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JAN/FEB 2021 2021 TRENDS REPORT | SCIENCE WRITING | DRINKING DURING COVID-19 | BRAIN TRAINING GAMES

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RESOURCES, OPPORTUNITIES, AND NEWS FOR PSYCHOLOGISTS FROM APA



TRAINING

New Tool for Teaching About Substance Use Disorders

APA has created a free curriculum to help psychology graduate school faculty, postdoctoral directors, and internship directors meet the rising need for psychologists with expertise in substance use treatment. APA's **Substance Use Disorders Curriculum**, created with funding from the Substance Abuse and Mental Health Services Administration, provides quality training on helping patients with substance use disorders. The six-module curriculum covers the basic knowledge and skills of screening, assessing, and treating substance use disorders, including guidance on a variety of subtopics such as working with vulnerable populations. The curriculum includes online learning modules and a video-on-demand program for use during the COVID-19 pandemic and a variety of additional resources and readings to deepen students' learning. APA is recruiting psychology graduate programs to use the curriculum, provided that the program directors collect data on student progress and instructor satisfaction.

To sign up, contact Rish Verma at rverma@apa.org.

Read & Watch

1

Navigating Difficult Moments in Teaching Diversity and Social Justice

This new guide from APA Books helps educators tackle challenging dilemmas that may arise in courses that focus on social justice and diversity-related issues.

www.apa.org/pubs/books



2

Invisible No More: Psychology, American Indians/Alaska Natives and COVID-19

This webinar covers how the pandemic has intensified substance use and other challenges in American Indian and Alaska Native communities

Watch at <https://pages.apa.org/equity-flattens-the-curve>.

3

Psychological Practice in the Pandemic Era: Legal and Risk Management Considerations

This webinar provides guidance on a variety of the challenges in delivering services during the pandemic.

Watch at www.apa.org/members/content/sponsored/psychological-practice-pandemic.

OPEN ACCESS

Share Your Work in *Technology, Mind, and Behavior*

Understanding the human–technology connection has never felt more critical than during the COVID-19 pandemic. APA's open access, interdisciplinary journal *Technology, Mind, and Behavior* features cutting-edge basic and applied scholarship on how people use and experience a range of technologies, including artificial intelligence, robotics, mobile devices, social media, gaming, nanotechnology, and biomedical tech. The journal also seeks work on technology's use and impact on education, recreation, and the workplace, and broad analyses on some of the emerging ethical dilemmas and social issues surrounding technology.

Explore the content and submit your manuscript at <https://tmb.apaopen.org>.

THE VOTE

APA's New President-Elect



Members have elected **Frank C. Worrell, PhD**, of the University of California, Berkeley, as

APA's 2022 president.

Learn more at www.apa.org/news/press/releases/2020/11/frank-worrell-president

FAR LEFT: VLADIMIROV/GETTY IMAGES; LEFT: COURTESY OF FRANK WORRELL, PHD; UPPER LEFT: GRAND RIVER/GETTY IMAGES

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Dr. Kelly is
APA's 2021
president.

BIO

Jennifer F. Kelly, PhD, ABPP

APA PRESIDENT

APA 2021 President Jennifer Kelly's passion for service and advocacy was ignited while she was growing up in Gulfport, Mississippi, in the segregated South. Her parents spent their spare time mobilizing the community in support of Black suffrage while also raising 10 children. “They truly understood the power of the vote and never took it for granted,” she says, of her mother, a beautician, and father, a World War II veteran who worked for a pharmaceutical company. Here's a quick look at Kelly's life and values, in her own words.

First job: A “pesticides residue analysis technician” with the U.S. Department of Agriculture. I was studying the effects of pesticides on soil, plants, and wildlife through a program that offered summer jobs to low-income high school students.

Why you chose psychology: During my first psychology course at age 17, I became fascinated with the power of the brain and mind. Even at that age I knew psychology could have a major impact in changing society and people's lives. I wanted to be a part of that movement.

Someone who had a strong influence on your life: My mother. She really understood the value of education and made sure that her children had the opportunity to achieve to their potential.

Proudest moment: Being able to build my parents a home. To me, it went full circle—they investing in me and my future, and me in turn investing in their lives by providing safe housing and security.

Early bird or night owl: Both. I look forward to meeting and greeting the day, and my creative juices continue to flow at night.

Favorite place you've traveled: Twenty years ago, I had an opportunity to go to Kenya. It was the most amazing, uplifting experience to meet and talk with the people, the heart and soul of Africa, a beloved continent.

What you wish you had known 20 years ago: That we should spend every day enjoying life to its fullest. Know that hardships will come, but we are resilient people.

Best advice you've gotten: Do unto others as you would have them do unto you. Be kind and patient with others.

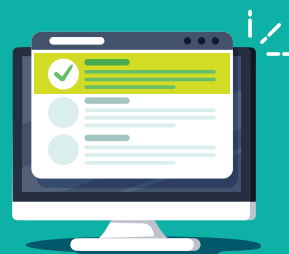
Leader you most admire: Martin Luther King Jr. Without a doubt, I know that I would not be where I am today without his courage, perseverance, and faith.



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Psychologists' research can help us bridge the gap in our divided nation. Page 42

SPECIAL REPORT

TRENDS REPORT 2021

This year's report on the emerging trends in psychology looks at how COVID-19 continues to change the way psychologists do research, deliver services, and train students and how psychologists' expertise is needed now more than ever. Psychologists are helping to improve lives everywhere by leveraging social media and apps, reaching out to underserved communities, leading efforts to end systemic racism and police brutality, and working to heal our fractured nation. *See page 40*



Racial inequalities in psychology. Page 48



Increasing vaccination. Page 76



Efforts to reform policing. Page 68

COVER: ILLUSTRATION BY JING JING TSONG/THE ISPO.T



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dying from
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CAREER

HOW TO WRITE FOR THE PUBLIC

Communicating research findings is critical right now, but writing for a general audience requires skills different from those needed for academic writing. Science writers share their tips to help you maximize your writing's impact. *See page 87*



Gender dysphoria in youth. Page 17



Alcohol use during COVID-19. Page 20



New research on anxiety. Page 25



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ACHIEVING HEALTH EQUITY

A presidential task force will look at new ways to reduce health disparities

BY JENNIFER F. KELLY, PhD, ABPP



It is exciting yet humbling to serve as president of this great association. This isn't the year we expected, but I am proud of how members and staff have pulled together to address issues facing society. Our actions have already made a difference, and we are just at the beginning of what our combined efforts can do to meet the needs of a challenged world. ¶ In February

2020, I decided that my primary presidential initiative would focus on psychology's role in achieving health equity. I believe the entire discipline has a role in achieving a society in which all its members can benefit from psychology's best

practices, research discoveries, and training practices. When the COVID-19 pandemic hit a month later, it became evident that health disparities were having a major impact on who was getting sick and who was dying. I believe that psychology can make a positive difference.

Health disparities in our society are alarming: While only 5.9% of non-Hispanic Whites are uninsured, that number rises to 16.1% for Latinos, 14.9% for Native Americans, and 10.6% for African Americans. Native Americans continue to die at higher rates than other Americans in many categories, and the suicide rate in their community far outpaces that of other groups.

Black Americans are dying from COVID-19 at twice the rate of Whites, and other minority groups have also been hit hard. These numbers do not include the mental health toll on victims, their

families and loved ones, or the effects on the general public of protective measures like stay-at-home orders.

I have appointed a Presidential Task Force on Psychology and Health Equity charged with developing specific recommendations to promote innovative

approaches for psychological science, practice, education, and training. In addition, the group will be responsible for developing policy recommendations and a legislative agenda for advancing health equity for consideration and approval by the APA Council of Representatives. The task force members are leaders in the field with deep and varied expertise, and I am energized by the prospect of working with them. I will keep you informed as the work progresses, including opportunities for participation and input.

Thank you for your trust and confidence in selecting me to serve as your president during this unprecedented year. ■

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● **Jennifer F. Kelly, PhD, ABPP**, is the 2021 APA president and director of the Atlanta Center for Behavioral Medicine. Follow her on Twitter: @JFK4APA.



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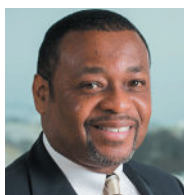
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STRENGTHENING OUR ROOTS

Using the investments of 2020 to fuel progress toward impact in 2021

BY ARTHUR C. EVANS JR., PhD



After a challenging 2020, we enter the new year with a hopeful focus on APA and psychology's future. This past year has forced us all to think creatively, consider new possibilities, and work together toward the promise of a healthier and safer tomorrow.

But that promise of tomorrow would not be here without the intentional investments—commitments of energy, time, and attention—that APA and our members made in 2020. A few examples include:

Advancing APA's strategic vision. APA's strategic plan, co-created with input from leaders and members across the association and adopted in 2019, was critical to our ability to respond to the unparalleled demands of 2020. Time spent last year operationalizing the plan's priorities, building our capacity for doing effective work, and fostering a collaborative organizational culture means that APA and psychology can hit the ground running in 2021, pursuing the positive impact desired by our members.

Supporting members and staff. Last year was about helping APA staff and members get through the pandemic *and* adapt to a world shaped by COVID-19. By supporting our staff and members in both their personal and professional roles, we enter 2021 confident that we have the tools, skills, and knowledge necessary to be flexible and navigate the uncertainty ahead in the many settings in which psychologists work, such as health

care and education, as well as for the work of the association.

Expanding advocacy. Despite being 100% virtual for most of 2020, our advocacy capacity grew in important ways. We spoke out with psychological science and utilized the power of coalitions on issues like telehealth, research funding, racial disparities, and data

collection, and we formed strategic partnerships to have greater impact. Thanks to these efforts to elevate policymakers' understanding of psychology's contributions across a broad range of issues, we enter 2021 with more decision-makers who understand and value the importance of using psychological knowledge to address complex societal issues.

These investments and many others have gotten us through 2020's challenges and positioned APA to be even more effective in accomplishing its mission. Dolly Parton, one of my favorite artists, once said, "Storms make trees take deeper roots." The storms we weathered and roots we deepened in 2020 will enable APA and psychology to excel in 2021 and improve the lives of those we serve. ■



● Arthur C. Evans Jr., PhD, is APA CEO.
Follow him on Twitter: @ArthurCEvans

RON OTSU/UNSPLASH

In Brief

THE LATEST PEER-REVIEWED STUDIES WITHIN PSYCHOLOGY AND RELATED FIELDS



Male narcissists
tend to take
more solo selfies,
research finds.

SELFIES AREN'T JUST FOR NARCISSISTS

Narcissists don't take more selfies than the rest of us, though they do take more selfies featuring only themselves, suggests research in *Psychology of Popular Media*. Researchers found that among 276 undergraduate students in the United States, there was no significant difference between how many selfies those scoring high in narcissism and those scoring low in narcissism

reported taking over the previous week. Participants high in narcissism, however, were more likely to take selfies that featured only themselves. Participants both high and low in narcissism cited grandiose and exhibitionistic aspects of narcissism as motives for taking selfies. Female participants were much more likely to take selfies as part of a group, while men were more likely to take them alone. DOI: 10.1037/ppm0000272

PARENTS' DIVORCE LOWERS OXYTOCIN

Research in the *Journal of Comparative Psychology* indicates that children whose parents divorced go on to have lower levels of oxytocin as adults than those whose parents remained married. Researchers recruited 128 participants in the United States ages 18 to 62, 27% of whom reported their parents were divorced. The participants were, on average, 9 years old when their parents divorced. The researchers found that levels of oxytocin—a hormone linked to parenting, attachment, and anxiety—were substantially lower in participants whose childhood experience included their parents getting divorced. Those participants rated their parents as less caring and more indifferent, rated their fathers as more abusive, and reported being less confident, less comfortable with closeness, less secure in relationships, and having a less sensitive caregiving style than did the participants whose parents had not divorced.

DOI: 10.1037/com0000248

IDEOLOGY ECLIPSES RACE, SEX

Voters prejudiced against minorities and women will support candidates who most closely agree with their political ideologies, regardless of the candidates' race or sex, suggests research in the *Journal of Personality and Social Psychology*. A researcher analyzed data from six surveys about political beliefs and prejudice involving 44,836 participants in the United States. Four of the surveys were conducted since

2016, with two assessing how participants felt about real-life politicians and two others gauging opinions about hypothetical politicians. Another survey rated support for congressional and presidential candidates from 1972 through 2016. Across these five surveys, prejudiced participants were significantly more likely to support both real and hypothetical conservative candidates, with no regard to the candidates' race



If your parents divorced when you were young, you may have low levels of oxytocin.

or sex. A final survey examining anti-Muslim prejudice showed that prejudiced participants supported a hypothetical conservative candidate regardless of their religion, but to a lesser degree than in the other studies.

DOI: 10.1037/pspi0000314

DELAYING RACE TALKS

Adults postpone discussions with their young children about race

because they mistakenly believe the children are not yet capable of processing or understanding race, according to research in the *Journal of Experimental Psychology: General*. In the first of three studies, 728 adults indicated that conversations about race should begin when a child is about 5 years old, despite multiple lines of research indicating that children begin to become aware of race as infants. A second study with 1,193 U.S. adults found that participants who believed that capacities to process race developed later also believed that conversations about race should occur later, too. The results of these studies were not affected by the participants' race, parental status, gender, education level, or experience with children. In a third study, when 442 U.S. adults were informed about children's developmental abilities relating to race, they said adults should start talking about race when children are 4 years old.

DOI: 10.1037/xge0000851

EARLY TRAUMA LEADS TO POOR HEALTH

A meta-analysis and systematic review in *Psychological Bulletin* indicate that early life experiences such as violence, poverty, and neglect are associated with accelerated biological aging. Researchers examined 79 studies, involving 119,263 participants in total. They considered two types of childhood adversity—threat-related (experiencing or witnessing violence) and deprivation-related (neglect by families or institutions)—and three aspects of biological aging—puberty



onset, brain development, and cellular aging. They found that children who experienced threat-related adversity but not deprivation-related adversity reached puberty at an earlier age and showed accelerated cellular aging. Threat-related and deprivation-related adversity were both associated with cortical thinning but in different regions of the brain. The researchers note that these findings can help map pathways from specific early experiences to later health conditions and to characterize mechanisms underlying health disparities. DOI: 10.1037/bul0000270

WE PREFER MUSIC FROM THOSE LIKE US

People may prefer the music of artists whose public personalities mirror their own personality traits, according to research in the *Journal of Personality and Social Psychology*. In the first of three studies, researchers asked 6,279 online participants to indicate their preference for musical artists and to rate their own personality traits and estimate traits for several musicians and their fans. They found a link between an artist's estimated personality traits and those of their fans. In the second study, the

Music lovers, such as these K-pop fans, are often drawn to artists with personality traits that are similar to their own.

researchers identified 75,296 Facebook users who liked the pages of 50 top musicians, such as Bob Dylan and Taylor Swift, on the social networking site and also completed an assessment of their Big Five personality traits through the site. The researchers found a link between the average personality traits of the fans of each of the musicians and the public personality of each artist, as assessed using a machine-learning analysis of their song lyrics. The third study, with 4,902 online participants, showed that the personality match between listener and artist predicted musical preferences

above and beyond matches in gender and age or the audio features of the music.

DOI: 10.1037/pspp0000293

DOES VITAMIN D PREVENT DEPRESSION?

Though vitamin D deficiencies have been associated with depression in late life, vitamin D3 supplements do not help prevent depression or improve mood, according to a study in *JAMA*. Researchers split 18,353 U.S. adults ages 50 years or older without depression into two groups. Half the participants received vitamin D3 supplements for an average of 5 years, and the other half received a matching placebo for the same duration. The researchers found no effect of the supplements on depression or mood.

DOI: 10.1001/jama.2020.10224

CONTAGIOUS OVERCONFIDENCE

Overconfidence can be transmitted from one person to another, suggests research in the *Journal of Experimental Psychology: General*. In the first of six studies, researchers paired up 104 previously unacquainted U.S. undergraduates and asked them to guess the personality traits of 10 people from photographs. Afterward, each participant ranked how well they thought they performed relative to everyone else. Though partners were unaware of each other's self-ranking, the researchers found that participants whose partner overestimated their own performance became more confident in their own ability. A second and third study, with

425 and 255 Canadian students, respectively, indicated that people can gain confidence just by observing someone acting overconfident or by working with someone who had previously worked with an overconfident person. Two additional studies, conducted online with 653



Vitamin D3 supplements don't prevent depression or elevate mood, a study finds.

participants, showed that confidence effects can persist several trials (or several days) after initial exposure to overconfident individuals. A final study with 248 U.S. students indicated that transmission of overconfidence occurs only between individuals within the same in-group.

DOI: 10.1037/xge0000787

I'LL BE FINE, I'VE SEEN THE ROAD WARRIOR

Fans of apocalyptic movies may be more resilient and

better prepared to deal with the coronavirus pandemic than the rest of us, suggests research in *Personality and Individual Differences*. Researchers asked 310 U.S. participants in April 2020 about their preferences and viewing histories for movies in 10 different genres, including horror, postapocalyptic, comedy, and romance. They also assessed the participants' personality traits and asked how prepared they felt during coronavirus shutdowns and what levels of anxiety, depression, irritability, and sleeplessness they had experienced. Participants exhibiting the trait of morbid curiosity and those who were horror movie fans reported being less distressed by the crisis than others. Fans of "prepper films"—where society collapses or aliens invade—reported being even more resilient and better prepared. The researchers hypothesize that such movies make aspects of the pandemic such as quarantine seem less unusual and give people a way to use their imaginations in a safe setting to rehearse coping strategies for scary situations.

DOI: 10.1016/j.paid.2020.110397

LSD BOOSTS PAIN TOLERANCE

A study in the *Journal of Psychopharmacology* indicates that microdoses of LSD may reduce the experience of pain. Researchers asked 24 students in the Netherlands to place their hands into frigid water for as long as they could tolerate it. Compared with a placebo, students who took 20 micrograms of LSD—a dose not high enough to induce hallucinations—could

keep their hands in the cold water about 20% longer and had lower ratings of painfulness and unpleasantness. Smaller doses had little or no effect. The increased pain tolerance was comparable to that previously reported with traditional pain-management drugs such as oxycodone or morphine, which have higher risk of addiction and death by overdose.

DOI: 10.1177/0269881120940937

JEALOUSY MAY STRENGTHEN FRIENDSHIPS

The jealousy that arises when a friendship feels threatened can lead to efforts to strengthen the friendship, suggests research in the *Journal of Personality and Social Psychology*. Over a series of 11 studies, researchers exposed 2,918 participants in the United States to hypothetical scenarios, online emotional experiences, and recalled real-world events. They found that friendship jealousy is uniquely evoked by third-party threats to friendships, not simply by the prospect of losing the friendship (for instance, by the friend moving away). They also found jealousy over friendships increases with the perceived value of the threatened friendship and is strongly dependent on cues that one is being replaced. Finally, the researchers demonstrated that friendship jealousy can motivate “friend guarding” behavior, such as committing to become a better friend, monopolizing the friend’s time, or inducing jealousy in the friend. The researchers note that further studies are needed to determine



how successful such behaviors are in maintaining friendships.

DOI: 10.1037/pspi0000311

SOCIAL CONNECTION FIGHTS DEPRESSION

Strengthening social connections may be among the most effective ways to prevent depression, according to a study in the *American Journal of Psychiatry*.

A third-party threat may toughen the bonds of friendship.

Investigators used analytic methods drawn from genomics to assess data from 118,378 UK Biobank participants, age 40 and above, on 106 modifiable factors that were potentially associated with incidence of depression. They conducted analyses both of the entire sample and of those participants considered at risk for depression because of

genetic factors or traumatic life events. For those factors showing associations with incidence of depression, they conducted further analyses to determine whether the associations were causal and, if so, in what direction. Among the factors showing associations were exercise, sleep duration, belonging to a sports team, napping during the day, and media use. However, the clearest evidence of a factor that can causally reduce the incidence of depression was the tendency to confide in others. The researchers pointed out that some psychological factors, such as use of coping mechanisms, were not included in the data set.

DOI: 10.1176/appi.ajp.2020.19111158

WILD WEST MENTALITY

A study in *Nature Human Behaviour* suggests a correlation between an environment's topography and the temperament of the people who live there. Researchers analyzed links between the results of an online personality test completed by 3,387,014 U.S. residents and the geological features of 37,227 U.S. ZIP codes. They found that participants living in mountainous areas scored lower on agreeableness, extraversion, neuroticism, and conscientiousness but higher on openness to experience. Not all mountainous areas had the same impact, though. The link between living in a

Mountainous terrains may promote a sense of adventure among local residents.

mountainous area and level of openness to experience was 10 times greater for residents of western ranges than those of eastern ranges.

DOI: 10.1038/s41562-020-0930-x

PLACEBOS PROVE POWERFUL

Even when people know they are taking a placebo, it can affect brain mechanisms underlying emotional distress, according to research in *Nature Communications*. In an initial study, researchers split 62 participants in the United States into two groups. Individuals in both groups were shown a series of images, including emotionally disturbing ones. Those in the



ASCENT X MEDIA/GETTY IMAGES

“nondeceptive placebo” group first read about placebo effects. The researchers then asked them to inhale a saline solution nasal spray, which they were told contained no active ingredients but would help reduce their negative feelings about the emotional images if they believed it would. Participants in the control group inhaled the same saline solution spray but were told only that the spray would improve the clarity of the physiological readings the researchers were recording. The researchers found that participants in the nondeceptive placebo group reported lower levels of emotional distress than those in the control group. In a follow-up study with 218 participants, those in the nondeceptive placebo group showed a pattern of reduced electrical brain activity consistent with lower levels of distress in response to emotional events.

DOI: 10.1038/s41467-020-17654-y

STAYING MOTIVATED

Getting and staying motivated may be related to the ratio of the levels of the neurotransmitters glutamine and glutamate in the nucleus accumbens area of the brain, according to research in *Neuropsychopharmacology*. Researchers had 27 Swiss men perform 80 trials of a demanding hand-grip task with monetary incentives. They also scanned the men’s nucleus accumbens using a brain-imaging technique called proton magnetic resonance spectroscopy to measure the levels of various neurotransmitters. The researchers found that the ratio of glutamine to glutamate levels in the nucleus



Younger teens and tweens with gender dysphoria appear to have fewer mental health problems than their older counterparts.

accumbens was associated with the ability of the men to maintain their performance over the course of the session. They also found that competition with other participants boosted performance, particularly for participants with low glutamine-to-glutamate ratios.

DOI: 10.1038/s41386-020-0760-6

PTSD AND DEMENTIA

People with post-traumatic stress disorder (PTSD) are more likely than others to develop dementia later in life, according to research in *The British Journal of Psychiatry*. Researchers performed a meta-analysis of 13 longitudinal studies that followed a total of 1,693,678 participants for as long as 17 years. In the general population, those with PTSD were about twice as likely as those without PTSD to go on to have dementia. However, veterans with PTSD showed

a somewhat lower increase in risk for dementia—about 1.6 times—than veterans without PTSD. As veterans are more likely to receive treatment for PTSD compared with the general population, this lower increase in risk suggests that treating PTSD may help prevent or delay dementia.

DOI: 10.1192/bjp.2020.150

GENDER DYSPHORIA IN YOUTH

Older youth who have gender dysphoria and seek gender-affirming medical care may have greater mental health problems than their younger counterparts, according to a study in *Pediatrics*. Researchers examined the initial visit records of 300 youth ages 10 to 17 who sought gender-affirming medical care at a Canadian clinic. Such care may include hormone blockers, hormones, or both. Overall, 78% of the youth reported at least one mental health problem. The researchers found that those ages 15 to 17 were more likely than those ages 10 to 14 to have diagnoses of depression (46% versus 30%) and to have self-harmed (40% versus 28%), considered suicide (52% versus 40%), attempted suicide (17% versus 9%), and used psychoactive medications (36% versus 23%). Analyses indicate that more advanced pubertal development, rather than age itself, may account for many of the differences between the older and younger groups. ■

DOI: 10.1542/peds.2019-3600

● **For direct links** to the research cited in this section, visit our online edition at www.apa.org/monitor.

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MISMANAGEMENT OF PSYCHOTROPICS IN THE FOSTER CARE SYSTEM

How can psychologists help ensure appropriate prescribing and oversight of these medications to foster children?

BY KATHRYN LAFORTUNE, JD, PhD, AND SHELBY FIELDS, JD CANDIDATE, THE UNIVERSITY OF TULSA COLLEGE OF LAW

In 2015, Children's Defense Fund founder Marian Wright Edelman, JD, drew attention to the problems with prescribing psychotropic medications to foster children. She noted that serious deficits persisted regarding inadequate informed consent and insufficient oversight and that there was a dearth of education and availability of nonpharmacological treatments to address the mental health needs of children in foster care. This plight was further exposed in the 2017 filing of

the first class action lawsuit to focus on the over-prescription and overreliance on psychotropics with at-risk children in state custody, *M.B. v. Tidball*. This Missouri case addressed long-term and dangerous mismanagement of these medications. It also highlighted failures in medication administration, inaccurate medical record-keeping for the children, a lack of timely reviews, and few cases of meaningful informed consent for these prescriptions.

