M. Lynne Cooper, PhD; Mary Fernandes, MA; Debra M. Kawahara, PhD; Tamara S. Lyn, PhD, ABPP; Robin E. Mockenhaupt, PhD; David T. Susman, PhD

Board Members Absent: Candice N. Hargons, PhD

- A. The Board received an update on Psychology Week 2022.
- B. President-Elect Thema Bryant previewed her plans for her presidential activities.
- C. The Board voted to approve that for upcoming APA meetings that APA strongly recommends that meeting attendees wear masks at indoor meetings except when eating or drinking.
- D. The Board was informed that APA is exploring, at the request of some clinical psychologists, what steps APA can take in relation to the issue of race-based norms in psychological testing.
- E. The Board discussed next steps for the development of the EDI/Racial Equity Action Plan that will come to Council in August 2022 as follow-up to Council's October 2021 adoption of *APA's Ongoing Efforts to Dismantle Racism: Apology for Role of the APA in Promoting, Perpetuating, and Failing to Challenge Racism, Discrimination, and Human Hierarchy in US and Resolution on the Role of Psychology and the APA in Dismantling Systemic Racism in the US*.
- F. The Board received an update on child and dependent care costs for the virtual February Council meeting.
- G. In executive session, due to Russia's military action in Ukraine, the Board voted to suspend the Memorandum of Understanding with the Russian Psychological Society.

BOARD OF DIRECTORS ACTION TAKEN BY UNANIMOUS WRITTEN CONSENT IN LIEU OF A MEETING

FEBRUARY 2 THROUGH APRIL 4, 2022

Board Members Present: Frank C. Worrell, PhD; Thema S. Bryant, PhD; Jennifer F. Kelly, PhD, ABPP; Jean A. Carter, PhD; Kathleen S. Brown, PhD; M. Lynne Cooper, PhD; Arthur C. Evans Jr., PhD; Eric M. Butter, PhD; Anthony L. Chambers, PhD, ABPP; Susan D. Clayton, PhD; Mary Fernandes, MA; Candice N. Hargons, PhD; Debra M. Kawahara, PhD; Tamara S. Lyn, PhD, ABPP; Robin E. Mockenhaupt, PhD; David T. Susman, PhD

Board Members Absent: None.

The Board confirmed the following actions by unanimous written consent in lieu of a meeting:

In mid-April, the Board of Directors voted to approve 1) releasing the restriction on \$268,954 currently being held in the Investment in APA (APAINV) designation which was approved in December 2010. This release is effective for 12/31/2021, and 2) releasing the restriction on \$468,178 currently being held in the Investment in APA 2.0 (APAINV2) designation which was approved in December 2014. This release is effective as of 12/31/2021.