M.B. was one of the named plaintiffs in the class action lawsuit. He had been prescribed more than six psychotropic medications when he was a patient at a psychiatric facility, but his newly appointed foster parent received no information about his medications when she picked him up from the facility. She was handed a bag of medications with no directions and no opportunity to ask questions. The complaint also alleged that the foster parents were not provided with any information on these children's trauma backgrounds, mental health needs, or medical histories, and that such information was also rarely passed on to the children's subsequent physicians. Moreover, the plaintiffs detailed the children's division of state social services directors' knowledge of, but lack of attention to, these failures over several years.

In December 2019, the parties crafted a settlement agreement outlining the procedures to be put



AT ISSUE

Protecting children in state custody from being dangerously overmedicated

in place to improve care. These included improving case management, implementing staff training on procedures for psychotropic medication use and monitoring, creating a statewide system for medical records of foster care children, and following strict informed consent and assent requirements.

So, what can psychologists do to address similar issues in their states? Education on the potential harms and benefits of psychotropic medications is key, particularly for foster children, who often have been exposed to complex trauma. The effects of over-medicating children can be mentally and physically devastating. The *Tidball* case illustrated the potential risks for using psychotropics on children, including psychosis, seizures, suicidal thoughts, and organ damage. Psychologists can help by monitoring compliance, side effects, and behavioral changes. They can talk with patients in foster care about their medications to ensure that they understand the rationale for their use and determine whether the patient received meaningful informed consent. Developing relationships with prescribing clinicians also allows psychologists to advocate for their patients' needs. The APA Ethics Code offers relevant guidance: "Special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making." They "consult with, refer to, or cooperate with other professionals and institutions to serve the best interests of those with whom they work."

Psychologists who observe agency mismanagement and harm to foster children should consider connecting with attorneys to pursue legal action and offering their expertise to remedy such injustice. ■

● "Judicial Notebook" is a project of APA Div. 9 (Society for the Psychological Study of Social Issues).

A close-up photograph of a hand using a metal bottle opener to pry off the cap of a dark glass beer bottle. The bottle is held in the other hand, and the cap is being lifted. The background is blurred, focusing attention on the action of opening the bottle.

DRINKING, COPING, AND COVID-19

Psychologists can help
their patients be mindful
of problematic drinking
during the pandemic and
establish habits that can
keep them safe

BY CHARLOTTE HUFF

The pandemic's uncertainty and stress, combined with disrupted routines, may have encouraged some people to progress into heavier drinking habits and undercut others' efforts to remain sober, though it's still too soon for much peer-reviewed data, psychologists say. ¶ Potential stressors that can foster more reliance on alcohol are nearly ubiquitous these days—from financial insecurity to juggling work and childcare from home to protests and racial unrest. Alcohol misuse also boosts the chance of contracting the virus, as it can impair the body's immune system, according to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and people with substance use disorders are both more likely to develop COVID-19 and experience worse COVID-19 outcomes (Wang, Q. Q., et al, *Molecular Psychiatry*, 2020). There's also the risk that people are more prone to let their guard down about distancing, handwashing, and other safety protocols while under the influence, psychologists say (see sidebar, page 22).

Prior studies conducted in the wake of traumatic events, such as hurricanes and other natural disasters, indicate that some people are likely to escalate their drinking, possibly as a coping mechanism related to stress, says Laura Kwako, PhD, a clinical psychologist and a health scientist administrator at NIAAA. But amid the pandemic, some of the limitations placed on social gatherings also may have changed up routines in beneficial ways, she says. "If people were mostly going out to bars and restaurants, it's likely that their consumption would decrease during this time simply because they're not doing those things anymore."

Early survey data from several countries, including the United States and Canada, indicate a mixed picture, Kwako says. The percentage of people reporting binge drinking—five or more drinks in 2 hours for men and four or more drinks in 2 hours for women—increased from 22% in February to 27% in April, according to North Carolina-based Research Triangle Institute, which surveyed 993 people, including 555 who reported drinking in February. Overall, 31% of respondents reported drinking alcohol more frequently, while 21% reported drinking less frequently.

Psychologists can help patients not only by asking about alcohol consumption regularly but also by teaching motivational, cognitive behavioral, and other techniques for cutting back or trying to stay sober,

say Kwako and others. While in-person Alcoholics Anonymous (AA) meetings are rare at the moment, numerous alternatives exist online and through social media, which may be more convenient for people struggling to protect their sobriety during an unsettling time.

Challenges persist amid a pandemic culture rife with references to Zoom happy hours and quarantinis, and in which some states have relaxed restrictions and allowed for curbside pickup of to-go liquor and cocktails from restaurants. Meanwhile, some of the traditional outlets to distract and relieve stress are less available, including spending time with friends and heading to the gym.

While there have been some isolated studies, a clearer picture of how American alcohol habits have been altered likely won't start appearing in peer-reviewed research until next year, says Denis McCarthy, PhD, who directs the Missouri Center for Addiction Research and Engagement in Columbia. For now, psychologists should try to gain a sense of not only how much a patient is drinking but the underlying drivers, he says. Broadly speaking, are they drinking to cope with negative emotions and stress or to socialize and celebrate?

"To the extent that people are drinking at home by themselves and to cope with negative emotions, drink for drink they are going to have more problems and



● **WEBINAR TO WATCH:** Impact of COVID-19 on Alcohol Use in the U.S. www.apa.org/members/content/alcohol-use-covid-19

it's going to be less effective in achieving their goals," McCarthy says. "And at least early in the pandemic, that was pretty much all of the drinking that was happening."

RISKY DRINKING

Ideally, all patients in therapy should be asked about alcohol consumption, but especially those who are seeking help for anxiety or depression, McCarthy says. "If there is one question that I'd ask people, it is: 'How much has the pandemic changed your drinking pattern?'"

Psychologists can use a number of brief screening tools, such as the Alcohol Use Disorders Identification Test, to gain a quick snapshot of a patient's

The uncertainty and stress of the pandemic, combined with constant references to Zoom happy hours and quarantinis, may have encouraged some people to progress into heavier drinking habits.

consumption, says Adam Leventhal, PhD, an addiction psychologist who directs the University of Southern California Institute for Addiction Science in Los Angeles. Another approach is to ask individuals who drink to start logging when they consume and how much so they are realistic about their own patterns, he says.

If the patient is progressing toward heavier consumption, the psychologist can work with them on a commitment to dial back, for instance deciding to drink no more than twice weekly or no more than one drink each night, he says.

If patients stick with that commitment, that indicates they can control their drinking and have

decreased their consumption in the process, Leventhal says. "But if they break that, that's a sign that they may have an alcohol use problem," he says.

As the pandemic continues, Leventhal worries that without intervention, some previously light drinkers may engrain riskier habits. "The longer the period of time that the brain is exposed to higher levels of alcohol more frequently," he says, "the more the neuroadaptations take place, including brain changes that drive addiction."

People may assume that they'll be able to return to their prior patterns once viral fears fade, Leventhal says. "But it isn't so easy. Over these months, the brain has already changed,

SAFER SOCIALIZING

DRINKING AND PANDEMIC SAFETY

Alcohol impairs people's judgment, including their ability to weigh risks and benefits—not a good combination at a time when people are being asked to adhere to physical distancing, mask-wearing, and other public health measures, says Denis McCarthy, PhD, an addiction psychologist who studies how alcohol influences decision-making. That's likely one of the challenges facing the safe reopening of college campuses, he says, noting that even students striving to be careful may backslide once the alcohol starts flowing.

Psychologists should remind their patients of these risks and prompt them to develop a safety plan and think through possible scenarios before they venture out for a backyard party or an outdoor meal with friends

or family, he says. "Once you start drinking, it is hard to maintain the vigilance and the control of your behavior in a way that is safe."

Among his suggestions for safer socializing:

■ **Pre-vet the plan.** Think through the size and location of the gathering, McCarthy suggests. How many people are expected, and will there be an easy way to remain apart as the hours pass given that masks come off while eating and drinking?

■ **Be ready to leave.** Sort through in advance what metrics to use, whether it's that masks are being worn below the chin or people are clustering too close, to determine if it's safer to say goodbyes early, McCarthy says. "It's hard to make that decision once

you've been drinking."

■ **Backstop each other.** Form a mutual safety pact with friends, an approach that may help college students when they venture out, McCarthy suggests. Settle on what level of social distancing you are comfortable with and preplan ways to maintain it, he says. Keep track of each other throughout the night. Agree beforehand on a designated driver.

■ **Avoid risky driving.** Contagion fears may lead to more people driving solo to social events and a reluctance to drive home with someone else or call a car service if one drink turns into three. If there's no designated driver, he says, "they have to have a plan. And some of the previous go-to option [from before the pandemic] may not feel comfortable to them."



and it's not like a simple habit change."

CUTTING BACK OR PURSUING SOBRIETY

To some degree, the inherent constraints of pandemic life can assist people who are trying to reduce or eliminate alcohol, says Katie Witkiewitz, PhD, an addiction researcher and professor in the psychology department at the University of New Mexico in Albuquerque. Access to bars is more limited, and going out anywhere is a bigger deal, Witkiewitz says. She's spoken about the sober-curious movement—in which people opt for a personal break from alcohol consumption, sometimes for a month and sometimes longer—on APA's *Speaking of Psychology* podcast.

Because people are already not leaving the house a lot, and when they do, they have to mask up, there are fewer obvious opportunities to drink, she says.

"You're not stopping at the bar or the liquor store on the way home from work."

Still, the movement of many AA meetings to online only poses challenges, Witkiewitz says. Not only does it block off this lifeline to support and continued sobriety for those without the necessary technology, but the online format itself can be more limiting.

"Like all of the ways that virtual is not quite as great as real life, there isn't that informal chatting that can happen before and after meetings," Witkiewitz says. "That really provides opportunities for connection and social interaction."

NIAAA provides an online treatment navigator tool designed for people seeking help, including medication options, Kwako says. Psychologists can teach numerous techniques via telehealth, from mindfulness-based stress prevention to cognitive behavioral therapy, tailoring

FURTHER READING

Hospitalizations for substance abuse disorders before and after Hurricane Katrina: Spatial clustering and area-level predictors, New Orleans, 2004 and 2008

Moise, I. K., & Ruiz, M. O.

Preventing Chronic Disease, 2016

How has drinking behavior changed during the COVID-19 pandemic?

Barbosa, C., et al. Research Triangle Institute, 2020

Stress and alcohol: Epidemiologic evidence

Keyes, K. M., et al. *Alcohol Research: Current Reviews*, 2012

the approach to each patient's circumstances and home environment, she says. They also can incorporate motivational enhancement therapy to help patients create a practical plan to change their drinking behavior, think through potential barriers in advance, and develop drink refusal skills.

For instance, a patient could identify a stressful scenario that typically spurs the desire to drink and then brainstorm a handful of things they could do instead, Kwako says. That list may include ideas such as meditating for five minutes or texting a friend, she says.

Another approach that psychologists can teach is "urge surfing," in which people ride out the urge to drink by focusing on their breathing, Witkiewitz says. The breathing practice provides a pause, allowing the patient to consider what they might want in that moment instead of alcohol, whether it's personal connection with someone else, sleep, or relief from boredom, she says. Even if the patient still succumbs to pouring a drink, she says, "they get more awareness of themselves and their reasons for drinking, and more awareness of their relationship with alcohol."

Above all, Witkiewitz suggests that psychologists grant themselves and their patients some grace at a time when the structure and rhythm of everyone's lives have been upended.

"Slips are more likely to happen right now," Witkiewitz says. "That doesn't mean that your recovery is lost. You can get back on track now, just like you can get back on track at any other time." ■

THE TOP 10 JOURNAL ARTICLES OF 2020

In 2020, APA's 89 journals published more than 5,000 articles—the most ever and 25% more than in 2019. Here's a quick look at the 10 most downloaded to date.

BY CHRIS PALMER

1. Me, My Selfie, and I: The Relations Between Selfie Behaviors, Body Image, Self-Objectification, and Self-Esteem in Young Women

Veldhuis, J., et al.

Young women who appreciate their bodies and consider them physical objects are more likely to select, edit, and post selfies to social media, suggests this study in *Psychology of Popular Media* (Vol. 9, No. 1). Researchers surveyed 179 women, ages 18 to 25, on how often they took selfies, how they selected selfies to post, how often they used filters and editing techniques, and how carefully they planned their selfie postings. They also assessed participants' levels of body appreciation and dissatisfaction, self-objectification, and self-esteem. Higher levels of self-objectification were

linked to more time spent on all selfie behaviors, while body appreciation was related to more time spent selecting selfies to post, but not frequency of taking or editing selfies. Body dissatisfaction and self-esteem were not associated with selfie behaviors.

DOI: 10.1037/ppm0000206

2. A Closer Look at Appearance and Social Media: Measuring Activity, Self-Presentation, and Social Comparison and Their Associations With Emotional Adjustment

Zimmer-Gembeck, M. J., et al.

This *Psychology of Popular Media* (online first publication) article presents a tool to assess young people's preoccupation with their physical appearance on social media. Researchers

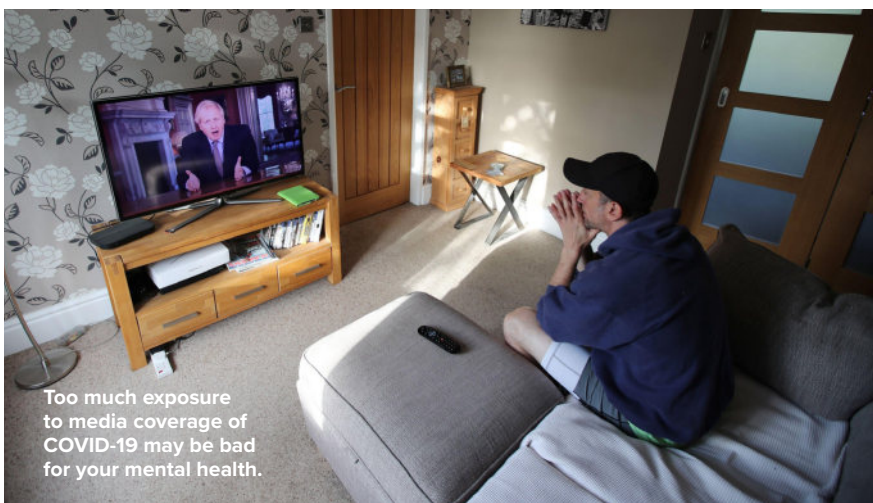
administered a 21-item survey about social media to 281 Australian high school students. They identified 18 items with strong inter-item correlation centered on three categories of social media behavior: online self-presentation, appearance-related online activity, and appearance comparison. In a second study with 327 Australian university students, scores on the 18-item survey were found to be associated with measures of social anxiety and depressive symptoms, appearance-related support from others, general interpersonal stress, coping flexibility, sexual harassment, disordered eating, and other factors. The researchers also found that young women engaged in more appearance-related social media activity and appearance comparison than did young men.

DOI: 10.1037/ppm0000277

3. The Novel Coronavirus (COVID-2019) Outbreak: Amplification of Public Health Consequences by Media Exposure

Garfin, D. R., et al.

Repeated media exposure to the COVID-19 pandemic may be associated with psychological distress and other public health consequences, according to this commentary in *Health Psychology* (Vol. 39, No. 5). The authors reviewed research about trends in health behavior and psychological distress as a response to media coverage of crises, including terrorist attacks,



Too much exposure to media coverage of COVID-19 may be bad for your mental health.

SYLVIA BUCHHEITZ/LAMY



Shame and stigma are among the obstacles to seeking treatment for those suffering from social and generalized anxiety.

school shootings, and disease outbreaks. They found that repeated media exposure to collective crises was associated with increased anxiety and heightened acute and post-traumatic stress, with downstream effects on health outcomes such as new incidence of cardiovascular disease. Moreover, misinformation can further amplify stress responses and lead to misplaced or misguided health-protective and help-seeking behaviors. The authors recommended public health agencies use social media strategically, such as with hashtags, to keep residents updated during the pandemic. They also urged the public to avoid sensationalism and repeated coverage of the same information.

DOI: 10.1037/hea0000875

4. Barriers to Mental Health Treatment Among Individuals With Social Anxiety Disorder and Generalized Anxiety Disorder

Goetter, E. M., et al.

This study in *Psychological Services* (Vol. 17, No. 1) indicates that 3 in 4 people who suffer from anxiety do not receive proper care. Researchers recruited 226 participants in the United States who were previously diagnosed with social anxiety disorder or generalized anxiety disorder and assessed their symptom severity and asked them to self-report any barriers to treatment. Shame and stigma were the highest cited barriers, followed by logistical and financial barriers and not knowing where to seek treatment. Participants with more severe symptoms reported more barriers to treatment than those

with milder symptoms. Racial and ethnic minorities reported more barriers than racial and ethnic majorities even after controlling for symptom severity. The researchers called for increased patient education and more culturally sensitive outreach to reduce treatment barriers.

DOI: 10.1037/ser0000254

5. The Construction of “Critical Thinking”: Between How We Think and What We Believe

Lamont, P.

This *History of Psychology* (Vol. 23, No. 3) article examines the emergence of “critical thinking” as a psychological concept. The author describes how, between World War I and World War II in the United States, the concept emerged out of growing concerns about how easily people’s beliefs could be changed

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Top 10 Journal Articles

and was constructed in a way that was independent of what people believed. The author delves into how original measurements of critical thinking avoided assumptions about the accuracy of specific real-world beliefs and details how subsequent critical thinking tests increasingly focused on logical abilities, often favoring outcome (what we believe) over process (how we think).

DOI: 10.1037/hop0000145

6. Treatment of Alcohol Use Disorder: Integration of Alcoholics Anonymous and Cognitive Behavioral Therapy

Breuninger, M. M., et al.

This article in *Training and Education in Professional Psychology* (Vol. 14, No. 1) details how to work with alcohol use disorder patients who are participating in both cognitive behavioral therapy (CBT) and Alcoholics Anonymous (AA). The authors point to distinctions between AA and CBT: The goal of AA is total abstinence and the primary therapeutic relationship is with a peer in recovery, while CBT takes a less absolute approach and the primary relationship is

with a psychotherapist. The authors also point to commonalities: both approaches emphasize identifying and replacing dysfunctional beliefs and place value in social support. The authors recommend clinicians and trainees become more educated about AA and recommend a translation of the 12-step language into CBT terminology to bridge the gap.

DOI: 10.1037/tep0000265

7. Positivity Pays Off: Clients' Perspectives on Positive Compared With Traditional Cognitive Behavioral Therapy for Depression

Geschwind, N., et al.

Positive cognitive behavioral therapy, a version of CBT focused on exploring exceptions to the problem rather than the problem itself, personal strengths, and embracing positivity, works well to counter depressive symptoms and build well-being, according to this study in *Psychotherapy* (Vol. 57, No. 3). Participants received a block of eight sessions of traditional CBT and a block of eight sessions of positive CBT. Researchers held in-depth interviews with 12 of these



Students with high emotional intelligence earn better grades than those with lower emotional intelligence.

IZUSEK/GETTY IMAGES

participants. Despite initial skepticism, most participants reported preferring positive CBT but indicated experiencing a steeper learning curve than with traditional CBT. Researchers attributed positive CBT's favorability to four factors: feeling empowered, benefiting from effects of positive emotions, learning to appreciate baby steps, and rediscovering optimism as a personal strength.

DOI: 10.1037/pst0000288

8. Targeted Prescription of Cognitive-Behavioral Therapy Versus Person-Centered Counseling for Depression Using a Machine Learning Approach

Delgadillo, J., & Gonzalez Salas Duhne, P.

A machine learning algorithm can identify which patients would derive more benefit from cognitive behavioral therapy (CBT) versus counseling for depression, suggests research in this *Journal of Consulting and Clinical Psychology* (Vol. 88, No. 1) article. Researchers retrospectively explored data from 1,085 patients in the United Kingdom treated with either CBT or counseling for depression and discovered six patient characteristics—age, employment status, disability, and three diagnostic measures of major depression and social adjustment—relevant to developing an algorithm for prescribing the best approach. The researchers then used the algorithm to determine which therapy would work best for an additional 350 patients with depression. They found that patients receiving their optimal treatment type were twice as likely to improve significantly.

DOI: 10.1037/ccp0000476

9. Traumatic Stress in the Age of COVID-19: A Call to Close Critical Gaps and Adapt to New Realities

Horesh, D., & Brown, A. D.

This article in *Psychological Trauma: Theory, Research, Practice, and*

Policy (Vol. 12, No. 4) argues that COVID-19 should be examined from a post-traumatic stress perspective. The authors call for mental health researchers and clinicians to develop better diagnoses and prevention strategies for COVID-related traumatic stress; create guidelines and talking points for the media and government officials to use when speaking to an anxious, and potentially traumatized, public; and provide mental health training to professionals in health care, education, childcare, and occupational support in order to reach more people.

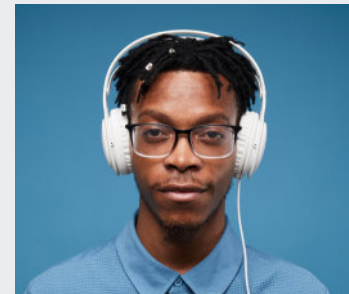
DOI: 10.1037/tra0000592

10. Emotional Intelligence Predicts Academic Performance: A Meta-Analysis

MacCann, C., et al.

Students with high emotional intelligence get better grades and score higher on standardized tests, according to the research presented in this article in *Psychological Bulletin* (Vol. 146, No. 2). Researchers analyzed data from 158 studies representing more than 42,529 students—ranging in age from elementary school to college—from 27 countries. The researchers found that students with higher emotional intelligence earned better grades and scored higher on achievement tests than those with lower emotional intelligence. This finding was true even when controlling for intelligence and personality factors, and the association held regardless of age. The researchers suggest that students with higher emotional intelligence succeed because they cope well with negative emotions that can harm academic performance; they form stronger relationships with teachers, peers, and family; and their knowledge of human motivations and social interactions helps them understand humanities subject matter.

DOI: 10.1037/bul0000219 ■



5 INTERVIEWS TO LISTEN TO NOW

Psychology's most innovative thinkers are featured on APA's *Speaking of Psychology* podcast, which highlights important research and helps listeners apply psychology to their lives. The most popular episodes of 2020, as measured by the number of downloads in the first 30 days, were:

1.
How to have meaningful dialogues despite political differences,
with Tania Israel, PhD
2.
Canine cognition and the survival of the friendliest,
with Brian Hare, PhD
3.
The challenges faced by women in leadership,
with Alice Eagly, PhD
4.
How to choose effective, science-based mental health apps,
with Stephen Schueller, PhD
5.
Psychedelic therapy,
with Roland Griffiths, PhD

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3 QUESTIONS FOR ROBERT KINSCHERFF

The public policy researcher says the spike in gun violence during the pandemic speaks to the urgent need for a comprehensive public health approach to prevention

BY TORI DEANGELIS

Among the most disturbing developments during the pandemic and Black Lives Matter protests has been a surge in urban gun homicides among young males of color. Compared with July 2019, shootings in July 2020 rose 53% in New York, 46% in Chicago, and 23% in Atlanta, and in some cities, those numbers continue to rise. Victims also include young children—mostly Black and Latinx—who have been unintentionally injured or killed in shooting incidents. Meanwhile, police continue to shoot people of color in disproportionate numbers, despite demands for reform, and individuals are firing back in retaliation and in domestic terrorist actions.

These incidents, however, are just part of the picture. One of the leading voices arguing for a comprehensive and nuanced perspective on gun violence and its prevention is Robert Kinscherff, PhD, JD, a professor of clinical psychology at William James College in Newton, Massachusetts. He analyzes the problem from a public health perspective that recognizes that gun violence isn't just about urban violence; it also encompasses injuries and deaths related to suicide, domestic and community disputes, accidents, and criminal activity, and it affects a wide range of populations. "America does not have a single gun violence problem," says Kinscherff. "It has different gun violence problems that impact different groups of people differently. Until we recognize this, our efforts to limit gun death and

injury are unlikely to be very effective."

Because the issue is so complex, gun violence requires a public health approach that uses public education, evidence-based screenings, and interventions targeted to specific populations and needs, explains Kinscherff, who advocates for this approach at clinical, forensic, judicial, and policy levels.

The *Monitor* asked Kinscherff how such an approach could lead to a dramatic reduction in gun violence now and beyond the pandemic and race-related uprisings.

What is causing the recent rise in gun violence?

Many factors are probably at play. In terms of urban shootings among youth, one likely factor is that many of these young people can no longer fill their time like they used to. Last summer, many were involved in jobs, sports, and other community activities. Now they have fewer positive opportunities, less adult supervision, more access to handguns, and more opportunities to get into trouble.

Also, there are alarming increases in purchases of guns and alcohol—a common occurrence during times of turmoil and specifically since the onset of the pandemic. While guns are often intended for self-defense, their accessibility has probably contributed to spikes in gun suicides, particularly among adolescents and middle-aged White males. In addition, researchers are increasingly concerned that the pandemic will lead to greater suicide rates due to increased social isolation, financial insecurity,



COURTESY OF ROBERT KINSCHERFF

disrupted life expectations, increased rates of depression and anxiety, and prolonged uncertainty.

A recent commentary in the *Journal of the American Medical Association* argued that gun violence, in particular urban gun violence, can't be solved by legislation alone—that social determinants such as poverty and income inequity must also be addressed. What's your take?

I agree. Legislative approaches, such as closing loopholes in gun sales, are helpful but insufficient. However, the idea of addressing social determinants needs to be unpacked and developed into specific strategies that target specific aspects of poverty and systemic racism. Research shows that interventions that tackle specific factors such as limited

educational and job opportunities, unaffordable housing, barriers to health care, and job and food insecurity lower homicides and suicides over time.

For urban male youth at risk of misusing guns, a particularly effective strategy is supporting their engagement in activities such as school achievement, sports, arts and culture, jobs, and community service activities. This creates relationships with caring adults, more opportunities, and alternatives to more dangerous social networks. Other research shows that deploying street outreach workers—who persistently work to connect with youth at highest risk of community violence and guide them toward prosocial activities and actions—can significantly enhance this kind of approach. They basically won't take no for an answer. While some of

these activities are on hold during the pandemic, they should be renewed and expanded as soon as it is safe.

Do we have a long way to go before these kinds of ideas are implemented on a large scale?

Fortunately, there is growing support for a broad public health approach to gun violence, as reflected in policy positions of the APA, American Psychiatric Association, American Public Health Association, and American Medical Association. Congress has now appropriated \$25 million to study gun violence and removed many long-standing constraints on gun-related research. And researchers are increasingly examining the various kinds of gun violence through combined clinical, social, epidemiological, and public health lenses.

In terms of urban gun violence specifically, scholars, researchers, and community-based professionals—including those with law enforcement perspectives—understand that it's simply not feasible to incarcerate our way out of structural social problems. There's a growing recognition that the same social determinants that drive outcomes for physical and behavioral health also drive gun violence.

This viewpoint holds that the likelihood of gun violence, toward self or others, can't simply be reduced to individual character flaws or weaknesses—that the cards you're dealt in life matter significantly. From a population point of view, the cards are social determinants like access to money, food and housing, education and jobs, health and behavioral health care, healthy relationships, and a safe community. Not everyone starts from the same point, either with the hand they're dealt or with opportunities to learn how to play successfully. We need to fix that, and that's what a public health approach is designed to do. ■



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Black teens experience an average of five discriminatory encounters every day, research has shown.



CE

CONTINUING EDUCATION HOW TO DISCUSS RACE WITH BLACK TEENS AND THEIR FAMILIES

BY CHARLOTTE HUFF

To best help Black teens and their families, psychologists must not only develop a comfort level with discussing racial socialization and racial identity but also be prepared to incorporate those concepts into therapy.

Such discussions are more critical than ever as protests over racial injustices take center stage in the wake of high-profile police killings of African Americans including Breonna Taylor, George Floyd, and others. In fact, one federal survey showed that signs of anxiety and depression among Black Americans rose from 36% to 41% in the week following the release of the video showing Floyd's death.

And racial stressors are common among Black teens, say psychologists who study racial socialization and identity. One study found that Black adolescents experi-

ence an average of five discriminatory encounters every day, either online or in person (*Journal of Applied Developmental Psychology*, Vol. 66, 2020).

These encounters exert a toll: A recent meta-analysis, for example, finds that teens of color who report greater perceptions of racial and/or ethnic discrimination have higher rates of depression, higher psychological distress, and poorer self-esteem. They are also more likely than their counterparts to suffer academically and to engage in risky behaviors such as substance use (*American Psychologist*, Vol. 73, No. 7, 2018). Meanwhile, Black high school students are more likely than those in other racial and ethnic groups to attempt suicide, with 11.8% reporting at least one attempt, compared with 8.9% of Hispanic/Latinx and 7.9% of White high school students (*Morbidity and Mortality Weekly Report*, Vol. 69, No. 1, 2020).

Unfortunately, large treatment gaps remain. As of 2018, 10.3% of Black adolescents ages 12 to 17 had experienced a depressive episode in the prior year, but two-thirds were not receiving any care, according to federal data. And when Black teens and their families do seek out therapy, there's a high likelihood they will be treated by psychologists who don't look like them: As of 2019, 83% of psychologists described their race/ethnicity as White and 3% as Black, with the remainder self-identifying

as Hispanic (7%), Asian (4%), and other (2%), according to APA data. That situation is exacerbated by the fact that nearly two-thirds of psychologists say they never, rarely, or only occasionally provide services to Black patients, APA data find.

Luckily, there are signs of a generational shift, with half of psychologists under age 35 reporting that they frequently or very frequently treat Black patients. But psychologists of all backgrounds can take steps to develop cultural competency and become proficient at talking with Black teens about issues such as the emotional impact of vicarious racism and of more direct racist assaults, says Alfree Breland-Noble, PhD, a mental health disparities researcher and founder and board president of the nonprofit African American Knowledge Optimized for Mindfully Healthy Adolescents (AAKOMA) Project in Arlington, Virginia.

Black teens must cope with these racial stressors along with the challenges of navigating adolescence, say Black psychologists who study racial socialization and racial identity. Working effectively with Black teens and their family members requires close listening and unpacking of any racial components to solve problems and work through racial dilemmas, they say.

To that end, psychologists and psychology trainees should expose themselves to cultures other than their own through cultural awareness activities like taking courses in African

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1. Learn strategies to help Black teens process and problem-solve racial dilemmas.
2. Identify the components of ethnic-racial socialization and their protective benefits in raising Black children.
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American studies, volunteering for organizations that serve a mix of communities, or building a diverse circle of friends. Those efforts should begin long before psychologists begin to see Black patients, Breland-Noble says.

With that context, “by the time any African American or any family of color shows up in clinic, it’s not the first time that a psychologist is learning to have discussions around race,” she says. “We shouldn’t be practicing and developing our cultural competence on patients.”

BRINGING RACE INTO THE OPEN

Psychologists from other racial backgrounds who are working with Black teens have a responsibility to raise that difference at the start of therapy so it doesn’t inhibit frank discussions moving forward, Breland-Noble says.

She adopts that approach herself when her patient is not Black. When she and a client start therapy, she details her education and training, and then says, “Clearly, I’m an African American woman and that informs the work that I do. My hope is that it doesn’t become an impediment to our relationship and our working together.” Acknowledging any racial or ethnic differences frees teen patients and their family members to express their thoughts about the racial aspects of what they are coping with, says Breland-Noble, even if the initial reason for seeking help doesn’t appear to involve race.

“Everything is connected to race,” she says. “There’s nothing that that child is going through that does not have a racial component

to it.” That awareness begins early: Studies indicate that children as young as age 10 can recognize discriminatory actions, whether they are direct, such as name-calling, or more covert, such as being suspected of wrongdoing (*Child Development*, Vol. 76, No. 3, 2005).

For instance, a Black teen may be struggling academically, but a key reason may be that she feels alienated from White peers at school, says Mia Smith-Bynum, PhD, an associate professor of family science at the University of Maryland School of Public Health. However, she may omit these details with her White therapist because she isn’t sure how the therapist will react or may doubt their perception when racial assaults are not directly stated.

“If a racial epithet isn’t used, a lot of times White people are just not comfortable seeing and hearing those stories,” Smith-Bynum says.

Psychology providers can also benefit from involving parents and other family members in therapy by tapping into a widespread cultural practice called ethnic-racial socialization. This practice “is a process by which race-related messages about the meaning or the value of race and racism are transmitted [to adolescents] by their parents, clinicians, and everybody around them,” explains Thomas Vance, PhD, an Atlanta-based counseling

psychologist who focuses on multiculturalism and intersectionality. “It’s been found to be one of the most critical development processes of Black youth.”

Researchers have broken down ethnic-racial socialization practices into four primary components: cultural socialization, preparation for bias, promotion of mistrust, and egalitarianism (*Developmental Psychology*, Vol. 42, No. 5, 2006).

Among the four, the strongest evidence so far pertains to cultural socialization and how it may benefit positive youth development. By teaching youth about their own cultural customs and traditions to promote racial pride and identity, family members can help cultivate myriad positive developmental outcomes, including higher self-esteem, better academic adjustment, and greater psychological well-being, according to a literature review of 259 empirical articles (*Journal of Marriage and Family*, Vol. 82, No. 1, 2020).

EXPLORING RACIAL STRESSORS

But to help their teen patients, psychologists must first identify the underlying racial dilemmas or stressors, which may not be initially apparent, according to psychologists studying racial socialization and racial identity. Identifying these may take some time and effort to solicit frank

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Psychologists from other racial backgrounds who are working with Black teens have a responsibility to raise that difference at the start of therapy so it doesn’t inhibit frank discussions moving forward.



Psychologists should ask open-ended questions about the racial stressors in the lives of their teen clients, which can lead to deeper discussions.

discussion, they say.

Teenagers in therapy may mistrust that a psychologist can understand their experience, given their age difference and possible racial differences. But psychologists can signal openness to better understanding the teen's world and how their racial experiences may impact it. In fact, psychologists may find that Black Generation Z teenagers can be surprisingly frank about discussing racial stressors since they've experienced more ethnic-racial socialization than Blacks of older generations, Vance says.

To gain insights into the minds and lives of these teens, Vance suggests that psychologists ask both detailed and open-ended questions, which can open the door to deeper discussions concerning race and culture. Find out more about daily habits, including who makes dinner and whether church is a part of their life and in what way, he suggests. Other possible questions: What are some of the challenges of making White friends? Have you ever felt like

you had to code-switch, changing how you express yourself depending upon who you're around?

Another approach is to ask how the teen starts each day, says Isha Metzger, PhD, an assistant professor of clinical psychology at the University of Georgia. For example, a Black girl may describe how she starts her morning looking at social media and immediately sees reports of race-related deaths or racist political rhetoric, which overwhelms her with feelings of anger and helplessness, says Metzger, who also directs the EMPOWER (Engaging Minorities in Prevention, Outreach, Wellness, Education, & Research) Lab. After exploring the client's feelings, the therapist can then talk with her more broadly about the emotional effects of vicarious trauma and how to process and channel those feelings in proactive ways, Metzger suggests.

In a similar vein, Vance recalls a Black teen who initially started treatment for severe depression. During therapy, it became apparent that the client's depression

BUILDING RESILIENCE

Parents and others can help Black children and teens build self-esteem and prepare for racial discrimination by using these components of ethnic-racial socialization:

Cultural socialization

Promoting racial and ethnic pride by teaching about history and customs.

Preparation for bias

Building awareness about discrimination and helping children and adolescents develop coping strategies.

Promotion of mistrust

Communicating the need for caution and vigilance when interacting with people from other racial or ethnic backgrounds.

Egalitarianism

Emphasizing equality among all racial/ethnic groups.

was related to her perception that she was treated differently by others, including members of her immediate family, because of her lighter skin. For example, her mother often remarked how beautiful she was because of her skin color. Being perceived differently inflicted an emotional toll, and she wanted to look like her darker-skinned sister, who she thought was just as attractive.

The therapy then evolved into a broader conversation about how society perceives skin color, related prejudice, and the racist roots of these issues, Vance says. It provided an opportunity to raise the teen's consciousness that the "oppression of racism has a long history in our country," he says. As teens open up, psychologists should avoid downplaying perceptions that their experience involves race, essentially "to invalidate the racial stressor and to try to make it something else," Metzger adds.

"The worst thing you can do is to perpetuate the racism" by suggesting it hasn't happened, she says. "It happens all of the time, and that's when . . . Black people just stop seeing their therapist."

MOVING INTO ACTION

Once a racial dilemma has been identified, psychologists can then work with teens to help process what has occurred and discuss next steps if a similar situation arises. If the teen is comfortable incorporating other family members, those individuals can enrich the discussion by relaying experiences from their own lives.

Metzger describes a potential scenario in which a Black teen recounts a perplexing incident involving a school presentation



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that she had given by video. After she finished, a classmate expressed surprise that she was so well-spoken.

The first step is for the provider to validate the teen's experience and acknowledge that the comment was a microassault, Metzger says. "You want to give them power—you want to normalize what they're experiencing."

Next, the therapist can brainstorm with the teen on what she could say if a similar situation occurs again, Metzger advises. Instead of getting angry in the moment or going home and ruminating about the incident, for example, the girl could directly ask the classmate what he or she meant by the comment, putting the ball back in the classmate's court to explain.

Another helpful strategy is asking family members to join the session and offer on-the-spot commentary, Metzger suggests. "We ask caregivers about their lens," she says. "What are your experiences within the system? What are your experiences in day-to-day life as a Black mom or the mom of a Black teenager?"

When teens experience vicarious racism on social media, psychologists can help them think through ways to better protect themselves emotionally, Metzger says. Strategies may range from deciding to unplug more often from social media to coming up with ways that the teen can tap their talents to contribute to the discussion. If a teen writes poetry, for example, perhaps

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she can channel her feelings about Breonna Taylor's death into words and share those thoughts with others on Instagram, Metzger suggests.

As psychologists listen to Black teens' experiences, they should also guard against offering their impressions or perspectives too early, adds Shawn C. T. Jones, PhD, an assistant professor in counseling psychology at Virginia Commonwealth University.

He describes a scenario involving a teen in therapy for

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severe depression in which the young Black man is puzzling over an encounter earlier that day with a grocery store security guard. The teen, who had recently started driving, had gone to the grocery store for his mother in her car and was loading bags into her SUV when the guard came by and asked if the car was his or if he was loading the bags for someone else.

The teen was still mulling over the interaction in therapy but hadn't mentioned the guard's race or ethnicity, Jones says. Given the power dynamic between the psychologist and patient, the psychologist shouldn't put the onus on the teen to raise the element of race and shouldn't assume that it "was a really salient factor without further checking in," he says.

Instead, providers can note that these types of experiences can sometimes occur between Black men and law enforcement, Jones says, before asking, "I'm just wanting to check in and see if this is a relevant part of what you're sharing with me?"

If the teen believes that race did play a role—for instance, by pointing out that none of the other people loading groceries were asked about their cars—the psychologist can work with the teen on feeling and processing his emotions using various tools, Jones says.

University of Pennsylvania psychologist Howard Stevenson, PhD, has developed a series of steps to help people

work through loaded racial encounters. Called CLCBE (calculate, locate, communicate, breathe, exhale), it starts by asking patients to calculate the level of stress generated by the experience on a scale of 1 to 10. Patients then attempt to locate where they feel that stress in their body, whether it's uneasiness in the stomach or pressure in the head, followed by other steps, including deep breathing.

Like Metzger, Jones believes that family members can help teens process such events and develop a plan of action. In the case of the security guard encounter, a next step could be for the parent to return with the teen to discuss the episode with the store manager, he says. Another possibility is suggesting the teen write a letter to the security guard's employer.

Although being a different race from the patient's family can make it more challenging to work through such dilemmas, psychologists of all backgrounds can play important roles if they stay open and curious to the teen's world and tap into the experiences and insights of family members, Vance adds.

"A lot of times, non-Black psychologists feel that, 'Oh, I'm not Black so I'm not going to be able to talk about these topics, or I'm not going to have the same impact,'" Vance says. "And that's already taking a defeatist attitude. Because if Black people can be bilingual about race in this country, so can you." ■



“Racial prejudices are indication of a disturbed and potentially unstable society”

—Dr. Kenneth Clark

In light of the urgent need to do even more to eliminate racism, the American Psychological Foundation (APF) seeks to increase its Visionary Grants directed to this area. To do so, APF has launched a campaign beginning immediately called **EnVISION Ending Racism**. Our goal for this campaign is to raise \$100,000 which would allow APF to add at least 4 new Visionary Grants in 2021 dedicated to APF’s Visionary priority of *understanding and ending stigma and prejudice*.

By increasing the number of grants focused on understanding and ending prejudice through the **EnVISION Ending Racism** Campaign, APF will be able to fund more psychologists to explore cognitive and behavioral parameters that motivate racist feelings and behaviors; these findings may identify solutions to this key societal problem.

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Dr. Tanisha Hill-Jarrett
University of South Florida

The Impact of Gendered Racism on the Health of African American Women
Jioni Lewis, PhD
University of Tennessee

Centering Those at The Margins: Understanding Counterspaces as an Avenue to Advance STEM Persistence Among Women of Color
Kerrie Wilkins-Yel, PhD
Indiana University

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Not all of the trends we found are a celebration of success. The psychology of racism and how to end it struggles to find a place in the national conversation. The push to reach underserved communities is missing a unified call to action. Physical distancing is stymieing progress for many psychological scientists.

One major question remains: Is psychology doing enough to share its knowledge with the world?

We are honored to once again present an extended edition of the *Monitor*. Share your thoughts on what's ahead via email at tspiner@apa.org. —Trent Spiner, *Editor in Chief*

Healing the Political Divide

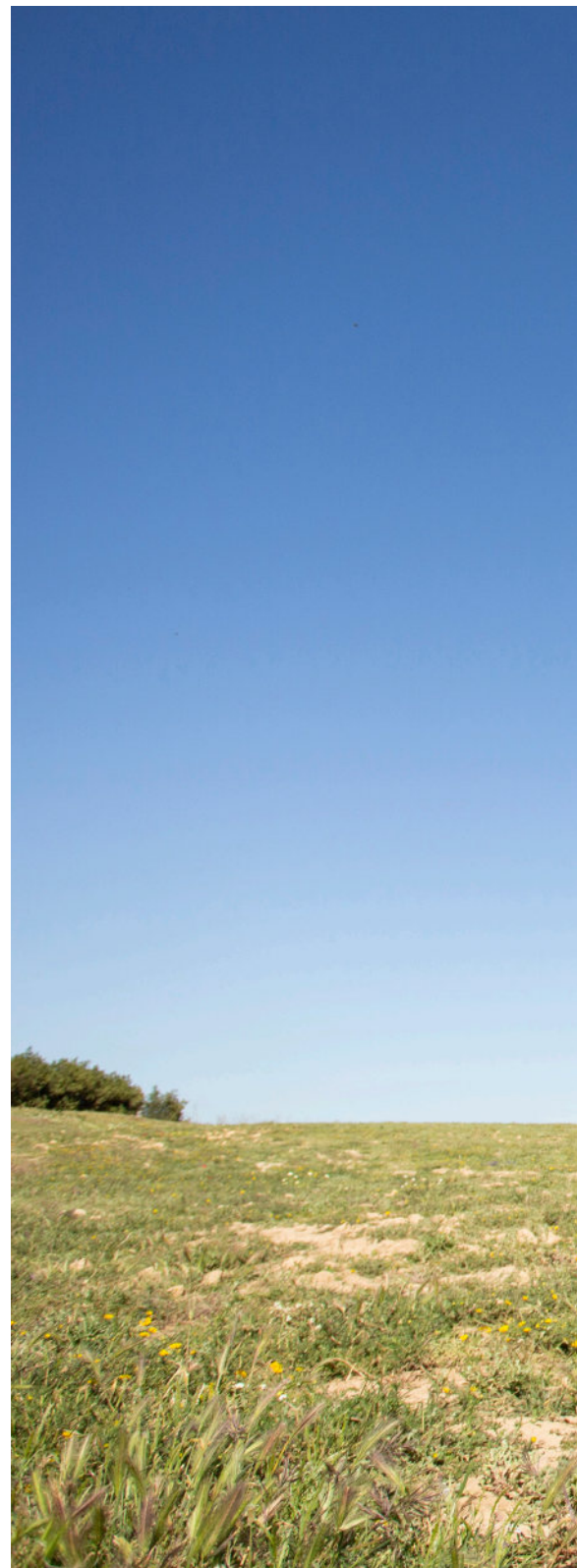
How did we become such a divided nation, and how can psychologists help us find common ground?

BY KIRK WALDROFF

With votes now tallied and, in some cases, electoral outcomes having been determined by extremely narrow margins and marked by legal challenges, there is no doubt that the political divide in the United States is a central trait of the country. And as this divide seems likely to continue to grow, for many of us it feels uncrossable. Yet psychological science suggests that it is both possible and imperative for members of our society to find common ground.

WHAT IS ACTUALLY GOING ON?

To decrease the political divide, we must understand the various factors that work to separate us. One thing we can do right now as individuals is pause and consider our thoughts, feelings, and behaviors and identify the psychological factors at play. The ability to place our own behaviors and the behaviors of others into a psychological framework can allow us to reflect on what we are experiencing and help us understand and shape our actions.



Psychologists' research on the political divide can help us bridge the gap through evidence-based dialogue groups, public education campaigns, and more.



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“Existential fear appears to be at the heart of what drives polarization,” says Kirk Schneider, PhD, an adjunct faculty member at Saybrook University in California and Teachers College, Columbia University, in New York.

“One reason we tend to become fixated and polarized is because of individual and collective trauma that associates with a profound sense of insignificance,” says Schneider. In this state, people may feel that they don’t matter and fear “ultimately being wiped away or extinguished,” he adds.

And if existential fear is indeed a root of polarization, our sometimes warped view of the other side can perpetuate it.

“Some of this divide is a matter of perception,” says Tania Israel, PhD, a professor of counseling psychology at the University of California, Santa Barbara, and author of *Beyond Your Bubble* (APA, 2020), a book about connecting across the political divide. “Most people are not on the extremes of any of these issues, but most of what we hear is from people who are more on the extremes.”

In other words, people have a natural tendency to conceptualize everyone on the other side of the political spectrum as if they were the same as the leaders and spokespeople on that side.

“[Leaders] can be very effective at creating and strengthening ‘mutual radicalization,’” says Fathali Moghaddam, PhD, using a term he coined to describe the growth of two opposing sides toward more and more extreme stances. Moghaddam, a professor and

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2018

Intellectual humility in public discourse
Lynch, M. P., et al.
University of Connecticut
Humanities Institute,
2016

director of the Interdisciplinary Program in Cognitive Science at Georgetown University and author of the book *Mutual Radicalization* (APA, 2018), says that it’s important to also recognize that certain forms of leadership foment and thrive on extreme polarization.

“If that kind of leadership wins out,” says Moghaddam, “then you’re going to have further mutual radicalization and further polarization and further irrationality in society,” a point demonstrated in his book through case studies of extremists on the political left and right, including radical White nationalists and Islamic jihadists.

Knowing that the political divide we are experiencing may be due, in part, to our own feelings of fear and misperceptions about others and seeing that those thoughts and feelings can be inflamed by political leaders gives us the ability to better understand how we’ve gotten to

where we are. But there is a lot of work to be done to bring people together. Behavioral research can provide insights into how to bridge the political divide.

APPROACHING THE DIVIDE

“Research indicates that the divisiveness will continue to grow if fear of the other and the wounds fueling that fear are not addressed,” says Schneider.

One way to mitigate the divisiveness is to physically bring people together in safe, highly structured dialogue groups, as Schneider elaborates in his most recent book, *The Depolarizing of America: A Guidebook for Social Healing* (University Professors Press, 2020). Over the past 15 years, he has developed and participated in dialogue groups, and the outcomes are promising. He notes that post-workshop surveys among 1,800 participants in a dialogue organized by Braver Angels found that about 79% of the participants felt that they



STEFAN BONESS/USUM/REDOX



Protesters rallying against the travel ban from majority-Muslim countries (opposite) and a passionate Trump supporter from Florida (above) embody the growing divide in our nation.

better understood “the experiences, feelings, and beliefs of those on the other side,” and that they, in turn, felt better understood. About 75% of participants felt less angry and less estranged toward those on the other side following the workshops, and about 80% felt that they were “more able to start constructive conversations” with them (Braver Angels, 2018).

There are also opportunities to reach out to the other side in our existing relationships.

Jeanne Safer, PhD, a psychotherapist for over 45 years, author of *I Love You, but I Hate Your Politics* (All Points Books, 2019), and host of a podcast by

the same name, reminds us that things aren’t as black-and-white as they may sometimes seem. “No matter a person’s politics, there are gray areas in all sides of the spectrum,” says Safer.

And she should understand this as well as anybody—she describes herself as a “die-hard liberal happily married to a stalwart conservative” for 40 years. While writing her book, Safer interviewed 50 politically mixed couples and discovered several helpful insights. Chiefly, she says, we must focus on our shared core values.

We must also let go of our tendencies to want to bring someone to our own side of

the political divide. “People are married to the notion that they can change minds—this almost always isn’t true,” says Safer.

Furthermore, she reminds us that we don’t always have to be drawn into an argument. “Sometimes it’s perfectly fine to just walk away,” says Safer.

In our personal relationships, Israel stresses to keep in mind our own sometimes faulty perceptions of the other side. “Don’t make assumptions about someone based on their vote. Instead, I encourage people to be curious about what their vote meant to them. That’s an opportunity to open up a conversation to learn more about people that

are important to us.”

Israel urges that “curiosity and respect for someone else’s views are the foundation” for bridging the political divide.

She also cautions that social media limits our ability to have effective conversations. On social media, says Israel, “people feel like they’re having conversations with people, but they’re not really interacting as full human beings.” She recommends that we should be having political conversations “face-to-face rather than Facebook-to-Facebook.”

Concentrating on face-to-face, mutually respectful, and curious conversations can work even in seemingly hopeless situations. Qasim Rashid, JD, a Democratic candidate for the U.S. House of Representatives in Virginia, experienced this firsthand during his campaign. While hosting a rally in late October 2020, protesters arrived to disrupt the event. Rather than ignoring them or asking them to leave, he invited the other side into conversation.

“Everyone I talked to had different reasons they were supporting my opposition, but we were able to have honest, open conversations,” says Rashid. “That’s given me a lot of hope that people on both sides are willing to listen, even in this time of extreme polarization.”

Moghaddam’s work on the psychological foundations of democracy and dictatorship emphasizes the need for conversations like the one at Rashid’s rally. He urges going “beyond name-calling and trying to understand the other side without being disdainful and oppressive against the other side.”

“And this goes for both sides,” he stresses. “It’s a matter of Democrats and Republicans really looking at one another and recognizing that we have superordinate goals that need to be achieved—goals that both sides desire but neither side can achieve without the active cooperation of the other side.”

Moghaddam also reminds us that

conducting mutually respectful conversations across the divide becomes much easier under leadership that “identifies superordinate goals in a cooperative way.”

HOW CAN PSYCHOLOGISTS HELP?

Psychologists, whether scientists, clinicians, educators, or otherwise, have a particular expertise they can apply to bridging the political divide.

One way psychologists can reach people directly is by working with organizations that facilitate research and dialogue, such as Braver Angels and the



National Institute for Civil Discourse. Many of these groups offer supportive, highly structured programming aimed at helping people learn about and understand one another as opposed to persuading or imposing one’s views on the other side.

This step alone is psychosocially valuable because it promotes discovery and an enlarged capacity for human civility. But it also tends to be a cornerstone for enhancing the likelihood of conflicting parties to find common ground,” says Schneider. “This is because it creates conditions for empathy and resonance between the parties that likely would not even be given a chance in the absence of such supportive and structured formats.”

But not every American will be willing to participate in a dialogue group, especially those on the fringes of the political spectrum. To achieve even greater public impact, psychologists must look to systemic changes.

Public education, for example, is a way psychologists may contribute, says Moghaddam. “Because mutual radicalization is mostly an irrational and emotional collective process, individuals are not necessarily aware of what is pushing them to more and more extreme positions,” he says, and being cognizant of the underpinnings of emotions and behavior can go a long way toward effecting change on an individual level.

Scientists must strive to share their research as broadly as possible. And they don’t have to do it alone. Organizations like More in Common work to conduct research and communicate findings to audiences where they can have the greatest impact.

Advocacy is essential as well. Other countries that have made strides in addressing the political divide relied heavily on government-led reconciliation efforts. The Truth and Reconciliation Commission in South Africa, for example, has been fundamental in addressing disparities and conflict around apartheid.

Were the United States to consider similar, government-backed efforts, psychologists must be part of the call to do so. And the behavioral expertise of the field would be central to success.

“The collective mental health of the nation is at risk,” says Moghaddam. “Just as we should rely on epidemiological science to tell us when there is a vaccine ready for mass use, we have to rely on psychological science to guide us through these mental health issues.”

And following an election that, for many, has felt like the most polarized of a lifetime, this piece seems critical. “This is what our profession is all about,” says Moghaddam. ■

Social Media is Increasing Impact

3 ways psychologists are broadening their reach via social platforms

BY ZARA ABRAMS

RESEARCHERS ARE RELEASING RESULTS EARLIER

1 Psychologists are increasingly sharing work that's still in progress, especially on Twitter, says Jay Van Bavel, PhD, an associate professor of psychology and neural sciences at New York University. ¶ "That comes with a risk, because many of these studies haven't been vetted by peer review," he says. "On the other hand, there's a **greater urgency to share actionable information**, especially during a global pandemic." ¶ Building on the field's leadership in the open science movement, **psychologists are now leveraging social media to share data sets** and preliminary findings with other scientists, policymakers, and the general public. Early insights during the pandemic have helped promote mask-wearing, combat what Van Bavel calls "the avalanche of false information" about the coronavirus, and address the mental health challenges associated with social isolation.

For advice on promoting research on Twitter, see the October Monitor.



CLINICIANS ARE SHARING MORE MENTAL HEALTH ADVICE

2 "When states started to issue lockdown orders, we saw a surge in people seeking mental health resources on social media," says Sam Chlebowsky, vice president of sales and marketing at Brighter Vision, a marketing firm for therapists. ¶ Clinical psychologists, including Janine Kreft, PsyD, of the U.S. Department of Veterans Affairs, **launched Instagram and TikTok accounts focused on psychoeducation**, and those already on social media started posting advice for navigating quarantine. Kreft says videos are "digestible, fun, and accessible to so many more people" than long blocks of text. Much of her content involves communication role-play as well as tips for coping with anxiety. ¶ As the pandemic unfolds, clinicians have also been **sharing relevant research and practical tips for juggling remote work and childcare and helping patients use telehealth**, Chlebowsky says. ¶ Through these public interactions, "psychologists are being more vulnerable and human," says Kevin Nadal, PhD, a professor of psychology at the City University of New York who has written about both his personal experiences and his academic research on racism and homophobia via Twitter, Facebook, and Instagram. That has had a humanizing effect that has helped normalize seeking therapy, he adds.

PSYCHOLOGISTS ARE REACHING A DIVERSE AUDIENCE

3 Alfiee Breland-Noble, PhD, founder and board president of the nonprofit AAKOMA Project, uses Instagram Live, Facebook Live, and Twitter chats to share wellness strategies and spark conversations about mental health with marginalized groups, including **LGBTQ youth and families of color**. ¶ "For the communities that I serve, I find I can spread the word faster and further when I use social media," she says. ¶ Breland-Noble also hosts scientists, activists, and other experts on her channels, which also include podcasts and YouTube. She features diverse voices—such as meditation and yoga teachers of color during a weekly series on mindfulness. ¶ **"We can use social media as a way of 'giving psychology away' so that it isn't something that only an elite educated group gets, but something that everyone has access to,"** says Nadal.



The Fight Against Racism Must Continue

Psychologists are looking inward to dismantle racism within the field

BY ZARA ABRAMS

In the midst of America's racial reckoning, psychologists are playing a key role in rethinking bias, policing, and other issues. But psychologists say the field itself has its own systemic injustices to dismantle.

Steven O. Roberts, PhD, an assistant professor of psychology at Stanford University, and colleagues, for instance, reviewed nearly five decades of psychological research and found substantial racial inequality in publishing, research he hopes gains more traction as the field takes a closer look. Others in the field are shedding light on unfair practices in the hiring, training, and retention of faculty and practitioners of color. In some cases, racial inequities are even being addressed more broadly at the systemic level.

"Many disciplines are looking inward right now, and we are no exception," says Roberts. "The idea is

to review psychology, but not for the sake of tearing it down—for the sake of making it more equitable and inclusive."

Racial- and ethnic-minority psychologists say these efforts are promising but that there's a long way to go—and the discipline will need to face its shortcomings head-on, including governance and policies of organizations such as APA.

"Psychologists are human beings. We have implicit biases that operate outside of our awareness," says Art Blume, PhD, a professor of psychology at Washington State University and president of APA's Div. 45 (Society for the Psychological Study of Culture, Ethnicity, and Race). "An honest approach to anti-racism involves embracing the limits of our objectivity—in our science, practice, and pedagogy."

INCREASING DIVERSITY IN RESEARCH

Racial disparities in psychological research, including who receives funding from the National Institutes of Health and others, are starting to make headlines. But those findings aren't new. In 1983, James Jones, PhD, now a professor emeritus of psychological and brain sciences and Africana studies at the University of Delaware, was already documenting psychology's lack of focus on people of color (Jones, J. M., "The concept of race in the history of social psychology," 1983).

"Scholars of color have been talking about this for decades, but people were not listening," Roberts says.

Now, Roberts and his team have used a new approach—one that explores how the identities of editors, authors, and participants are all systematically connected. Across social, developmental, and cognitive psychology, they found that most editors and authors are White, and that these editors published fewer publications on race and racism, as well as publications with fewer participants of color (*Perspectives on Psychological Science*, 2020).

"In psychology, almost everything we know is about White people, but Whites don't represent the entirety of human capacity," says Jones.

Roberts and his colleagues recommend that journals employ racially diverse editors and reviewers and establish task forces to regularly review diversity among authors and samples. In response, the Society for

Research in Child Development is revamping its peer-review process to consider racial diversity among participants as a review criterion. Roberts hopes other associations and journals will follow suit.

Even the titles of psychological research studies show bias that favors White American samples. In a study of more than 5,000 articles, Bobby Cheon, PhD, an assistant professor in the Division of Psychology at Nanyang Technological University in Singapore, and colleagues found that article titles were much more likely to mention race, ethnicity, and nationality when study samples were not White American (*Social Psychological and Personality Science*, Vol. 11, No. 7, 2020).

The implication is that studies of White Americans are often seen as representing normative or standard human behavior, while research on other groups produces findings that may be perceived as less generalizable or culturally constrained.

Cheon says journals should mandate that authors specify limitations to generalizing their findings in the body of a paper, whether they're studying White American college students or people from Singapore. Journals should also highlight or incentivize studies that include racially and ethnically diverse samples to help encourage psychologists to recruit such populations.

"Our current incentive structure prioritizes research that people perceive to have a wider impact or be more generalizable, which may undermine efforts to increase equity and diversity

among participants," he says.

ANTI-RACISM AND HEALING FOR ACADEMICS

While some psychologists are working to reform research and publishing, others are applying their research and skills toward education and healing.

"The movement for Black lives became so intense this year that we couldn't escape from it," says Della Mosley, PhD, an assistant professor of counseling psychology at the University of Florida (UF). "We asked ourselves: Is doing research really the best use of our abilities as psychologists right now? Is moving through academia like it's business as usual even ethical while this war on Black bodies and spirits is taking place?"

Together with a doctoral student, Pearis Bellamy, Mosley launched Academics for Black Survival and Wellness, an anti-racism and racial-healing movement grounded in Black feminist principles and Mosley's theory, Critical Consciousness of Anti-Black Racism (*Journal of Counseling Psychology*, 2020). More than 15,000 academics, hailing from psychology, medicine, the fine arts, and other disciplines, attended the group's workshops last summer.

The initiative offers healing for Black academics and education for their non-Black colleagues. Mosley and her team host a series of wellness activities for Black students and faculty, including self-care, financial planning, and mentorship. They also deliver extensive anti-racism training to non-Black academics, starting with an introduction to

FURTHER READING

The fallacy of a raceless Latinidad: Action guidelines for centering Blackness in Latinx psychology

Adames, H. Y., et al.
Journal of Latinx Psychology,
2020

Eliminating race-based mental health disparities: Promoting equity and culturally responsive care across settings

Williams, M. T., et al.
(Eds.)
Context Press,
2019

Decolonizing psychological science: Introduction to the special thematic section

Adams, G., et al.
Journal of Social and Political Psychology,
2015



anti-Black racism, power analytics, and racial trauma. Other lessons cover the history of racism in the United States and the activist ally role that non-Black academics can play. About 2,000 participants have joined “accountability groups,” typically 10 members or fewer, to extend their anti-racism work after formal training ends, Bellamy says. For example, a non-Black accountability group at UF is helping amplify messages from the school’s Black Affairs program across the student body.

CHANGE FROM THE TOP DOWN

Universities are also increasingly prioritizing racial diversity in

recruitment and admissions—and slowly, the makeup of psychology programs is changing. In 2019, 38% of psychology graduate students identified as people of color, up from 29% in 2009—and the share of tenured faculty and academic leaders of color is increasing (“The state of the psychology training pipeline and workforce,” APA, 2018; “Racial/ethnic minority representation among the academic psychology workforce continues to increase,” APA, 2020)

But more work is needed to address the troubling leaky pipeline that results in dwindling numbers of psychologists of color retained at the doctoral and tenure-track levels, says

In 2019, 38% of psychology graduate students identified as people of color, up from 29% in 2009.

Monnica Williams, PhD, ABPP, a clinical psychologist and the Canada research chair for mental health disparities at the University of Ottawa. Though 31% of psychology doctoral degrees are awarded to racial and ethnic minorities, only 18% of associate professors and 12% of full professors in psychology departments identify as people of color (“Psychology faculty salaries,” APA Center for Workforce Studies, 2018–2019).

Departments should create a formal retention plan and assign mentors to meet regularly with academics of color to discuss and address race-related issues, Williams says. Having more than one person of color among

the faculty in a department is also key for creating a culture of support and diversity.

She also points to a need to better prepare clinicians of color for race-related challenges they may face—such as an encounter with a patient who holds racist views—which has been tougher to address because clinical practice tends to be more diffuse and individualized than academia.

“There’s very little specific training, literature, or even thought on how to prepare therapists of color in all professional aspects,” Williams says.

Clinicians of color should have access to mentors from their own racial or ethnic group, she says, which can aid in navigating professional hurdles.

At the systemic level, change remains a challenge—and many say change within APA needs to move faster. Williams calls for stricter accreditation rules that require psychology programs to employ tenure-track faculty of color and recruit and retain racial- and ethnic-minority students. Currently, APA-accredited programs must show systematic efforts to attract and retain students and faculty of color, but programs are not penalized for falling short because of factors that may not be under their control.

Other proposed solutions involve elevating the role of ethnic-minority psychological associations (EMPAs) within APA. Theopha Jackson, PhD, president of the Association of Black Psychologists (ABPsi), says each EMPA should have a decision-making role at APA, for instance by adding seats to the



“In psychology, almost everything we know is about White people, but Whites don’t represent the entirety of human capacity.”

JAMES JONES, PHD, PROFESSOR EMERITUS OF PSYCHOLOGICAL AND BRAIN SCIENCES AND AFRICANA STUDIES AT THE UNIVERSITY OF DELAWARE

Council of Representatives—a change that would mean bylaws need to be amended. That requires a two-thirds consenting vote of membership, but members have rejected the measure in three separate votes in the past. It was voted on a fourth time in December 2020 with strong support from APA governance; the vote was not decided before *Monitor* press time.

“APA should leverage its power and influence to privilege the voices of [EMPAs] that are dedicated to promoting cultural ways of being,” Jackson says. For example, when addressing the needs of any ethnic group, APA

Protestors across the country marched the streets in support of the Black Lives Matter movement.

should strategically include, consult, or defer to the science and scholarship of the respective ethnic psychological association.

Meanwhile, some institutional reforms have gained momentum in 2020. Blume launched Div. 45’s Warrior’s Path Task Force, charged with identifying barriers in APA’s governance, bylaws, and association rules that favor the status quo and harm psychologists of color.

Other institutions in the psychology field are facing their own racial reckoning. The National Latinx Psychological Association (NLPA) is working to hire a consultant on the Afro-Latinx experience who can help the organization center Blackness in its work. Changes will involve improving representation on the NLPA’s leadership council, updating the organization’s mission statement, and producing a special issue of the *Journal of Latinx Psychology* that will feature Afro-Latinx research.

“Social justice is so key to NLPA’s mission that we have to change the way our systems work,” says Andrea Romero, PhD, president of NLPA and vice provost for faculty affairs at the University of Arizona. “And we have to set it up in a way that will sustain anti-racist work in the future.”

“Issues of systemic racism have become more salient than ever before,” says Jones. “I believe that because those messages have become so potent in our minds and our society, psychologists will continue pressing to find ways to address it.” ■

Psychology Research Is Front and Center

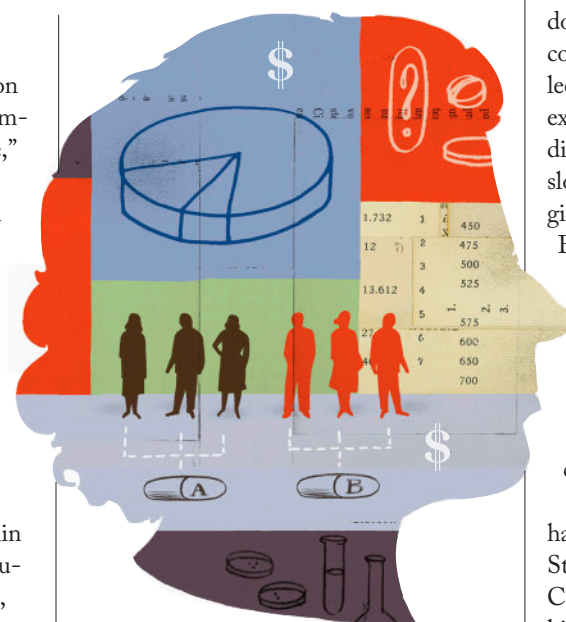
Though the COVID-19 pandemic has disrupted research, it has also highlighted the importance of psychology

BY STEPHANIE PAPPAS

Physical distancing requirements around the COVID-19 pandemic have created undeniable difficulties for many psychology research projects that relied on in-person interactions, forcing academics to be flexible and creative. ¶ In response, many researchers are moving as much work as possible online. Meanwhile, funding agencies are supporting accommodations on existing grants where possible and will likely be turning an eye toward research that could help prepare for the next pandemic.

“The pandemic has illustrated the importance of social and behavioral research, especially since our mitigation strategies and their impacts are predominately social and behavioral in nature,” says William Riley, PhD, the director of the Office of Behavioral and Social Sciences Research at the National Institutes of Health (NIH). “I believe it also increases the burden on social and behavioral scientists applying for grant funding to make a strong case for the public health impact of their research moving forward.”

The impacts of the pandemic on research have varied widely, even within labs. At the Rice University psychoneuroimmunology lab of Chris Fagundes, PhD, some graduate students were able to pivot immediately to analyzing existing data from home. Others who were in the process of conducting in-person experiments will see their degrees delayed by at least six months to a year. The biggest challenge has been



avoiding laying off lab staff whose salaries are paid by stalled grants, Fagundes says. Fortunately, his lab's emphasis on stress and the immune system made it possible to apply for supplemental

grants through NIH to focus on pandemic-related outcomes. It's a strategy that can both benefit lab employees and inform public health.

Post-lockdown, some researchers have been able to resume in-person activities with precautions and protective equipment. Others remain in limbo. Many scientists who work with rodents had to euthanize animals during lockdowns because animal care technicians could not work. Some of these scientists, leery of future shutdowns, have delayed expanding their colonies again. Socially distanced in-person research also moves slowly, says BJ Casey, PhD, a psychologist and collaborator on the Adolescent Brain Cognitive Development™ study at Yale University. Many families are reluctant to come in for brain imaging during a pandemic, Casey says. “All of us were far too optimistic that once we began to scan children again, we would be able to catch up fairly rapidly,” she says.

The sudden shift to virtual activities has occasionally been positive. At Penn State University, psychologist Daryl Cameron, PhD, was forced to move his “Expanding Empathy” symposia online, but he was pleasantly surprised that the change allowed panelists to participate in a conversation about empathy and COVID-19. “Getting everyone together like that for the panel webinar wouldn't have happened in the



While future federal funding depends on the decisions of a new Congress, NSF and NIH officials do say that the pandemic has brought **the importance of psychology research** to the forefront.

in-person iteration of events,” Cameron says.

Families in Casey’s study have appreciated doing psychological assessments online rather than having to travel to her lab. Other researchers report more time to prepare papers for publication, a freedom reflected in the 25% increase in submissions to APA journals between January and September 2020 compared with January to September 2019. Data in some

Some researchers have been able to resume in-person activities with precautions and protocols in place.

fields, however, suggests a gender gap in submissions, with women submitting fewer papers for publication (Kibbe, M. R., *JAMA Surgery*, Vol. 155, No. 9, 2020). APA is working to analyze data on submissions by gender to its journals, but the data were not available at press time.

Funding agencies have made efforts to support researchers during the pandemic upheaval. Like NIH, the National Science Foundation (NSF) has also

offered COVID-19 supplement opportunities: Its Directorate for Social, Behavioral, and Economic Sciences (SBE) had funded 240 RAPID Awards for a total of \$32.4 million as of October 2020. That same month, NIH announced the Rapid Acceleration of Diagnostics Underserved Populations (RADx-UP) initiative, a \$500 million program aimed at improving COVID-19 testing in vulnerable populations. Awardees include psychologists such as Leslie Leve, PhD, of the University of Oregon, whose project will implement an outreach and testing program for Oregon’s Latinx community, and Mary Cwik, PhD, a clinical psychologist at the Johns Hopkins Bloomberg School of Public Health, whose project will test interventions to expand testing access to American Indian communities.

While future federal funding depends on the decisions of a new Congress, NSF and NIH officials do say that the pandemic has brought the importance of psychology research to the forefront.


“If you are doing psychology research and you have the ability to tie your research agenda to the amazing public impact you could have at a moment like this, this agency would be receptive to those proposals,” says Arthur Lupia, PhD, the head of SBE. “We’re living in a society that desperately needs that kind of insight.” ■

● **Funding resources** For information on federal funding opportunities and conducting research during COVID-19, visit APA’s website at www.apa.org/topics/covid-19/science-research.

Mental Health Apps Are Gaining Traction

Self-help apps are leading more people to therapy rather than replacing it, psychologists say

BY REBECCA A. CLAY

The COVID-19 pandemic could accelerate the development of mental health apps. That's good news for psychology because these types of apps can lead users to therapy and enhance treatment, say psychologists.  Mental health-related self-help apps now number somewhere between 10,000 and 20,000, estimates Stephen Schueller, PhD, executive director of One Mind PsyberGuide, a nonprofit organization offering accurate, unbiased information about such apps. The number can be hard

to track as new apps are constantly being developed and older ones are taken off the market, says Schueller. "A lot of the growth is in products that are developed by individuals or small teams without any real intention or plan for long-term support," he says. The number of apps with robust business plans and teams to back them—like Calm and Happify, or what Schueller calls "upper-tier products"—is increasing more slowly.

Apps could spur people's interest in working with a psychologist, says Schueller. "Apps might be a gateway to subsequent care," he says. "Someone might download a CBT app, realize it's helpful, and then find a therapist to help more."

And while some psychologists may worry that apps could replace therapy, that's not happening, says C. Vaile Wright, PhD, senior director for health care innovation at APA, citing a study that found that just two apps—Headspace and Calm—account for 90% of active users (Wasil, A. R., et al., *Journal of Consulting and Clinical Psychology*, 2020). "I really don't think



people are turning to mindfulness apps as a replacement for therapy," says Wright. Once people are in therapy, apps can help psychologists enhance patients' progress. "A lot of work that happens in therapy actually happens outside the therapy office," says Wright. "Apps can facilitate that work." Apps can also help patients address co-occurring problems like insomnia or serve as booster sessions once therapy has ended.

There are some potential downsides, however. "Anyone can put an app up on the various app stores, so a lot of these are probably not that helpful,"

says David C. Mohr, PhD, who directs the Center for Behavioral Intervention Technologies at the Feinberg School of Medicine at Northwestern University. (While the Food and Drug Administration regulates the small number of so-called "digital therapeutics" that aim to provide actual treatment, it doesn't regulate self-help apps in the wellness space.) Ineffective apps could turn people off the idea of seeking therapy or disrupt a treatment plan a psychologist has already laid out, says Mohr. "And a few apps can be just plain dangerous," adds Mohr, citing a study that found the content of some apps for bipolar disorder inconsistent with established treatment practice (Nicholas, J., et al., *Journal of Medical Internet Research*, 2015).

To ensure that self-help apps are a boon to psychologists and their patients going forward, clinicians need to get more involved, says Wright. "It's important that psychologists serve as subject matter experts and consultants to companies developing apps," she says. "Psychologists also need to be leaders in the regulatory field as well, since it's a murky space right now."

Marlene M. Maheu, PhD, executive director of the Telebehavioral Health Institute, agrees. "We're either going to be part of the technological revolution—and help create it and direct it with proper values—or we're going to be left behind," she says. ■

Psychologists' Skills Are in Great Demand

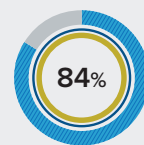
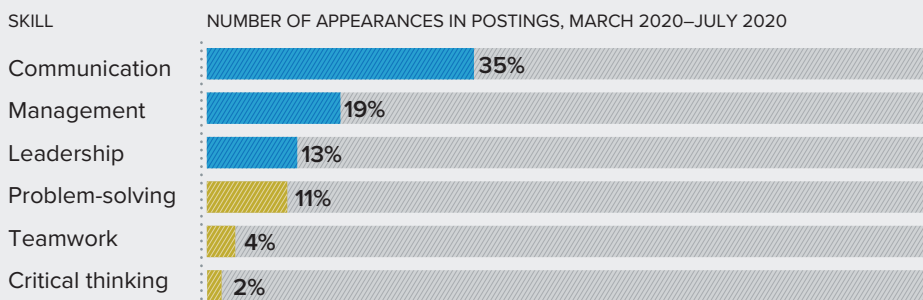
The flexibility a psychology education provides is critical in these times of uncertainty

BY STEPHANIE PAPPAS AND KAREN STAMM, PhD

The coronavirus pandemic has destabilized the economy and injected uncertainty into educational and career plans for many people. But the data suggest that the versatility and human skills bestowed by a psychology education are a boon in the face of instability: psychology doctorate holders work in 61 different occupational categories. A PhD doctorate in psychology also teaches communication, management, and leadership, the top skills appearing in job ads between March and July 2020. Alongside problem-solving, teamwork, and critical thinking, these “resilient skills” appeared in 84% of employment ads in the early phases of the pandemic, according to a recent report from the labor analytics firm Emsi. The versatility is also geographical, with data indicating a great need for psychologists across the United States, especially in the Mountain West and Midwest. ■

Human Skills Are a Boon for Job Seekers

Despite the economic losses created by COVID-19, certain skills have remained in high demand. These skills, dubbed “resilient” by Emsi, are predominately human skills that are part and parcel of psychology education. Emsi analyzed requests for these skills in new job postings during the pandemic.¹



Job postings with at least one of these six human skills



Postings with two or more of these six human skills

SOURCES: ¹ Emsi, Resilient Skills Report, 2020. ² 2018 National Center for the Analysis of Healthcare Data Enhanced State Licensure Data. ³ Substance Abuse and Mental Health Services Administration, 2016–18 National Survey of Drug Use and Health. ⁴ National Science Foundation 2017 National Survey of College Graduates, as reported by APA at www.apa.org/workforce/data-tools/careers-psychology. For more information, see the APA Center for Workforce Studies Data Tools at www.apa.org/workforce/data-tools/index.



Map of the United States showing the statistical significance of the difference in the percentage of the population aged 65 and older between 1990 and 2000. The map uses five categories:

- Statistically Lower, $p < .01$ (Dark Green)
- Statistically Lower, $p < .05$ (Light Green)
- Not Significant (Gray)
- Statistically Higher, $p < .05$ (Blue)
- Statistically Higher, $p < .01$ (Dark Blue)

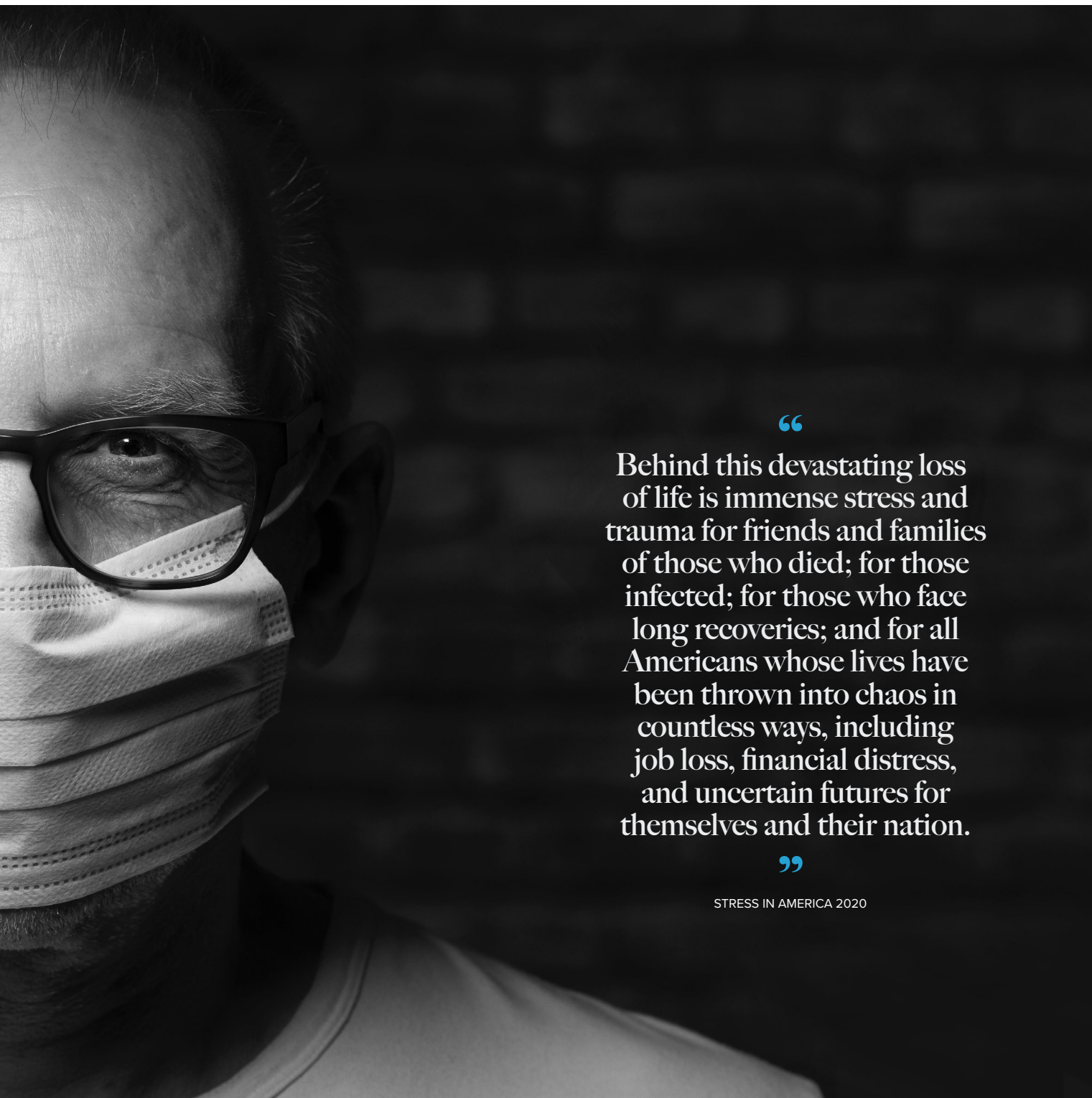
HOW ARE AMERICANS FEELING?

Nearly **78%** of adults say the coronavirus pandemic is a significant source of stress in their life. **63%** of adults say the economy is a significant source of stress, which is nearing levels reported during the 2008 recession (69%). **59%** of adults, regardless of race, report that police violence toward minorities is a significant source of stress in their lives. **33%** cite discrimination as a significant source of stress in their lives. Gen Z adults ages 18–23 are the most likely age group to report experiencing common symptoms of depression, with **75%** noting that in the prior 2 weeks they felt so tired that they sat around and did nothing. **51%** of Gen Z teens ages 13–17 say the pandemic has made planning for their future feel impossible. Despite these numerous stressors, **71%** of Americans say they feel hopeful about their future.



7 The National Mental Health Crisis

Psychologists must act now to help people who need it and prevent a much more widespread crisis



“

Behind this devastating loss of life is immense stress and trauma for friends and families of those who died; for those infected; for those who face long recoveries; and for all Americans whose lives have been thrown into chaos in countless ways, including job loss, financial distress, and uncertain futures for themselves and their nation.

”

STRESS IN AMERICA 2020

APA's 2020 *Stress in America* survey released in October revealed that Americans have been profoundly affected by the COVID-19 pandemic and are struggling to cope with the disruptions on top of other factors creating stress, including political conflict, the impact of racism, and an economic downturn. The combination of these compounding stressors and the persistent drumbeat of an ongoing public health emergency has prompted APA to sound the alarm on a growing mental health crisis that could yield serious health and social consequences for years to come. • [READ THE FULL REPORT AND LEARN WAYS TO HELP AT WWW.STRESSINAMERICA.ORG](http://WWW.STRESSINAMERICA.ORG).

A student works outside the closed library on the University of North Carolina at Chapel Hill campus on Aug. 18, 2020. The school halted in-person classes and reverted back to online courses when there was a rise in COVID-19 cases early in the fall semester.

MELISSA SUJE GERRIT/GETTY IMAGES



The Great Distance Learning Experiment Continues

Educators at all levels are grappling with what the changes mean now, and for the future

BY KIRSTEN WEIR

Some of the changes in education forced by the COVID-19 pandemic may lead to lasting improvements, according to educational psychologists and experts in the psychology training community. ¶ In K–12 education, many teachers are necessarily encouraging more self-management and independence in young learners—efforts that will serve them well after in-person school resumes. And 2020 has brought an increasing awareness of the importance of social and emotional learning (SEL)—a realization that proponents say is overdue, as school-based SEL programs improve social and emotional skills, attitudes, behavior, and academic performance.

Virtual education can often be just as effective as in-person learning, **thanks to new digital learning** platforms, increasing student ease with technology, and a large and growing research literature around online learning.

While schools moved online last spring with hastily planned lessons, many districts spent the summer working on innovating more comprehensive distance learning programs.

“There’s been a lot of energy put into thinking about kids’ social and emotional needs and ways to create a sense of community—to keep them engaged and support them through the stress and anxiety of this time,” says Sara Rimm-Kaufman, PhD, an educational psychologist at the Center for Advanced Study of Teaching and Learning at the University of Virginia.

But while some things are working well in distance learning, plenty of hurdles remain. Many of the same challenges that existed in the spring haven’t been resolved. “Access to internet and technology is still a big barrier,” she says. “And even with technology in place, many students just don’t show up.”

Distance learning laid bare the economic and educational disparities between students, and many still lack the technology to connect to online learning despite efforts by many school districts to provide all students with laptops and Wi-Fi.

Meanwhile, teachers are often overwhelmed by learning new technologies and creating lessons

that work online—something few educators were trained to do. “There’s a lot of energy being put into online learning, but it’s still incredibly hard,” Rimm-Kaufman says.

SIMULATING THE COLLEGE EXPERIENCE

Though undergraduate and graduate students may be more adept at engaging with online learning tools, college students face many of the same challenges as K–12 students, says Viji Sathy, PhD, a professor of psychology at the University of North Carolina at Chapel Hill. They also face disparities in access to technology and struggle to find social connection amid restrictions on many campuses or in remote learning environments. “It’s a lot harder to create community in this format, when people feel so isolated,” Sathy says.

Yet there have been silver linings in the move to online learning, says Sathy. More professors are now engaging in pedagogical discussions instead of assuming they can simply translate in-person lessons to an online platform, she says. “There’s a new willingness to admit they need guidance and more efforts to access the resources that can help them.”

Many of the efforts to

From left, Yessenia Tinno, 15, Jenikka Foster, 16, and Alexia Tinno, 17, do their schoolwork at home. They chose remote learning instead of attending classes in person at Pocatello High School near their home on the Fort Hall Reservation in Idaho.



optimize instruction will outlast the pandemic, Sathy adds. “Once they develop those resources, they can take them back to the face-to-face environment.”

This experience may also have raised the profile of online learning, says Francine Conway, PhD, dean of the Graduate School of Applied and Professional Psychology at Rutgers University and past president of the National Council of Schools and Programs



of Professional Psychology. “There’s a stigma regarding online learning, especially in doctoral training. It’s often perceived as lower quality, and there’s the perception that advisers can’t adequately train and supervise students using online platforms,” Conway says. “That perception hasn’t kept pace with the reality.”

Virtual education can often be just as effective as in-person learning, she says, thanks to

new digital learning platforms, increasing student ease with technology, and a large and growing research literature around online learning. Yet there are challenges, especially in the area of hands-on research and disruptions to internships and practicum training. And some face-to-face interaction is necessary to achieve the competencies required to be a psychologist. Nevertheless, this year of online

learning has underscored that there are benefits to going remote, at least in part.

“While there is a need to further support faculty around delivering online content, there are best practices out there. It does a disservice to faculty to assume they won’t adapt to this new environment,” Conway says. “Online learning is here whether we like it or not, and it’s time our profession embraces it.” ■

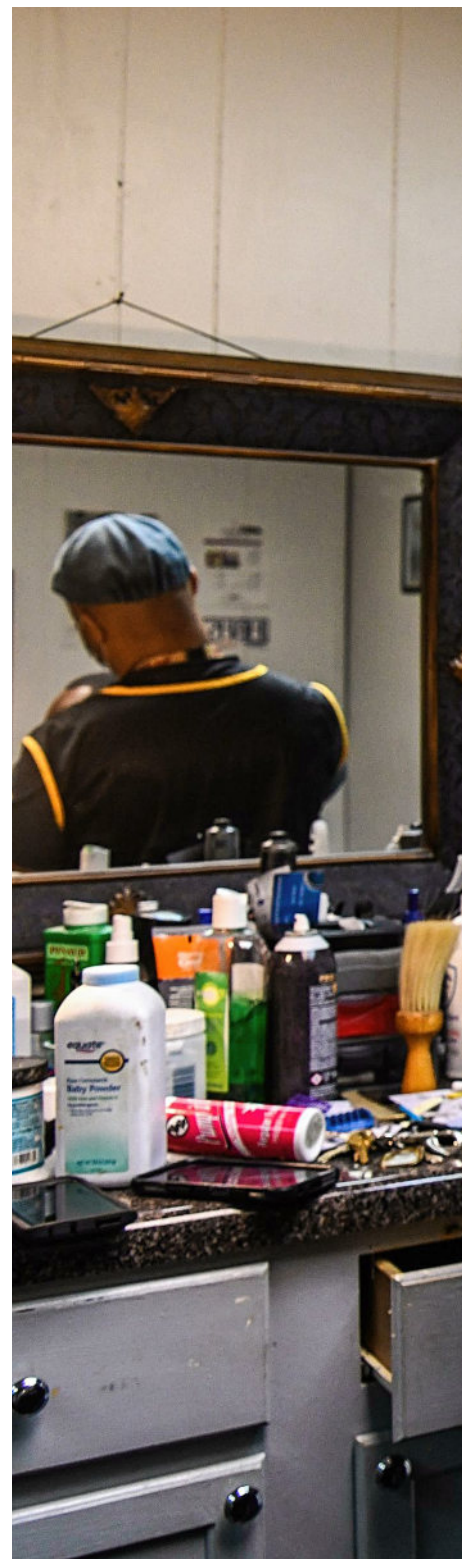
ANGIE SMITHREDDUX

There's a New Push to Reach Underserved Communities

Psychology must harness the growing awareness of barriers to care and advance real change

BY KIRSTEN WEIR

The twin pandemics of COVID-19 and continued racial injustice have shone a spotlight on health disparities and underscored the need for more research and outreach to better support diverse and underserved communities. ¶ To be sure, many psychologists have been doing this work for years. But more psychologists are coming to understand how issues of diversity and health disparities are relevant to their work, and more journals are implementing procedures to make sure research addresses socioeconomic factors, says Cindy Juntunen, PhD, chair of APA's Task Force on Developing Guidelines for Psychological Practice With Low-Income and Economically Marginalized Clients. A growing public dialogue about racial justice—and the recognition that COVID-19 disproportionately impacts underserved communities—is



CHANDAN KHANNA/GETTY IMAGES



Antonio Wiggins cuts the hair of James Bennett inside his barbershop in Jackson, Mississippi, on Sept. 26, 2020. Wiggins often begins by talking about sports, but the conversations tend to turn quickly to his clients' well-being and other weighty subjects.

forcing psychologists to rethink how they reach out and interact with clients.

“For anyone who cares about these issues, progress has often felt like an uphill battle. But I see people beginning to look at these issues in new ways,” Juntunen says. “COVID-19 has in some ways increased the likelihood of reaching underserved communities because practitioners are realizing they need different ways to reach their clients.”

Some rural communities are already beginning to benefit from that realization. Rural areas have higher-than-average rates of poverty and substance use, yet the nearest mental health professional may be hundreds of miles away. Increasingly, providers are reaching these clients through telehealth—an option that accelerated suddenly in the wake of the COVID-19 pandemic. In one recent example, two managed-care organizations in rural North Carolina partnered to donate smartphones to 1,000 low-income patients to access mental health services.

Yet telehealth can't solve all the challenges facing underserved communities. Marginalized communities often face hardships such as poverty and a history of racial trauma, which can increase the risk of mental health problems and substance use. Seeking therapy often means traveling outside one's own community and accepting services from providers—usually White—who don't tend to share one's lived experiences. Those providers may not understand the nuances of what people in underserved communities need and how

Telehealth is expanding access to mental health care for people in rural areas, who may live hundreds of miles from the nearest provider.



best to provide that care, says clinical psychologist Howard Stevenson, PhD, an expert on racial trauma at the University of Pennsylvania. “Psychology training doesn't necessarily prepare people to be clued in to these cultural sensitivities,” he says.

Despite such challenges, a variety of psychology-based efforts are aiming to break down the barriers. The Loveland Therapy Fund, for instance, was launched in 2018 with enthusiastic crowdfunding support and provides financial assistance to Black women and girls seeking

therapy nationwide. While individual treatment is valuable, reaching underserved communities often means rethinking the traditional model of one-on-one treatment, says Stevenson, who has created community-based interventions. With colleagues Loretta Jemmott, PhD, and John Jemmott, PhD, he created a program to train Black barbers in high-risk neighborhoods in violence reduction and HIV-risk reduction. The barbers educate clients organically when they come in for haircuts. Many other successful initiatives also focus

RYAN MCGINNIS/LAMAY



on reaching people where they are. The Sources of Strength youth suicide prevention program, for example, teaches high school students to be peer leaders in changing the norms around seeking help for mental health.

But funding for such community efforts is often hard to come by, says Sherry Molock, PhD, a psychologist at The George Washington University who studies mental health and suicide prevention in Black youth and young adults. Molock argues that to advance real change,

mental health professionals need bigger-picture thinking. “Even if we have a clinic on every corner, people won’t come if they don’t have stable housing or food security,” she says. “If we really want to improve mental health, we have to change the systems.” In addition to social and economic investments, that includes putting forth a stronger effort to train a more diverse psychology workforce, spending more time on these topics in the classroom, and conducting more research to adapt therapeutic models to be culturally relevant.

“Even if we have a clinic on every corner, people won’t come if they don’t have stable housing or food security. **If we really want to improve mental health,** we have to change the systems.”

SHERRY MOLOCK, PhD,
THE GEORGE WASHINGTON
UNIVERSITY

While the events of 2020 have focused attention on these disparities in need and access to mental health care, people in underserved groups have been painfully aware of these gaps their entire lives. Efforts to reach those groups, especially communities of color, have often seen ebbs and flows in both interest and funding. In that sense, Molock says, she hopes this most recent public awakening is more than just a trend. “This isn’t a fad,” she says. “This has to be something we’re committed to doing.” ■



Following an officer-involved fatal shooting in his hometown of Pensacola, Florida, in 2019, psychologist and former police chief Dr. Cedric Alexander began working as a consultant with the city's police department on ways to improve officer training and build trust between law enforcement and the community. A nationally recognized public safety expert with nearly 40 years of law enforcement experience, Alexander consults for public safety agencies throughout the United States.

10 Psychology's Involvement in Policing

Police departments are turning to new research and interventions

MATTHEW COUGHLIN



P sychologists are tackling overly aggressive, racially biased policing on multiple fronts. New research on officer behavior, implicit bias, and candidate screening is shaping legislation and agency priorities. Meanwhile, police departments around the country are increasingly embracing psychological interventions that leverage peer intervention and “procedurally just” policing—which prioritizes trust and communication—with promising results. See the October 2020 *Monitor* for more. — *Zara Abrams* • IN JUNE, APA LAUNCHED AN EXPEDITED PRESIDENTIAL TASK FORCE ON REDUCING POLICE VIOLENCE AGAINST AFRICAN AMERICANS.



Psychologists Are Moving Up in Academia

With conflict resolution skills and ability to understand data, psychologists are poised to excel at academic leadership roles

BY ZARA ABRAMS

P sychologists may have been slow to climb the ranks of academia, but that's changing. Between 2003 and 2015, the number of psychologists in academic leadership positions grew by 61%, according to the APA Center for Workforce Studies ("Increases in psychologists in academic leadership," 2020). ¶ Their interpersonal skills, data analysis experience, and understanding of human behavior make psychologists a great fit for academic leadership, say those at the top. ¶ Now, the slashed budgets, falling enrollment, and rapid shift to remote instruction ushered in by the COVID-19 pandemic are making the jobs of academic administrators harder—and more essential—than ever. Amid that uncertainty, skills like active listening, problem-solving, and conflict resolution are helping psychologists in leadership positions keep their institutions afloat. ¶ "Since March, it's really been about crisis management, and that's required a lot of tough decisions," says Sarah Mangelsdorf, PhD, president of the University of Rochester.

Mangelsdorf began her career in the University of Michigan's psychology department. She later held roles such as psychology department chair, dean, provost, and vice chancellor for academic affairs across several universities. Like many of her colleagues, she didn't picture herself as an academic leader, but she says that psychologists who end up in such roles tend to excel and enjoy the work.

Even in such hard times as these, leaders like psychologist Marvin Chun, PhD, dean of Yale College, are embracing the opportunities afforded by academic administration to improve conditions for faculty and students across the board, for instance by increasing scholarship funds that aid low-income students. Others are applying psychological insights to things like student success and remote work to make learning during a pandemic as impactful as possible.

"Psychologists have this interesting mixture of training that prepares them very well for academic administration," Mangelsdorf says. "I would encourage more people from the field to consider stepping into these roles."

TRANSLATABLE SKILLS FOR LEADERSHIP

Those who've assumed leadership positions say the work psychologists do on a daily basis sharpens the skills needed to run a higher education institution.

For one, psychologists can use their experience collecting, processing, and analyzing data—and drawing conclusions from it—to assess school- or university-wide

trends and determine what changes to make. Mangelsdorf, for example, has run regression models that analyze gender differences in salary at institutions where she has worked. As a result of those analyses, she and her colleagues began to address some of the salary inequities they discovered among genders.

"As psychologists, we have pretty good training in data analytics, and I have found that immensely helpful over the years," she says.

At Barnard College at Columbia University, President Sian Beilock, PhD, challenges her staff to cite numerical data and to avoid vague generalizations about what "everyone is saying."

"I want data that show the full picture, because I know that the loudest voice or the most recent data point can change our interpretations," she says.

Beilock's experience running a lab with around 20 students and postdoctoral scholars also helped prepare her for the demands of her current role. While some of her students required structured deadlines and evaluations, others thrived with a more hands-off approach.

"I learned that everyone needs to be led in a different way, so I bring that understanding into the leadership I do now," she says.

Psychologists working in academic administration are even drawing on research they've conducted to inform their institution's priorities. Gail Hackett, PhD, provost and senior vice president for academic affairs at Virginia Commonwealth University (VCU), studied the role of self-efficacy in career

In her role as president of Barnard College, Dr. Sian Beilock often draws on her experience with data analytics and running a research lab.

development among women and minority populations. She then channeled those findings into initiatives to improve student retention and graduation rates for those groups at VCU and Arizona State University, where she previously worked.

Others have used their research experience to inform their institution's COVID-19 response. Psychologist Peter Salovey, PhD, president of Yale University, has studied the effects of message framing on promoting health-related behaviors, including cancer and HIV prevention.

"These lines of work have helped me make scientifically based decisions that both safeguard public health and help to maintain the continuity of the university's commitment to teaching and learning," Salovey says.

All but the highest-level administrators should aim to maintain teaching and research activities, says Chun. Even as dean, he still mentors graduate and undergraduate students and conducts neuroimaging research throughout the year, saving heavy writing projects for summer recess.

"Staying active in research and teaching at the university helps me better serve faculty and students because I see their experiences firsthand," he says.

CONFLICT RESOLUTION


If there's one thing that can make or break a career in academic administration, it's interpersonal skills.

"The range of interpersonal conflicts and personnel issues are so vast that they overwhelm people who are not prepared for them," Hackett says.

“I learned
that everyone needs to be
led in a different way, so
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into the leadership
I do now.”

SIÂN BEILOCK, PhD, BARNARD COLLEGE AT
COLUMBIA UNIVERSITY





University of Puget
Sound President
Dr. Isiaah Crawford
says the active-
listening and
problem-solving
skills he honed as a
clinician enrich his
work as an academic
administrator.

The most effective leaders listen, empathize, and work collaboratively with the range of stakeholder groups at a university, including students, faculty, staff, parents, and alumni.

“There are so many different constituents that don’t always see eye to eye,” Beilock says. “You effect change by bringing groups together, so it requires seeing where people are and figuring out how to work towards a common goal.”

Psychologists’ broad understanding of personalities, communication, and behavior helps prepare them to manage those conflicts, but some skills that clinicians develop—such as mediation and active listening—can be particularly helpful, says Isiaah Crawford, PhD, president of the University of Puget Sound in Tacoma, Washington.

Throughout his early career, Crawford taught clinical and community psychology courses at Loyola University in Chicago, provided care in a community mental health clinic, and maintained his own psychotherapy practice. He says that clinical work helped shape his problem-solving and coaching skills—and gave him a deep appreciation for the human condition.

“As psychologists, we often engage with people when they’re not at their best, but we can see beyond that to what is possible,” Crawford says. “Administrators apply the same skills to work through a situation and find a mutually beneficial outcome.”

APPLYING PSYCHOLOGICAL FINDINGS
On top of the skills and training

FURTHER READING

Careers in academe
Supplement to the *Chronicle of Higher Education*, 2017

Take charge! Advice from leaders to early career psychologists
Stringer, H.
APA Monitor on Psychology, March 2017

Should you change leadership jobs in the middle of a pandemic?
May, S.
Chronicle of Higher Education, 2020

that make psychologists successful administrators, applying psychological findings on group dynamics, communication, and other topics can make them highly effective leaders.

Beilock says she relies heavily on what she knows about human behavior. For instance, she’s careful not to make the fundamental attribution error of assuming a person’s behaviors are mainly driven by their personality or identity rather than by situational factors.

Mangelsdorf draws on group behavior literature to understand various aspects of university life, such as the dynamics of faculty senate meetings. Those insights have also helped her form effective search committees. For instance, studies show that in male-dominated fields, a single woman on a committee is not well positioned to advocate for increased gender equity (Fine, E., & Handelsman, J., “Searching for excellence & diversity: A guide for search committees,” *Women in Science & Engineering Leadership Institute*, 2012).

She also relies on psychological strategies—including empathic and transparent communication—to strategically enact change, such as in making the unpopular decision to shift to remote learning when the coronavirus pandemic struck in March.

“We can use psychological principles to get people to buy in and to show them their voices are being heard,” Mangelsdorf says.

HOW TO MAKE THE MOVE
The best way to learn about academic administration is to

dive right in, leaders say. Tell your chair or mentor you’d like to join a search committee or tenure review committee in your department.

“Make yourself available. It always starts with small assignments, and then one thing leads to another,” Chun says.

Beilock also suggests joining a committee that focuses on school or university initiatives, which can help aspiring administrators learn how their department fits into the broader institution. For example, when she was at the University of Chicago, Beilock joined the university senate’s committee of the council, an elected group of faculty that attended biweekly meetings with the president and provost.

“It was the first time I really got to see the operations of an institution outside my lab and my department,” she says. “I got really interested in how you can drive change at an institutional level.”

Declining enrollment, budget reductions, and planning for the uncertainties associated with the pandemic make this a challenging time to lead a higher education institution, Crawford says. Amid such challenges, finding a sense of accomplishment is key. Crawford says he approaches his work as a service-oriented leader and values the daily contributions he makes to the university and its faculty, staff, and students.

“If psychologists are interested in academic leadership, this is the time to step up,” Salovey says. “I hope they will draw from their experiences to guide their colleagues and students through this public health crisis.” ■

COVID-19 Has Reshaped APA'S Advocacy

New advocacy efforts may lead to positive long-term gains

BY TORI DEANGELIS



For Mental Health Inclusion

APA has been pressing legislators to include sizable levels of mental health and psychosocial services in federal COVID-19 relief plans and to address the disproportionate effects of the virus on vulnerable populations, including nursing home residents, people of color, Native Americans, and veterans. In a July 2020 letter to Senate leadership, for example, APA asked Congress to provide “robust support” for mental and behavioral health in its next relief package.

APA has also been addressing the psychological effects of COVID-19 on older adults. As one example, APA submitted research-based testimony at a Senate hearing in June 2020 describing how social isolation and loneliness can harm people’s long-term health and how psychologists can increase people’s resilience.



For Telemental Health

In April 2020, APA scored a major victory for psychologists and their patients by helping expand access to, and reimbursement for, Medicare telehealth services. Specifically, the **Centers for Medicare & Medicaid Services (CMS)** temporarily lifted restrictions so patients can receive these services in any geographic location and setting, including their homes. In addition, CMS expanded coverage of certain telemental health services and temporarily waived certain requirements so that during the pandemic psychologists can provide most of their typical services via audio-only telephones.

APA wants to continue these practices beyond the pandemic, so APA’s advocacy team is now calling for both Medicare and self-insured plans to permanently expand telehealth reimbursement as well as a range of mental health benefits.

• For more on APA’s latest advocacy activities, visit www.apaservices.org/advocacy.

LEFT: ANDRE CHAMBERLAIN/UNSPLOASH; RIGHT: JUDE BECK/UNSPLOASH

APA has been pressing legislators to include sizable levels of mental health and psychosocial services in federal COVID-19 relief plans and to address the disproportionate effects of the virus on vulnerable populations.



For Evidence-Based Interventions

APA is ramping up efforts to educate policymakers on how psychological science can continue to help people cope with and respond to the pandemic. For instance, given the current uncertainty about COVID-19 vaccines, their safety, and when they will be available, APA CEO Arthur C. Evans Jr., PhD, wrote an op-ed piece for the political news website The Hill that highlighted ways that behavioral science can **encourage wary individuals to receive vaccines** once they are proven safe and effective.

APA is also advocating for research funding and more accurate data collection to study the ways in which COVID-19 disproportionately harms racial and ethnic populations and to determine how to target prevention and treatment in communities most at risk.



Through Coalition-Building

Increasingly, APA has been joining with like-minded groups to champion causes related to COVID-19, mental health, immigration, and other key topics as a way to maximize impact and amplify APA's voice on society's most critical issues. In 2020, for example, APA partnered with other major mental health organizations to form the **Friends of the National Institute of Mental Health**, dedicated to advancing the public's understanding of mental health and improving treatment of mental illness, and it's part of similar coalitions that join scientific, health provider, and consumer groups to share information and strengthen policy support. At the onset of the pandemic, for example, APA led efforts with the Mental Health Liaison Group to ensure that psychologists and other frontline workers receive personal protective equipment.

Online Therapy Is Here to Stay

COVID-19 dramatically impacted psychology practice. What does the future of telepsychology hold?

BY HANNAH CALKINS

With telehealth usage rates skyrocketing, experts say resolving concerns around privacy and security, access to care, and payments for providers will be critical as many psychologists adjust to providing care remotely during the ongoing COVID-19 pandemic. ¶ Resolving those concerns will be critical to making sure psychologists can continue offering telehealth as demand for mental health services grows, particularly services offered virtually. ¶ Several studies have already proven telepsychology's effectiveness. And research from Jeanine Turner, PhD, a professor of communication, culture, and technology at Georgetown University who has followed telehealth's growth over the past two decades, has shown that both patients and providers who use telehealth gen-





erally view it favorably.

While the technology and infrastructure for telehealth has been available since the mid-1990s, Turner says the health care industry never would have embraced telehealth fully without a status quo-ending event like a pandemic.

“Last year, within weeks, the system had to absorb all the challenges of wide-scale adoption,” says Turner. “Now, it’s taken off—and there will be no going back.”

ASSESSING OUTCOMES

The COVID-19 pandemic has basically forced most health care providers to see patients remotely, but psychologists have unique concerns and questions about the virtual delivery of their services. For instance, how might technology impact the therapeutic alliance? And mental health care, by definition, has a strong emotional dimension. Can that really be honored online?

It appears that it can, according to Ashley Batastini, PhD, an assistant professor in the Department of Counseling, Educational Psychology and Research at the University of Memphis.

Batastini and her colleagues recently published a large meta-analytic study that compared clinical interventions and assessments delivered via videoconferencing with those delivered in-person. Overall, they found that in-person and virtual interventions produced similar outcomes. Likewise, assessments produced similar opinions across modalities, she says.

“It was important for us

to compare virtual delivery to in-person delivery, and not to baseline,” Batastini says. “We wanted to see how much physical presence in the same room mattered.”

The result was not a surprise to Batastini and her team. She says their conclusions were in line with the existing literature on telepsychology, including a 2016 meta-analysis by the same team that focused on correctional and forensic telepsychology. (Batastini and her colleagues did uncover one

some significant limitations in the existing literature on telepsychology—namely, inconsistent quality across studies.

“What we know is certainly promising, but we need more scientifically rigorous studies and a better understanding of what works and for whom,” she says.

She emphasizes the importance of improving all patients’ access to the internet and to private spaces, which are both crucial for the success of virtual interventions or assessments.

“For vulnerable or under-

As use of telepsychology grows, psychologists need to be aware of its **general privacy and security risks**, such as the possibility of data breaches, and take steps to minimize them.

interesting surprise in the new study: Women appear to have better outcomes following virtual interventions than in-person interventions, something that merits further research, she says.)

Batastini hopes that this study will help assuage lingering concerns that psychologists may have about the impact of virtual delivery on their services.

“I think telepsychology is here to stay, and it’s important for us to adapt, not resist,” she says.

ENSURING QUALITY, SECURITY, AND PRIVACY

Batastini does have a word of caution for those “hailing telepsychology as the key to improving access to care.” While her team’s study had a compelling conclusion, it also revealed

served clients, this task may prove more difficult. One possibility psychologists might consider is establishing partnerships with local community organizations or other spaces that offer private, centralized, and clean spaces for clients to attend sessions, such as libraries, medical centers, community colleges, or courthouses,” Batastini says.

But concerns about the privacy and security of telepsychology are not limited to the patient’s side of the screen. Psychologists need to be aware of the general privacy and security risks, such as the possibility of data breaches, and take steps to minimize them. According to Batastini, there are two components to managing these risks.

First, psychologists must do their own research and make certain that the platforms they’re using are compliant with the Health Insurance Portability and Accountability Act (HIPAA), particularly with HIPAA’s Security Rule and Privacy Rule.

There are a variety of plat-



forms to choose from, but providers should not assume that what they are using is HIPAA-compliant, she says.

The second way to strengthen your security is through informed consent. Batastini recommends that psychologists use

a thorough, clear consent form that both informs patients about potential risks and lets them know how these risks are being managed. For example, psychologists should tell their patients about any technical controls they're using to protect privacy, such as encryption, firewalls,



and anti-virus and anti-malware software. They should also implement and inform patients about their policies and procedures concerning the safe storage, transfer, and disposal of patient data.

Finally, Batastini says, “the

form should also communicate what the patient can do to minimize risks in their own environment,” such as finding a private space where they won’t be overheard.

Psychologists who practice telehealth should also be familiar with the applicable privacy laws in their state, says Deborah Baker, JD, director of legal and regulatory policy in APA’s Office of Legal and Regulatory Affairs. “For example, in the event of a data breach, a state may also have its own notification requirement in addition to what HIPAA requires,” she says.

TELEHEALTH COVERAGE AND REIMBURSEMENT

It’s likely that many practicing psychologists will continue using telepsychology even after the public health crisis has passed. Having come to value telepsychology’s flexibility, psychologists may want to use it more than they did before the pandemic.

The key will be making sure they can get paid for it.

Fortunately, according to Connie Galietti, JD, director of legal and professional affairs in APA’s Office of Legal and Regulatory Affairs, most major commercial insurers appear to be supportive of the explosion in telepsychology services prompted by COVID-19.

“States have different laws and mandates regarding telepsychology coverage, and not every state requires insurers to reimburse these kinds of services at parity with in-person services” during normal times, she says. “But with the pandemic, many states have mandated, and

many insurers have provided, expanded telehealth coverage and policies, so that’s been very helpful for psychologists and their patients.”

There have been a few bumps, however. For example, Galietti says that some insurers require all telehealth providers—not just mental health providers—to use proprietary platforms, such as Teladoc, which often require additional credentialing and fees.

“We’re advocating for them to allow psychologists to use any HIPAA-compliant platforms,” she says. (APA cannot recommend or endorse any HIPAA-compliant telehealth platform vendors, but the Department of Health and Human Services offers a list of 10 vendors who claim to be HIPAA-compliant, including Zoom for Healthcare, Doxy.me, and thera-LINK.)

Another problem is that more than half of consumers with employer-provided coverage have self-insured plans. Those plans, covered by the Employee Retirement Income Security Act of 1974 (ERISA), aren’t required to cover telepsychology, which Galietti and her APA colleagues are also advocating to change.

Finally, although the pandemic is ongoing, Galietti says there have been some attempts by insurers to revert to more restrictive coverage and policies. Some insurers may balk at spending more on telehealth, she says. But she expects significant pushback from the mental health professions (including APA) and from patients if insurance companies continue trying to limit telehealth coverage

post-COVID.

“APA is advocating for states and payers to continue the current level of coverage for at least a year after the public health crisis ends. We want to avoid a sudden stop in coverage for vulnerable populations and allow insurers to make reasoned determinations—with input from APA and other stakeholders—about what telehealth policies should continue after the crisis,” Galietti says.

Ultimately, when advocating for any psychological services, Galietti and the Office of Legal and Regulatory Affairs team rely on the argument that treating someone’s mental and behavioral health needs often improves their physical health, which lowers overall costs. This applies to telepsychology, too.

PRACTICING ACROSS STATE LINES

The COVID-19 pandemic and increasing confidence in telepsychology’s quality and security have dramatically pushed the trajectory of telepsychology forward. But there is one more development shaping its horizon: interstate practice under an agreement called the Psychology Interjurisdictional Compact, or PSYPACT.

PSYPACT is a fast-growing interstate licensing compact that enables psychologists in the participating compact states to practice remotely across state lines (it also lets them practice in-person in compact states on a temporary basis). Created by the Association of State and Provincial Psychology Licensing Boards (ASPPB) and

administered by its PSYPACT Commission, the PSYPACT agreement became operational in 2020.

Fifteen states have enacted PSYPACT legislation, with several more on track to do so, according to Janet Orwig, MBA, CAE, executive director of PSYPACT.

Psychologists who wish to practice under PSYPACT must obtain an authority to practice interjurisdictional telepsychology (APIT) from the PSYPACT Commission. One requirement of the APIT is an E.Passport issued by ASPPB. Applications for both opened in July 2020. Orwig says that ASPPB received grant funding from the Health Resources and Services Administration, an agency of the U.S. Department of Health and Human Services,

APA will continue to work to ensure psychologists are fairly reimbursed for telepsychology post-COVID.

through the Coronavirus Aid, Relief, and Economic Security (CARES) Act, which allowed them to waive E.Passport application fees through the end of 2020.

“Since we began taking applications in July, there’s no way to know whether the pandemic caused a spike in interest,” Orwig says. “However, as of mid-October, we had received 1,967 applications.”

Orwig hopes that PSYPACT continues to increase how and where patients access mental health care.

“We are at the start of a new and exciting time in the profession of psychology where a strong foundation exists to both provide telepsychological services and provide public protection,” she says. “Being able to get care anywhere is our new reality.” ■



Advocacy Will Help Secure Expanded Telehealth Coverage

Reimbursement policy changes prompted by COVID-19 could become permanent

BY JEWEL EDWARDS-ASHMAN

The COVID-19 public health emergency forced health care providers to use other methods besides in-person services to provide care. The crisis has also led government and commercial health care payers to reexamine their reimbursement for practitioners providing remote services during the pandemic. ¶ Last year, as traditional office visits came to a halt, many payers temporarily began reimbursing psychologists at in-person rates for providing video telehealth services, audio-only or phone services,

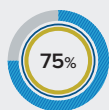
and online assessment.

“The temporary expansion of telehealth policies prompted by the spread of COVID-19 has accelerated the adoption of telehealth for most clinicians. A year from now, I expect psychologists will continue to embrace this method of service delivery because it gives more patients access and improves continuity of care for patients with barriers to care,” says Stephen Gillaspay, PhD, APA’s director of health care financing.

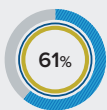
It’s unclear whether insurers will continue to allow expanded use of telehealth and audio-only services. That’s why it’s critical that APA and its members continue to advocate to make these policy changes permanent, Gillaspay says. “This will involve working with payers to ensure clinical quality and maintain program integrity.” ■



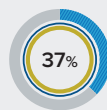
Providing Care During the Pandemic



of clinicians said they are only treating patients remotely



of clinicians are providing phone-only services



of clinicians are using a service like FaceTime or Skype to provide care

DATA FROM THE COVID-19 MEMBERSHIP PROFESSIONAL NEEDS SURVEY 2020

Well-being initiatives such as offering mental health days are becoming more common in the workplace.



Employers Are Increasing Support for Mental Health

Large employers are boosting mental health resources as they recognize the strain the pandemic is putting on their employees

BY CHARLOTTE HUFF

Two-thirds of employees report that poor mental health has undercut their job performance during the COVID-19 pandemic, and 40% of employees are battling burnout, according to a survey by mental health benefits provider Lyra Health and the National Alliance of Healthcare Purchaser Coalitions. Employees may be working relentlessly amid economic uncertainty with few social outlets, and possibly juggling childcare to boot, eviscerating any separation between work and the rest of their life, says clinical psychologist Renee Schneider, PhD, vice president of clinical quality for Lyra Health.

Meanwhile, working from home can make it difficult for supervisors to detect emerging mental health strain, Schneider says. “When we were in the office, we would see each other every day, and we don’t have that same type of interaction now,” she says. “So sometimes employees can go for a while before the manager learns that there’s something going on.”

Paying more attention to employee mental health is becoming a bigger part of the conversation in today’s workplaces. Even pre-pandemic, employers were already learning to be more proactive in identifying symptoms of depression, anxiety, and other disorders. Nearly half of large employers train their managers to recognize such issues, and an additional 18% plan to begin to do so in 2021, a 2020 Business Group on Health survey found. Plus, 54% of employers will offer free or low-cost virtual mental health visits in 2021.

In recent months, more employers

“When we were in the office, we would see each other every day, and **we don’t have that same type of interaction now.** So sometimes employees can go for a while before the manager learns that there’s something going on.”

RENEE SCHNEIDER, PhD, LYRA HEALTH

have invested in software training programs and digital tools to teach managers how to pick up on subtle and often virtual cues of employee distress, says Anne Richter, RN, MBA, coleader of North American health management practice for the human resources consulting firm Willis Towers Watson. “Helping a front-line manager develop those skills in very, very short order has been a clear focus as a result of the pandemic,” she says.

Schneider touts the decision by Pinterest, a Lyra Health client, to offer COVID-related paid leave to better

support families. Employees who may have lost childcare or who are caring for an ill family member can now take advantage of that emotional backstop for as long as four weeks, she says.

Both Schneider and Richter believe that this heightened mental health awareness will outlast the pandemic. “Now we’re thinking about our employees as whole people, not just what they do with the 8 or 10 or 12 hours that they are at work,” Richter says. “What are they struggling with at home that bleeds over into the workplace, and vice versa?” ■

Workplace Strategies to Promote Wellness

■ Training managers to schedule video calls with employees whenever feasible to look for signs of anxiety or other emotional strain rather than only catching up by phone, says Anne Richter, of Willis Towers Watson. “Did you actually look at them?”

■ Providing education that a seemingly work-related change, such as missing deadlines or turning in subpar work, may signal other concerns, says Renee Schneider, PhD, of Lyra Health, who advises that supervisors take a direct approach and ask employees regularly how they are holding up.

■ Establishing a central mental health services contact, one who can even make



appointments, Richter says, so employees don’t have to figure out where or how to get care.

■ Boosting the number of mental health visits that an employer will cover. “They’re seeing that employees really need a full dose of care,” Schneider says.

■ Delaying job evaluations or not tying evaluation results to consequences such as pay, says Schneider, a move that she applauds. “During this pandemic, additional stress is not what we need.”

■ Offering mental health days, a move that Schneider says all employers should consider if they don’t already.

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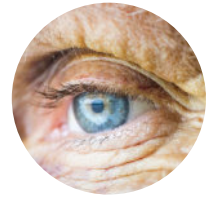
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NEW IDEAS FOR PSYCHOLOGISTS WHO WANT TO ENHANCE THEIR SKILLS AND ADVANCE THEIR CAREERS



HOW TO WRITE FOR A NONACADEMIC AUDIENCE

Communicating about research is more important than ever **BY STEPHANIE PAPPAS**

As the COVID-19 pandemic has shown, the clear delivery of research findings to the public can be a matter of literal life or death. This is especially true for psychological science, which can offer a wealth of knowledge about crucial topics ranging from social inequities to the implementation of public health measures. ¶ But writing for the general public isn't the same as academic writing—and it's not something that most psychologists train for. Fortunately, it's a skill that many psychologists are well-positioned to learn. If your job involves teaching, communicating with clients, or putting yourself in others' shoes, you're probably halfway there.

"I really, really want to encourage psychologists to write for a broad audience," says Lisa Damour, PhD, a clinical psychologist who writes a column on adolescence for *The New York Times* and cohosts a parenting podcast called *Ask Lisa*. "It's a public service."

Despite numerous political controversies, the public's confidence in science and scientists remains high. The Pew Research Center found that as of 2019, 86% of Americans said they had a great deal or fair amount of confidence that scientists act in the public interest, up from 83% in 2016. That's higher than Americans' confidence in public school principals and significantly exceeds people's confidence in elected officials, which were at 77% and 35%, respectively, in 2019. What that means is there is a lot of demand for writing directly from scientists and those who use scientific research in their careers. Damour and other science writers shared these tips for science communicators.

KNOW YOUR AUDIENCE

The first step in communicating science is knowing who you're addressing. At the Alan Alda Center for Communicating Science at Stony Brook University in New York, instructors ask students to think about what they want their audience to feel, think, or do. This becomes a mission statement to guide everything they write. "We do a lot of exercises that are audience-specific, so you might adapt one piece of writing for three

different audiences," says Ken Weitzman, a playwright and instructor at the Alda Center.

For example, a scientific audience might be most interested in the methodological advances made by a new research paper, says Erika Check Hayden, the director of the Science Communication Program at the University of California, Santa Cruz. A general audience isn't as likely to find methodology as gripping on its own, so you need to find an angle that applies to people's lives. "What is the human dimension of the research or the study or the concept that you're trying to communicate?" Hayden says.

LEAD WITH THE TAKEAWAY

Perhaps the most dramatic difference between academic writing and popular writing is format. A scientific paper is like an inverted triangle: It starts broadly with the background of the research, covers details and methods, and finally reaches the takeaway message in the conclusion. Writing for a popular audience flips that formula upside down. "They want to know your findings first and then how and why that's important," says Hayden. Only after getting the key takeaway messages up top can you delve into background and other details of the research. You'll want to be able to craft your main point to ensure it captures the attention of the audience that needs to hear it most.

NIX JARGON AND EMBRACE METAPHORS

Precision in academic writing

often requires repetition: If you're writing about major depressive disorder, you'll use that terminology consistently. In popular writing, though, you may need to pull out the thesaurus to vary your vocabulary, Damour says. A little linguistic flexibility translates to better readability for general audiences. Similarly, simplify sentences, use active voice, and use metaphors liberally when describing complex concepts. And cut out jargon: Your readers may boggle at the term "type I error," but they're likely to immediately grasp "false positive." Don't think of this process as "dumbing down" your work, says Michelle Nijhuis, a science journalist and coeditor of *The Science Writers' Handbook: Everything You Need to Know to Pitch, Publish, and Prosper in the Digital Age*. "The people you're speaking to aren't dumb," Nijhuis says. "They just are interested in different things than you're interested in."

Cutting jargon and simplifying sentences also makes it easier to get your message across. "If you're struggling to parse the sentence that somebody wrote, you can't also wrap your head around a brand-new concept," says Art Markman, PhD, a psychologist at the University of Texas at Austin who writes for media outlets such as *Fast Company*.

BE HONEST, BUT DON'T OVER-CAVEAT

Another difference between academic and popular writing is how each handles uncertainty. In academic writing, it's important to center caveats and limitations

RESOURCES

American Association for the Advancement of Science Communication Toolkit
www.aaas.org/resources/communication-toolkit

If I understood you, would I have this look on my face?
Alda, A.
Random House, 2018

Alan Alda Center for Communicating Science Workshops
www.aldacenter.org/workshops

The craft of science writing: Selections from The Open Notebook
Carpenter, S. (Ed.)
The Open Notebook, 2020

On writing well: The classic guide to writing nonfiction
Zinsser, W.
Harper Perennial, 2016

of any research study.

This is also important when writing for a general audience, but caveats should be handled with care. General audiences are more likely than scientists to see uncertainty as undermining the main argument. When you introduce uncertainty, include enough context so that your audience understands why your message still matters.

“Don’t go so far with your caveating that you undercut the significance of what you have to say,” Nijhuis says.

FIND YOUR OUTLET

There are a dizzying array of ways to communicate about research, from podcasts to blogs to op-eds. Damour got her start at *The New York Times* by writing a piece for the *Motherlode* blog and sending it to the editor cold—but not before poring over previous posts and writing to match the parenting blog’s style. It helps to think of different outlets as different clothing brands, she says. Some are selling fancy coats, others sportswear. “Sometimes where academics struggle is they’re trying to submit an embroidered coat to a place that sells parkas,” she says. “There’s nothing wrong with the embroidered coat, but the outlet that sells parkas doesn’t work with that kind of content.”



Before reaching out to an editor you want to write for, make sure you understand their audience and writing style, Damour says. It's also useful to understand what kind of content they publish. Most daily news publications will want a timely "hook," like a new study or ripped-from-the-headlines topic. Others, like *The New Yorker*, run deep dives that don't need to be as timely (though you'll still have to explain why the topic is relevant to readers). Just because someone else has written about a topic doesn't mean you can't too, Damour adds. In commercial book publishing in particular, editors like to publish books on topics that are already selling well.

LEVERAGE YOUR NETWORK

You don't have to launch a science-writing sideline in a vacuum. Markman

started communicating directly to the public after his frustration with politicians cutting funding for behavioral research boiled over. He worked with his university's public affairs office to start doing more media work and began writing op-eds. Many professional organizations, such as the American Association for the Advancement of Science, also offer resources for science communication.

Markman also recommends reaching out to colleagues who are already writing for the general public for advice and for inroads into publishing. It's also worthwhile to interact with journalists, he says. Markman landed a regular writing gig at *Entrepreneur* magazine because reporters there interviewed him so often that the editor finally reached out to see if he would write for them. Local NPR affili-

ates are often interested in hearing from professionals in their regions, Markman says. He cohosts a long-running podcast called *Two Guys on Your Head* on KUT-FM in Austin.

Science communication was once viewed as somewhat suspect in academic circles, Damour says, but that is changing. There is now an active community of scientist-communicators online (often under the hashtag #scicomm on social media) and far broader acceptance that communicating results is part of a researcher's job. There are also many formal resources, including online workshops and trainings, to teach science communication skills.

"We should be proud of what we know as psychologists, and we should be generous in sharing it, especially now," Damour says. ■



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BUILDING GAMES TO TRAIN THE BRAIN

The Brain Game Center at the University of California, Riverside, designs training programs to improve vision, hearing, memory, and more

BY KIRSTEN WEIR

Can an online game boost your brainpower? Commercial companies turn tidy profits selling games that claim to improve memory and sharpen thinking skills. But the scientific evidence for their effectiveness is muddled at best. “Does cognitive training work or not work? And why do we have paper after paper coming out with mixed results?” asks Aaron Seitz, PhD, director of the Brain Game Center for Mental Fitness and Well-Being at the University of California (UC), Riverside.

Seitz intends to get to the bottom of that question. In a National Institute of Mental Health (NIMH)–funded collaboration with Susanne Jaeggi, PhD, director of the Working Memory and Plasticity Laboratory at the University of California, Irvine, Seitz is recruiting 30,000 volunteers for a memory study to explore what elements of brain-training interventions might improve memory, and for whom.

Seitz’s background is in the field of perceptual learning, the process by which our sensory abilities are improved by experience (imagine a budding musician learning to distinguish between musical notes). Along the way, he realized that commercial brain training programs

borrowed general concepts from perceptual learning but failed to incorporate the latest scientific discoveries from the field. He launched the Brain Game Center in 2014 to bridge that gap. Along with research scientists from psychology and cognitive neuroscience, his lab includes computer scientists and programmers who design assessments and online brain training games that are scientifically rigorous and fun to play. His current projects span perceptual and cognitive abilities including hearing, vision, and working memory.

“I wanted to take what I knew from perceptual learning and apply it to a training program that’s meant to help people in their daily lives,” Seitz says, of how the Brain Game Center began.

SHARPENING SIGHT

Seitz earned his PhD in cognitive and neural systems from Boston University in 2003 and joined the faculty at UC Riverside in 2008. Much of his early work focused on visual perceptual learning. Many previous studies of vision improvement had been shown to improve eyesight on laboratory tests, he says. But they often failed to transfer any notable benefits to people outside the lab. Hoping to change that, Seitz developed

RESEARCH FOCI

The UC Riverside Brain Game Center is:

1
Studying working memory training to determine which training methods may be most beneficial to specific individuals.

2
Determining how best to improve vision in patients with low vision as well as professionals with superior vision skills.

3
Developing methods to better diagnose and train people with hearing problems.

a vision training game called ULTIMEYES that combined multiple proven approaches from the field of perceptual learning. The game presented a diverse set of stimuli, optimized the presentation of those stimuli, used consistent reinforcement, and drew on input from other senses to facilitate visual learning. He tested the game on a group of people for whom sharp sight is vital: the UC Riverside baseball team. During the fall, 19 team members came to his lab for 30 training sessions lasting 25 minutes each. After training, the players improved in their ability to read eye charts in the lab. The following season, they also showed improvements on the field: fewer strikeouts and more runs created (a measure of batting performance) compared with their own stats from the previous season and compared with the rest of the league (Deveau, J., et al., *Current Biology*, Vol. 24, No. 4, 2014).

Seitz acknowledges that the study had limitations, including a small sample size and no control group. “But it was an exciting proof of concept,” he says. “We wanted to demonstrate that we could train someone in the lab, test them in their normal activities, and start evaluating whether there was transfer [of



the training effects].”

Since then he has continued to study vision training and has developed another vision training game, called Sight-seeing. While the games are designed to be fun, they are rooted in research. With Marcello Maniglia, PhD, an assistant research psychologist in the lab, Seitz aims to understand what elements of training programs translate to real-world improvements in vision, both for people who want to sharpen their normal-range vision as well as those with visual impairments. “We want to be as rigorous as possible in comparing different

approaches in training so we can understand the secret sauce that leads to transfer of learning,” Maniglia says.

To do that, they take a holistic view of sensory perception. Vision isn’t only about the eyes; it involves other cognitive functions as well—such as attentional processes that allow a person to keep their eyes on the ball while tuning out what’s going on in the stands. Of course, attention isn’t just important for athletes. One of Maniglia’s current projects is developing training programs to improve vision in people with macular degeneration, which causes loss in the center of the

field of vision. “Macular degeneration doesn’t just reduce vision but leads to a complete change in the way the person’s attention system is interacting with the world,” he says. “One of our ideas is that a vision training program that takes into account higher-order functions like attention and cognition would probably be more effective.”

AUDITORY LEARNING

Seitz takes a similarly broad view in his work on hearing. His approach is novel in the field of auditory perception, says E. Sebastian Lelo de Larrea-Mancera, a fifth-year

The center is developing vision training programs to help people with macular degeneration, a leading cause of vision loss in older adults.

doctoral student who focuses on hearing. “The distinction between perception and cognition is very clear in the boxes we draw in textbooks, but it’s not very clear when you look at how people behave,” he says. “We’re interested in all of the cognitive resources that can be put to the task of hearing.”

Initially, Seitz and his collaborators set out to create a hearing training game similar to the one he’d devised for vision. But they quickly realized they needed to take a step back. Traditional hearing assessments weren’t sensitive enough to measure improvements within the range of normal hearing, he says. And they didn’t capture all of the dimensions that might be important for a person’s experience of hearing and interpreting sounds. For instance, Seitz says, as many as half of people who say they have

trouble hearing in real-world situations like noisy restaurants actually do fine on audiological exams. “A lot of the established procedures to measure hearing are 80 or 90 years old and haven’t really been updated with a newer understanding—not only of how the ear works, but of how the brain works,” he says. “We want to understand the dimensions of hearing that are most important for predicting how somebody is going to be able to perform in their daily listening scenarios.”

To improve on those tests, Seitz and colleagues developed the Portable Automated Rapid Testing program, which is designed to assess a range of auditory processing abilities (Gallun, F. J., et al., *Proceedings of Meetings on Acoustics*, Vol. 33, No. 1, 2018). He and Larrea-Mancera are continuing to fine-tune and validate the test, which takes

advantage of tablets and smartphones to produce sophisticated yet accessible hearing tests that don’t require soundproof testing labs or professional audiologists. The tool is being used by researchers and some audiology training programs and could potentially be used by people to test their own hearing at home.

At the same time, the researchers are moving ahead with the development of an app called Listen, a brain training game designed to sharpen a player’s hearing. Players travel a sci-fi landscape, dodging obstacles that come their way. To avoid the threats, players must respond to sound cues, such as jumping when a pitch rises, or turning left when they detect a sound on their left. The game is adaptive, becoming more difficult as players improve in their ability to distinguish between sounds. Seitz and Larrea-Mancera are testing the game in people without hearing deficits as well as in those who have hearing loss related to aging or traumatic brain injury.

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CAN MEMORY BE TRAINED?

Meanwhile, lab members are pushing forward with their memory training study. There’s some evidence to suggest that game playing in general might help hone working memory—the short-term memory that’s used when you hold information in mind as you make actions or decisions, such as repeating a phone number in your head while looking for a pen to write it down with. Testing three different measures of working memory, Seitz, Jaeggi, and colleagues found that gamers performed better than nongamers on all three. Among people who weren’t extreme gamers, the correlation was weaker—but even still, they found that time spent playing video games was associated with working memory improvement (Waris, O., et al. *Computers in Human Behavior*, Vol. 97, No. 1, 2019).

Still, the idea of memory training is somewhat controversial, and research



Research from the lab indicates that game playing sharpens a person's working memory.

on whether such games lead to real-world benefits has been mixed. Seitz believes that's partly because the research hasn't accounted for individual differences in people's ability to improve through memory training, and partly because previous studies have used too many different research methods, turning the science into an apples-to-oranges comparison. For memory training research to move forward, he says, researchers must start systematically comparing the features of these training programs (Pergher, V., et al., *Journal of Cognitive Enhancement*, Vol. 4, 2020).

He hopes his latest study with Jaeggi and colleagues will do just that, with help from a grant from the NIMH. Coordinating the large-scale project is Anja Pahor, PhD, a former post-

doctoral researcher in Seitz's lab who now serves as project scientist with joint positions at UC Riverside and Jaeggi's lab at UC Irvine. "It's really dynamic work, with Dr. Seitz bringing expertise from perceptual learning and Dr. Jaeggi's team bringing expertise from the realm of working memory training," she says.

The project began by testing 1,000 participants in the lab. After honing their testing and training measures, the researchers launched the online portion of the study, for which they plan to recruit 30,000 additional participants. They'll complete questionnaires covering demographics, personality, technology use, and gaming history, as well as a variety of cognitive assessments. Then the games begin. Participants will engage with different variations of memory

training through apps developed by the Brain Game Center, each completing 22 training sessions lasting 20 to 30 minutes each.

"Our approach is to collect a large amount of data so we can drill down into the mediating and moderating factors to understand whether transfer of learning occurs and under what circumstances," Pahor says. For instance, do people who already play video games stand to improve more or less by playing working memory games? Are games more effective in people who have memory deficits, or in those whose memory is within the normal range? Do people benefit from multisensory training programs that feel like video games, or are more straightforward psychological training tasks—without the sounds and graphics of games—more effective for certain populations? "It's possible that some subgroups might benefit more than others, and certain types of training might be more appropriate for a certain person," she says.

While the research aims to understand the cognitive components of memory training, Seitz's team also wants to understand what works (or doesn't) from a game design perspective. You can "slap a skin on a game," he says, basically just adding scenery to a series of cognitive training tasks. Or you can have a more immersive experience, with multisensory inputs and interactive characters that players must navigate through the game. "We have some preliminary evidence suggesting that when you just slap a skin on it, it seems to hurt performance. When you do a

FURTHER READING

Perceptual expertise: How is it achieved?
Seitz, A. R.
Current Biology, 2020

Towards a whole brain model of Perceptual Learning
Maniglia, M., & Seitz, A. R.
Current Opinion in Behavioral Sciences, 2018

Divergent research methods limit understanding of working memory training
Pergher, V., et al.
Journal of Cognitive Enhancement, 2020

How to build better memory training games
Deveau, J., et al.
Frontiers in Systems Neuroscience, 2015

more immersive game, it seems that there are greater individual differences, but some people see a bigger performance improvement,” Seitz says. If the finding holds, it suggests that game design is just as important as the underlying cognitive building blocks of a training task.

Fortunately, he has a team to help him create games that have the potential to be both fun and effective. His lab employs four full-time programmers who create and tweak the games based on the scientists’ research goals and findings. The lab also includes graduate students, postdoctoral researchers, research scientists, research coordinators, and many undergraduate



Dr. Aaron Seitz (fourth from left) and members of the Brain Game Center for Mental Fitness and Well-Being at the University of California, Riverside, in May 2019.

research assistants—a team that can total as many as 60 or 70 people in a non-pandemic year.

Seitz also heads the Learning and Memory Lab, where he conducts more basic science research on perceptual learning—much of which feeds into the work at the Brain Game Center. Though his projects are wide-ranging, they share a common thread: the idea

that by decoding the building blocks of cognitive training tools, they can create apps to help people perform better in their daily lives, whether that’s remembering a grocery list, keeping up with conversation in a noisy restaurant, or hitting more home runs. “We hope to understand the ingredients in training programs that might be more or less effective,” he says, “and in particular, how we can mix those ingredients with individual differences so that everybody gets a recipe that works for them.” ■

● “Lab Work” examines the work of psychologists in research labs. To read previous installments, go to www.apa.org/monitor/digital and search for “Lab Work.”

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Date 10/19/20

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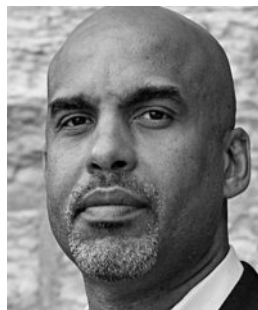
Hinshaw



Phelps



Fondacaro



Fair



Barch

PSYCHOLOGISTS IN THE NEWS

The National Academy of Medicine has presented the 2020 Rhoda and Bernard Sarnat International Prize in Mental Health to **Stephen P. Hinshaw, PhD**, a professor of psychology at the University of California, Berkeley, and a professor of psychiatry and behavioral sciences at the University of California, San Francisco. The \$20,000 prize recognizes Hinshaw's more than three decades of research on child and adolescent mental health and his persistent efforts to reduce stigma of mental illness. Hinshaw is also the recipient of APA's 2020 Award for Distinguished Scientific Contributions.

Harvard University psychology professor **Elizabeth A. Phelps, PhD**, has won the George A. Miller Prize in Cognitive Neuroscience from the Cognitive Neuroscience Society. The prize honors scholars whose work has the potential to revolutionize the field. Phelps's research focuses on how variations in people's emotions can affect cognition, including memory.

The Association of Public and Land-grant Universities has presented a W.K. Kellogg Foundation Community Engagement Scholarship Award to the Connecting Cultures program at the University of Vermont, the brainchild of psychology professor **Karen Fondacaro**,

PhD, and colleagues in the university's clinical psychology program. Connecting Cultures offers evidence-based mental health services to refugees and survivors of torture in Vermont and has served more than 1,000 refugees from more than 30 countries. Staff also work with the community to conduct research on refugee mental health and offer training to psychology students on how to provide culturally competent services to refugees.

Damien Fair, PhD, a cognitive neuroscientist at the Masonic Institute for the Developing Brain at the University of Minnesota Medical School, has won a 2020 MacArthur Foundation "Genius" Grant. The prestigious grant is a \$625,000, no-strings attached award to extraordinarily talented and creative individuals as an investment in their potential. Fair combines technical advances in fMRI, advanced mathematical techniques, and expertise in both psychology and neuroscience to investigate resting-state brain connectivity—the brain's intrinsic or spontaneous neural activity.

Deanna Barch, PhD, Elisabeth Binder, MD, PhD, and Velma McBride Murry, PhD, are among the newest members

of the National Academy of Medicine, which elects scholars and leaders in health and medicine who have demonstrated outstanding professional achievement. Barch is a professor and chair of the Department of Psychological & Brain Sciences at Washington University in St. Louis. Binder directs the Department of Translational Research in Psychiatry at the Max Planck Institute of Psychiatry. McBride Murry holds the Lois Autrey Betts Endowed Chair and is a university professor in the Departments of Health Policy and Human and Organizational Development, Vanderbilt University School of Medicine and Peabody College, Vanderbilt University.

The Behavioral Health Education Center of Nebraska (BHECN) has presented its annual Ambassador Award to **Kim Hill, PhD**, a clinical psychologist at the Beatrice Community Hospital and Health Center in Beatrice, Nebraska. Hill was honored for her work to create a new behavioral health fellowship position at her hospital. Hill also helped train and supervise the first fellow, who is now working at the hospital full time. BHECN is a partnership between the Nebraska state legislature and academic institutions that aims to increase the number of mental health providers in the state. ■

US OPPORTUNITIES

PSYCHOLOGISTS AND PSYCHIATRISTS:

We're on a path to better health-care. Join us. Wellpath is hiring Psychologists and Psychiatrists for our locations in Columbia, South Carolina; Bridgewater, Massachusetts; and Bakersfield, California! We offer amazing benefits, including Daily Pay Option, 401K, Tuition Reimbursement, and much more. We have various shift openings, including day, night, and evening shifts, as well as full-time, part-time, and PRN options. Are you ready to help your community? Join the Psyc team at Wellpath today. Apply online at wellpathcareers.com, or contact our recruiter, Michael, at MVernon@wellpath.us.

CALIFORNIA

ASSOCIATE/FULL PROFESSOR: The Rosemead School of Psychology at Biola University is conducting a search for several full-time faculty positions to begin in August 2021. Strong candidates will demonstrate interest and background in one or more of the following areas: clinical interventions, experimental psychology and research methods, physiological psychology, the integration of psychology and theology, and/or online teaching. Applicants who bring diverse racial and ethnic perspectives to their teaching and scholarship are especially encouraged to apply. We are seeking three types of candidates: 1) **Clinical faculty candidates who are expected to teach primarily graduate courses in our APA-accredited doctoral programs, mentor research, advise students, and provide clinical supervision.** We anticipate that successful clinical applicants will hold a PhD or PsyD in Clinical or Counseling Psychology, and be licensed or license-eligible to practice psychology in California. 2) **Psychology faculty with discipline-specific knowledge who will teach undergraduate courses in experimental psychology to traditional students, and physiological psychology to both undergraduate and graduate students.** Successful applicants should hold or be in the process of pursuing a PhD in physiological psychology or cognitive neuroscience. Priority will be given to candidates with teaching experience and a record of successful scholarship. 3) **Psychology instructor who will teach in our online, Applied**

Psychology Bachelor of Science program.

The ideal candidate will demonstrate a passion for working with adult learners as well as the integration of psychology and theology. This individual should have online teaching experience, a collaborative spirit, and a commitment to engaging online teaching. The successful candidate will work with the Program Director to assess curriculum, student learning, and program outcomes. Clinical training at Rosemead builds on our psychodynamic legacy by providing contemporary, evidence-based training with a foundational emphasis on the therapeutic relationship across all modalities. Our experiential therapy curriculum includes exposure to psychodynamic, interpersonal, cognitive-behavioral, emotionally focused, and dialectical-behavioral therapy approaches. Rosemead includes a counseling center, serving Biola students and the broader community, while also hosting an APA-accredited internship. Rosemead also publishes the *Journal of Psychology and Theology*. As a private Christian University, Biola seeks to develop students in mind and character to impact the world for Christ. Biola seeks faculty who are in agreement with the Biola Doctrinal Statement and Standard of Conduct, with a compatible interest in relating psychological theory, research, and practice to the Christian faith. Applicants should send their curriculum vitae, one-page statement of interest, and one-page Christian testimony to the Dean through this link: <https://biola.csod.com/ats/careersite/JobDetails.aspx?site=1&id=1465>. Sending inquiries by email is also acceptable: douglas.daugherty@biola.edu.

FLORIDA

PSYCHOLOGIST: Centurion is proud to be the provider of mental health and medical services to the Florida Department of Corrections. With over 30 years of experience, we are one of the nation's leading providers in the unique and important field. Whether seasoned, mid-career or a new graduate, we have outstanding Psychologist opportunities to offer throughout Florida for full or part-time. Florida Provisional Psychologists are welcome at select locations – guaranteed salary while accumulating hours for full licensure – supervision provided! Opportunities available near

the following cities: Pensacola, Marianna, Tallahassee, Panama City, Lake City, Gainesville, Orlando, Tampa, Brooksville, Ocala, Port St. Lucie, Stuart, and Miami. We offer competitive compensation and a comprehensive benefits package including: competitive compensation, benefits and up to \$20,000 sign-on bonus; health, dental, vision, life and disability insurance; 20 paid days off per year + 8 paid holidays; 401(k) plan with employer match effective first date of employment; up to \$50,000 student loan repayment at eligible sites. Contact: Holley@teamcenturion.com.

GEORGIA

ADULT PSYCHOLOGY: With expanding programs and financial stability, the Department of Psychiatry and Health Behavior at the Medical College of Georgia (MCG) at Augusta University now seeks a licensed psychologist to join the MCG faculty in our expansion of the public psychiatry partnership with the Georgia Department of Behavioral Health and Developmental Disabilities. The position will manage clinical care at East Central Regional Hospital-Augusta (located only five miles from the MCG campus), an MCG teaching facility with a 90-bed psychiatric facility, 71 forensic beds and a developmental disabilities facility caring for over 100 individuals. The faculty position will participate in teaching throughout the department, enhancing core didactic and residency practical instruction in psychiatry and psychology. A detailed description of the department structure, programs, research, and education is provided on the departmental website. The successful candidate will be approved to the academic faculty at Augusta University at a rank commensurate with experience and previous academic achievements. This department will support Conrad 30 J-1 Visa Waivers, H1B visas and sponsorship of Green Cards. PhD or PsyD. Must be a licensed psychologist in the state of Georgia. To be considered an applicant for this position you must apply online at <http://www.augusta.edu/hr/jobs/faculty>. Upload your Curriculum Vitae, Research Statement, Professional References, etc., as one document. Augusta University is an Equal Employment Opportunity/Affirmative Action Employer.

ILLINOIS

PSYCHOLOGY FACULTY POSITION:

The University of Illinois College of Medicine at Peoria seeks a doctoral-level psychologist to join our academic team. This full-time position is ideal for individuals seeking a position that allows for clinical practice, supervision and teaching, support of trainee research, and opportunities for leadership roles. Key responsibilities: supervise medical students and psychiatry residents in outpatient settings; provide psychological and neuropsychological testing services; provide direct outpatient clinical care to patients and families; coordinate courses and provide classroom teaching of medical students and residents; mentor medical students and residents; support scholarly activity; evaluate resident and medical student performance; and assist in the annual recruitment of new residents. An administrative role is available to persons with organizational acumen and interest in academic advancement. Faculty members have protected time to pursue other interests including clinical or educational program development and research. The department values and supports the growth and advancement of its faculty members and has a strong record of successful promotion and career development. Peoria offers an attractive mix of small-town charm and big city offerings with diverse local communities, low cost-of-living, and short commutes. Several of its school systems are top ranked. There is an array of recreational activities including live theater, museums, hiking and biking trails, a zoo, arts festivals, sporting events, lively music scene and concerts, and a riverfront district, among others. A PhD in clinical psychology or like doctoral degree is required. Candidate must be licensed or license-eligible in Illinois. Experience in psychological testing as well as in evidence-based practice is strongly preferred. We offer a competitive salary and excellent benefits package. For questions about this position contact **Maureen Wolfe** at maureenw@uic.edu. For fullest consideration, apply by **January 15, 2021 at the following link:** <https://jobs.uic.edu/job-board/job-details?jobID=139020>. The University of Illinois is an Equal Opportunity, Affirmative Action Employer. Minorities, women, veterans and individuals with disabilities are encouraged to apply. The University

of Illinois may conduct background checks on all job candidates upon acceptance of a contingent offer. Background checks will be performed in compliance with the Fair Credit Reporting Act. The University of Illinois System requires candidates selected for hire to disclose any documented finding of sexual misconduct or sexual harassment and to authorize inquiries to current and former employers regarding findings of sexual misconduct or sexual harassment. For more information, visit <https://www.hr.uillinois.edu/cms/One.aspx?portalId=42928&pageId=1411899>.

CLINICAL PSYCHOLOGIST AND POST-DOCTORAL POSITIONS IN PREMIER CHICAGO GROUP PRACTICE

- UP TO \$100,000: Gersten Center for Behavioral Health, a premier group practice in the Chicagoland area, currently has eight amazing psychology opportunities available: three Licensed Psychologist positions and five Postdoctoral positions. Interested candidates should have a broad range of experience. Specialization with children, adolescents, and families is a plus. **1) Licensed Psychologist Positions:** Salary: \$90,000 – \$100,000 (eligible for an increase over time). Start Date: Immediate openings. Outpatient individual, child, adolescent, couples, and family therapy; opportunities to work with patients of all ages and clinical needs, and to provide psychological testing if interested; weekly individual and group consultation; additional training opportunities. **2) Postdoctoral Positions:** Salary: \$40,000. Start Date: five positions to start September 2020. Outpatient individual, child, adolescent, couples, and family therapy; opportunities to work with patients of all ages and clinical needs, and to provide psychological testing if interested; weekly individual and group supervision; additional training opportunities; time will be allocated to study for licensure exam. Benefits: For full-time eligible candidates, the position offers excellent benefits such as: W-2 employment status; medical, dental, and vision coverage; flexible spending account (FSA); 401(k) retirement plan with a company match [only available for full-time licensed psychologists]; short-term disability (STD) including a maternity benefit; life insurance; liability/malpractice insurance coverage; sick pay; in-house continuing education; highest reimbursement rates and pay in the

industry; over 300 practice referrals per month, allowing for quickly developing and easily maintaining a stable practice; outstanding billing and administrative support; a warm, supportive, and collegial environment with a beautiful work space; flexible work hours conducive to work-life balance; no weekends required; four weeks of vacation for postdoctoral positions; unlimited vacation [only available for full-time licensed psychologists]; 24/7 emergency call back up. Gersten Center for Behavioral Health is a thriving and well-established group practice with six locations in: Chicago, Evanston, Skokie, Melrose Park, and Northfield. Gersten Center for Behavioral Health is proud to be a setting that promotes workplace longevity and long-term stability. We encourage you to visit us at www.gerstencenter.com to learn more about our practice and the reasons for our success. If interested, submit your curriculum vitae to Dr. Deborah Liebling at dliebling@gerstencenter.com.

MARYLAND

STAFF SCIENTIST – SOCIAL AND BEHAVIORAL SCIENCES RESEARCH ON HEALTH DISPARITIES:

The Division of Intramural Research (DIR) of the National Institute on Minority Health and Health Disparities (NIMHD) seeks an outstanding Staff Scientist to conduct health disparities research studies focused on: (1) examining the interrelationship between social determinants of health and health behaviors, (2) using observational and experimental approaches to investigate the mechanisms that explain these interrelationships, and (3) develop, forecast, and evaluate multilevel interventions to reduce disparities in health behaviors. A majority of the research will focus on tobacco and substance use disparities, under the direction of Dr. Kelvin Choi. There will be opportunities for the incumbent to interact with investigators within and outside of the NIH. A Staff Scientist is a NIH employee generally appointed to a time-limited, renewable position to support the long-term research of a Principal Investigator. Staff Scientists do not receive independent resources, although they often work independently and have sophisticated skills and knowledge essential to the work of the laboratory. Staff Scientists should be capable of independently designing experiments,

but do not have responsibilities for initiating new research programs. The Staff Scientist in this position will conduct independent research and mentor post-doctoral fellows, post-baccalaureate fellows, and other trainees. Qualifications: Candidates must possess a PhD in epidemiology, biostatistics, public health, psychology, or a closely related field and at least two years of postdoctoral experience. Skills and experiences in collecting, pre-processing, analyzing, and reporting data collected through electroencephalography (EEG) and other psychophysiological measures. Experiences with MATLAB, Brain Vision, and SAS/R/SPSS/STAT are strongly preferred. Outstanding publication record especially in minority health and health disparities research, proven record of mentoring, evidence of teamwork, and excellent oral and written communication skills are also strongly preferred. Appointees may be US citizens, resident aliens, or non-resident aliens with or eligible to obtain a valid employment authorized visa. Salary/benefits: This is a federal full-time equivalent position, and a comprehensive benefits package is available. Salary will be commensurate with experience and qualifications. To Apply: Interested persons should submit one combined PDF of their curriculum vitae, bibliography, a two-page statement of research background and interests, and three letters of recommendation (letters must be signed or provide e-mail correspondence) to: Kelvin Choi at kelvin.choi@nih.gov. Applications will be accepted until the position is filled. The NIH is dedicated to building a diverse community in its training and employment programs. HHS and NIH are Equal Opportunity Employers.

MASSACHUSETTS

PEDIATRIC NEUROPSYCHOLOGIST:

Department of Psychiatry, Center for Neuropsychology at Boston Children's Hospital/Harvard Medical School seeks a full-time pediatric neuropsychologist to join a staff of well-established neuropsychologists treating patients with medical and neurological disorders. The neuropsychologist will provide services within our active clinical programs collaborating in the care of children, adolescents, and young adults with a range of neurological and medical conditions. Pursuit of collaborative

research activities and development of an area of clinical innovation/expertise is encouraged. Ideal position for an early to mid-career psychologist, salary commensurate with experience; Harvard Medical School faculty appointment rank dependent on qualifications. The neuropsychologist will be a member of the training faculty in the Center for Neuropsychology, a member postdoctoral training site of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN). Doctorate from an APA/CPA accredited doctoral program and completion of an accredited internship required, as well as postdoctoral residency in clinical neuropsychology. Competitive candidates will have comprehensive training in pediatric neuropsychology, preferably in a medical setting. Fluency in Spanish is preferred, not required. Candidates must be licensed by the Massachusetts Board of Registration of Psychologists at the time of hiring. Interested candidates should send cover letter and curriculum vitae to Celiane Rey-Casserly, Director, Center for Neuropsychology, celiane.rey-casserly@childrens.harvard.edu. Boston Children's Hospital is an Equal Opportunity/Affirmative Action Employer. Qualified applicants will receive consideration for employment without regard to race, color, religion, national origin, sex, sexual orientation, gender identity, protected veteran status or disability. We place a strong emphasis on the values of equality, diversity, and compassion.

TENURE-TRACK POSITION – CLINICAL NEUROSCIENCE:

The Department of Psychology at Tufts University is seeking applicants at the tenure-track assistant professor level for a clinical neuroscience position to begin September 1, 2021. Candidates should study the neural basis of atypical cognition, emotion, and/or behavior, and seek to better understand, predict, or treat psychopathology. The successful applicant will have a PhD (by start date) and an active research program that can lead to extramural funding. Area of research specialization is open, but of particular interest are candidates with research interests that bridge to those of other members of the department; for example, those who adopt a theoretically motivated empirical approach to discovering mechanistic explanations for the development, maintenance, and/or treatment of psychopathology,

A core faculty position with a social justice mission...

The School of Applied Psychology, Counseling, and Family Therapy at Antioch University Seattle (AUS) campus seeks a diverse pool of applicants for a full-time core faculty position in our APA-accredited doctoral psychology (PsyD) program in Clinical Psychology to begin October 2021.

Social justice is a program competency for our students, and we are committed to incorporating diversity, equity, and inclusion into all aspects of our program. We seek a colleague to join our faculty who will share this goal and who can demonstrate their shared commitment to these ideals. Our ideal colleague will help us continue to foster diversity, excellence in teaching, and a departmental culture that is welcoming and affirming to community members with diverse identities. Applicants who self-identify as diverse are encouraged to apply. Located in the stunning Pacific Northwest, AUS makes its home in a liberal, progressive city, situated between two mountain ranges, three blocks from the Puget Sound, abounding with bookstores, bicycles, and residents who embrace the outdoors.

A PsyD or PhD is necessary at the time of appointment, with post-licensure clinical experience of two or more years, as well as Washington State licensure or eligibility. We are seeking a colleague who is an effective teacher of Qualitative Research methods, Lifespan Development, as well as other clinical topic areas from a critical and decolonized pedagogical perspective. A demonstrated commitment to social justice as evidenced through teaching, research, service, and/or public scholarship is foundational. Faculty at AUS teach the equivalency of 24 quarter credit hours over the course of a full calendar year academic schedule with one non-teaching quarter devoted to scholarship. Mentoring students (dissertations, advising), maintaining scholarship and clinical practice, while contributing to the wider university community exceeds our expectations of faculty. Statements of teaching, scholarship and diversity experience are requested.

Email: hr.apa@antioch.edu OR Mail: Search for Faculty c/o Human Resources, 2400 Third Avenue, Suite 200, Seattle, WA 98121.

ANTIOCH
UNIVERSITY
SEATTLE

Antioch University Seattle is an affirmative action, equal opportunity employer. It is the policy of the University and its departments to provide equal employment opportunity to all qualified persons without regard to race, color, national origin, religion, sex, sexual orientation, gender identity, age, disability, and various other status.

including issues related to or exacerbated by the experience of systemic racism; and who make use of methodologies and models to explore neural activity and its relationship to disease conditions and their associated action, cognitive, and behavioral states. Applicants should be interested in teaching courses aligned with one or more of our undergraduate majors in Clinical Psychology, Biopsychology, and Cognitive & Brain Sciences, and to our PhD graduate programs in Psychology and Cognitive Science.

We would also be enthusiastic about candidates willing and eager to teach courses that contribute to the statistical training of our students. Teaching load would be four courses per year, with opportunities for reductions related to service, training, and advising workload. **Review of applications will begin December 1, 2020, and will continue until the position is filled.** Applicants should submit to <https://tufts.app.box.com/folder/123137550771> the following: a curriculum vitae; a statement of research accomplishments and future plans (note that our department embraces open and reproducible science, and candidates are encouraged to address how they pursue these goals in their work); copies of no more than three representative scholarly papers; a statement of teaching experience and approach; three letters of recommendation; and a diversity statement that describes the candidate's aspirations and potential for promoting diversity and inclusion in their professional career. Contact Jessica Storozuk, Department Administrator, at jessica.storozuk@tufts.edu with any questions. Tufts University, founded in 1852, prioritizes quality teaching, highly competitive basic and applied research, and a commitment to active citizenship locally, regionally, and globally. Tufts University also prides itself on creating a diverse, equitable, and inclusive community. Current and prospective employees of the university are expected to have and continuously develop skill in, and disposition for, positively engaging with a diverse population of faculty, staff, and students. Tufts University is an Equal Opportunity/Affirmative Action Employer. We are committed to increasing the diversity of our faculty and staff and fostering their success when hired. Members of underrepresented groups are welcome and strongly encouraged to apply. See the University's Non-Discrimination statement and policy here <https://>

oeo.tufts.edu/policies-procedures/non-discrimination/. If you are an applicant with a disability who is unable to use our online tools to search and apply for jobs, contact us by calling Johny Laine in the Office of Equal Opportunity (OEO) at (617) 627-3298 or at johny.laine@tufts.edu. Applicants can learn more about requesting reasonable accommodations at <http://oeo.tufts.edu>.

NEW YORK

LICENSED PSYCHOLOGISTS/OR THOSE SEEKING LICENSURE HOURS: Suburban Long Island Private Practice, 1099 status. Includes referrals and all administrative support services. 40% children. CBT/Beh Interventions. 15-40 sessions per week. Contact: Dr. Baumgarten. Email: ail5an2ab9@aol.com. Phone: (631) 669-3735.

CLINICAL PSYCHOLOGIST, PHD/PSYD, NYS OR CT LICENSED: Become a Geropsychologist. Rewarding population, collegial atmosphere, flexible schedule, supportive supervision (as needed). Now hiring in the Bronx, Brooklyn, Westchester, New York, and Fairfield County, Connecticut. Contact Dr. Pat Tomasso: ptomasso@agingmattersny.com.

OKLAHOMA

ASD SPECIALIST PSYCHOLOGIST: Moore Autism Center is happy to announce the opening of an ASD specialist psychologist position. The position is salaried (\$90,000) with benefits including HI, matched SIMPLE, and bonuses. Compensation package is estimated to be \$100,000+. Eligible psychologists must be able to demonstrate expertise in the domain of ASDs, preferably via a postdoctoral immersion experience in ASDs, or 5+ years of demonstrable competence in this specialty field. Direct queries to Dr. Ward@yaho.com. www.mooreautismcenter.com.

TEXAS

ASSOCIATE/FULL PROFESSOR OF SCHOOL PSYCHOLOGY: College of Education and Human Development Department of Educational Psychology. Website: <http://epsy.tamu.edu>. The Department of Educational Psychology at Texas A&M University announces a tenure track, Associate/Full Professor position within an APA-accredited School Psychology Program. The specific area of research

expertise for this position is open; however, we seek applicants with an established and fundable programmatic line of research that contributes significantly to child psychology/ the profession of school psychology. All application materials can be submitted electronically at: <http://apply.interfolio.com/77847>. **The review process began October 5, 2020 and applications will be accepted until the position is filled.** Address inquiries to the attention of Jamila J. Blake, PhD, Search Committee Chair (email: jjblake@tamu.edu). The Texas A&M System is an Equal Opportunity/Affirmative Action/ Veterans/ Disability Employer committed to diversity.

PRIVATE PRACTICE NEUROPSYCHOLOGIST, PSYCHOLOGIST, PROVISIONALLY LICENSED PSYCHOLOGIST, PSYCHIATRIST, PSYCHIATRIC NURSE PRACTITIONER: Providers needed in Dallas, Texas, to provide services in nursing homes, memory care, skilled nursing, and assisted living. Additional locations available for nursing home work. Opportunities are available in our outpatient private practice offices if desired, including Brief Mental Status Exams. The Ludden Group, P.C., is a Christian private practice group including psychologists, a psychiatrist, LPCs, an LCSW, and Externs, outpatient practice located in Rockwall, Texas, 25 miles east of the Dallas Metroplex. Additional locations include Ennis, Terrell, Athens, Burkburnett, and Greenville. The Ludden Group is seeking psychologists for a long-term position, Full or Part-Time. Duties will include diagnostic assessments, testing, and weekly psychotherapy with the geriatric population. Services also available in the Ludden Group's outpatient private practice where we treat patients throughout the life span. Areas served: Rockwall, Farmersville, Greenville, Terrell, Dallas, and Ennis. The Ludden Group, P.C. is well established with over 35 years' experience. Send your curriculum vitae and any questions to Dr. Linda Ludden, Ed.D, Texas Licensed Psychologist, lindaludden-sivils@gmail.com, (214) 403-7266. Our website is www.theluddengroup.com.

VIRGINIA

CLINICAL PSYCHOLOGY: Join FamilyFirst Psychological Services in Vienna, Virginia. A thriving,

fee-for-service group practice seeking a Virginia licensed clinical psychologist for full-or part-time position to provide in-person, Covid-compliant psychological testing. Expertise in assessment with children as age 5 is required. Offering flexible work hours/days conducive to work-life balance. Part-time child/teen therapy position also available. Send cover letter and resume to Maria Kanakos at mkanakos@familyfirstva.com.

WISCONSIN

POSTDOC POSITION OPEN IN LABORATORY OF DR. ALAN NYITRAY: NIH-funded postdoctoral positions are available immediately to join our research team at the Medical College of Wisconsin. Required: PhD degree, strong background in epidemiology with experience and publications in cancer epidemiology/cancer screening interventions. Strong quantitative skills required for analysis of NIH-funded anal cancer screening intervention trial data. **Application deadline January 31, 2021.** Send curriculum vitae, statement of research interests and contact information for three references to Michele Ward at mward@mcw.edu. Positions filled ASAP.

PRACTICE FOR SALE

UNIQUE PRACTICE OPPORTUNITY: Upcoming retirement from thriving therapy practice in NY Capital region. Perfect for someone looking to start a practice who needs a strong referral base. Take over DBA/ practice phone # which generates many referrals per week. Walk into a busy schedule the day you start. Terms negotiable: one-time payment or percentage of revenue over several years. Contact Dr. Ellis at (518) 791-4721.

OKLAHOMA CITY, OKLAHOMA:

Turnkey opportunity. Hospital-area setting. Income potential \$150,000 to \$300,000. Asking only \$90,000. Contact: Mstephenphd@att.net or (405) 858 8777.

PRACTICE PRODUCTS

CALDWELL REPORT REOPENS: We are pleased to announce that Alex B. Caldwell's brilliant MMPI-2™ interpretive program is once again available, now as CALDWELL REPORTS. Our updated format works on PCs, iPads, and androids,

Macs, and other platforms. Narrative, custody, personnel and forensic reports, and a score only option, are available online at www.caldwellreports.com.

STATISTICS

FREE ONE-HOUR CONSULTATION: No obligation. Statistical Sanity Consulting offers statistical analysis and interpretation, manuscript development, editing, defense coaching, and strategizing customized to meet your unique needs. Call (570) 881-0439. www.statisticalsanityconsulting.com.

CONFERENCES AND WORKSHOPS

PROFESSIONAL TRAINING: Cognitive and Behavioral Consultants (CBC) is a globally recognized evidence-based clinical and training center that provides continuing education for mental health professionals. CBC's renowned Schwartzberg Training Center, based 30 minutes north of New York City, provides high-level workshops and seminars including 5-day Foundational workshops in CBT and DBT, for varying levels of knowledge and expertise. The annual 5-day CBT and 5-Day DBT Foundational workshops will be fully virtual for the summer of 2021 and may be taken individually or in combination. These workshops are intended to build and enhance knowledge, skills, and competence, and use a combination of lectures, discussions, role-plays, videos, and demonstrations. Ongoing case consultation is available following the workshops for participants who wish to reach adherence in CBT and DBT. For a list of upcoming workshops, visit www.cbc-psychology.com or contact us at info@cbc-psychology.com if you have questions or to receive notification of upcoming training opportunities.

28TH ANNUAL RAND SUMMER INSTITUTE, JULY 12-15, 2021, SANTA MONICA, CALIFORNIA:

Two conferences addressing critical issues facing our aging population: Mini-Medical School for Social Scientists; Workshop on the Demography, Economics, Psychology, and Epidemiology of Aging. Interested researchers can apply for financial support covering travel and accommodations. More information and application form: <https://www.rand.org/well-being/social-and-behavioral-policy/centers/aging/rsi.html>.

ADVERTISING GUIDELINES

General advertising policy as well as guidelines for use in composing and responding to classified advertisements to be placed in the *Monitor on Psychology*® and APA psycCareers can be found online at bit.ly/APA_ad_policy.

► CENSURED INSTITUTIONS

ACADEMIC INSTITUTIONS UNDER CENSURE BY THE AMERICAN ASSOCIATION OF UNIVERSITY PROFESSORS (AAUP) ARE IDENTIFIED IN PRINT AND ONLINE BY THE PLACEMENT OF THE SYMBOL (•) PRECEDING LINE CLASSIFIED POSITION OPENINGS. FURTHER INFORMATION MAY BE OBTAINED AT WWW.AAUP.ORG/OUR-PROGRAMS/ACADEMIC-FREEDOM/CENSURE-LIST.

To purchase a recruitment ad or to view pricing and a complete list of upcoming deadlines, visit www.psycareers.com/employer-offers.

For information regarding placing a nonrecruitment line ad email Amelia Dodson at adodson@apa.org.

► CONTACT INFO

Amelia Dodson
APA psycCareers Operations Manager
Phone: 202-336-5564
Email: adodson@apa.org

Nancy Onyewu
Recruitment Advertising Sales Manager (East Coast)
Phone: 202-336-5866
Email: nonyewu@apa.org

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WHO IS DYING FROM FIREARMS AND WHY?

Most firearm deaths among young people are from homicides, while most of those among older people are from suicides, according to the Centers for Disease Control and Prevention

11.8

PER 100,000

Number of **firearm-related deaths** per year in the United States from 2016 to 2018, compared with 10.3 deaths per 100,000 people from 1999 to 2014, and 11.3 deaths per 100,000 people in 2015.

85%

Percentage of **deaths from firearms** in 2018 that were among **men**. Specifically, 83.8% of those dying from firearm homicides were men, and 86.4% of those dying from firearm suicides were men.

10.19

PER 100,000

Number of firearm deaths in 2018 among **young people** ages 14–18. Firearms are the leading cause of death in this age group, a rate more than 25% higher than deaths from motor vehicle accidents.

91.2%

Percentage of firearm deaths in 2018 from **suicide** among people ages 66 and older. Among young people ages 15–24, 56.6% of firearm deaths were **homicides**.

Source: Goldstick, J. E., et al. (2020). Current epidemiological trends in firearm mortality in the United States. *JAMA Psychiatry*. Available at doi:10.1001/jamapsychiatry.2020.2986

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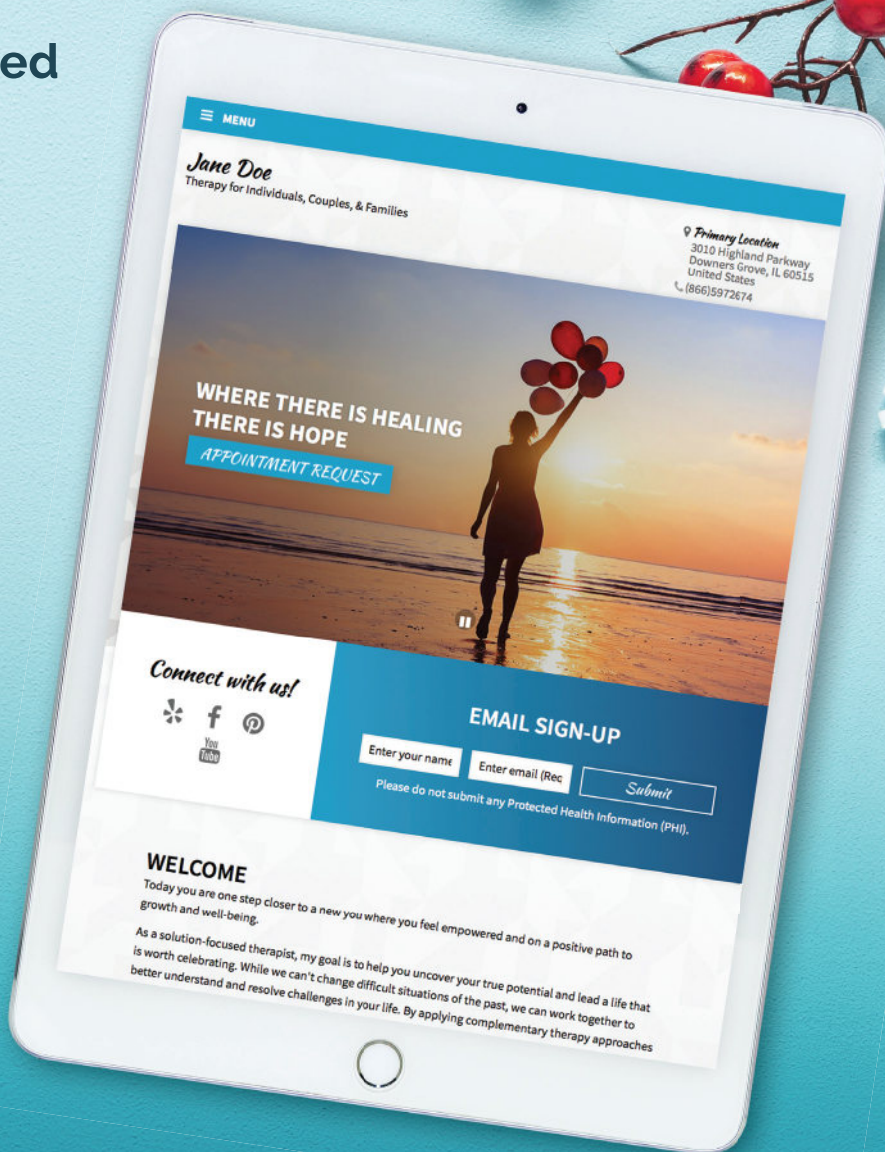
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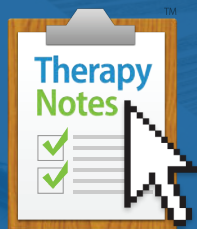
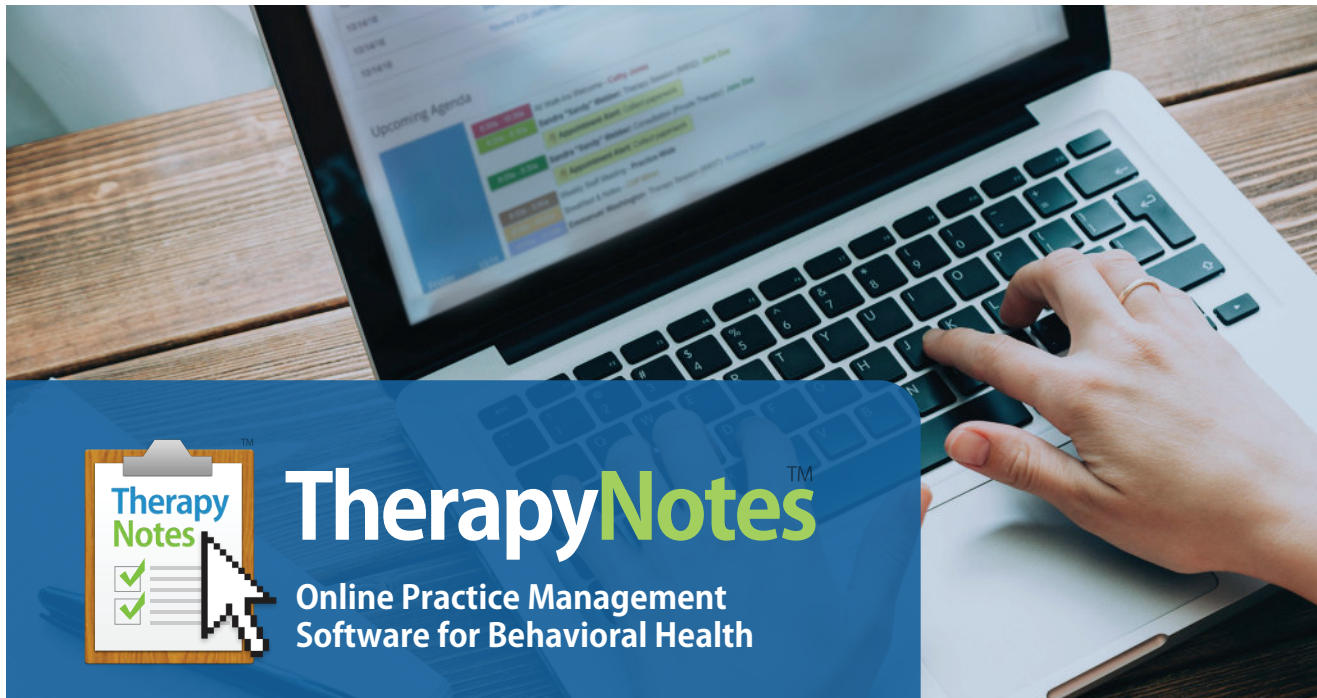
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Progress Note
Treatment Plan

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F41.0 Generalized Anxiety Disorder
F41.8 Other Specified Anxiety Disorder

Treatment Goals:

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Dr. Christina Zampitella, FT, Licensed Clinical Psychologist

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