

APA ANNUAL CONVENTION
August 3-6, 2017 | Washington, D.C.

Discussant, “Psychologists and End of Life: Report from the APA Working Group on End of Life Issues and Care”

William E. Haley, PhD
University of South Florida

Discussant

William E. Haley

My goals

- Brief mention of key elements of the presentations
- Other challenges



Discussant

William E. Haley

My compliments to the presenters!

- Overall the presenters make a strong case that psychologists have much to contribute to improving palliative and end-of-life care, in areas including research, practice, and policy
 - While many presentations focus on geropsychology, related areas such as pediatrics and health psychology are highly relevant, and multiple areas can benefit from training about this area
 - Special compliments to Drs. Gil and Goy for their review of diversity issues, including topics often given less attention such as disability status. Groups such as “Not Dead Yet” have offered powerful statements of concern about topics such as Assisted Dying
- 

Palliative Care

Therapy with
Curative Intent

Hospice

Bereavement
Care

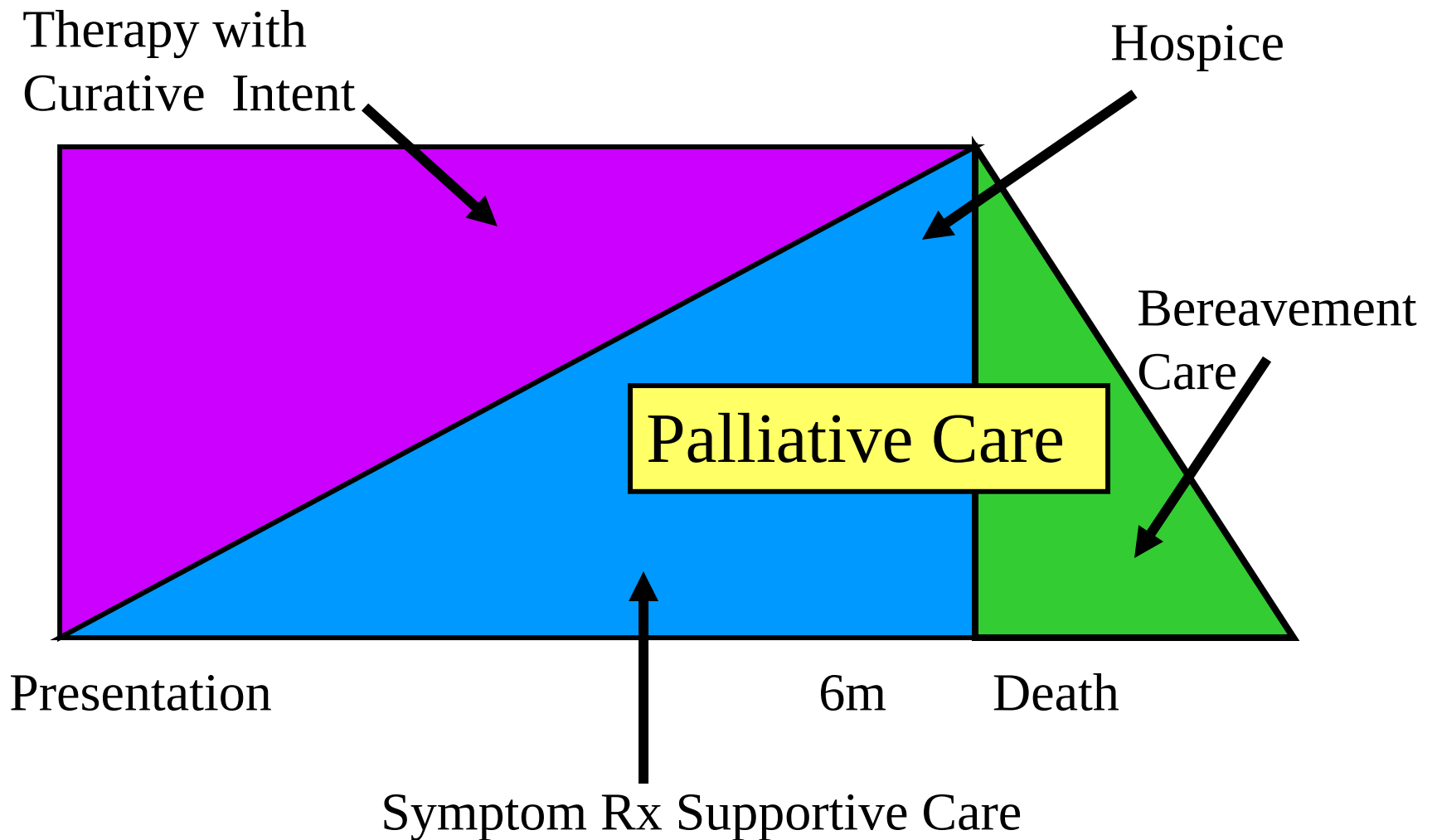
Palliative Care

Presentation

6m

Death

Symptom Rx Supportive Care



Discussant

William E. Haley

Other issues

- The National Hospice and Palliative Care Organization is of key importance but was not mentioned.
 - Will psychologists be welcomed as additional providers in hospice? Other providers, e.g. social workers, are well entrenched as hospice providers.
- 

Discussant

William E. Haley

Other issues

- Greater attention could be paid to providing **bereavement care** (which is not in conflict with hospice reimbursement regulations) and advanced care planning and palliative care in for patients where psychologists are already active (beyond oncology) such as **Alzheimer's disease and stroke care**.
- Psychologists interested in palliative and end-of-life care need an organizational home bringing together psychologists not focused on aging. One option would be a Section of Division 12

ENTRY POINT

Advance Care Planning With
Alzheimer's — Rebecca Gale

NARRATIVE MATTERS

Helping My Mother Die On Her Own
Terms — Dina Keller Moss

GRANTWATCH

Foundation Funding For Palliative &
End-Of-Life Care — Lee L. Prina

AT THE INTERSECTION OF HEALTH, HEALTH CARE, AND POLICY

Health Affairs

Advanced Illness & End-Of-Life Care

Evolving Care Patterns At The End Of Life

Melissa D. Aldridge &
Elizabeth H. Bradley
*PLUS Profile Of 2.3 Million
US End-Of-Life Caregivers*
Katherine Ornstein et al.

Page 1175

Quality Of Care

Quality In Community-Based
Settings
Joan M. Teno et al.
Measuring Quality For Cancer
Patients In Belgium
Robrecht De Schreye et al.

Page 1227

One In Three US Adults Has An Advance Directive

Kuldeep N. Yadav et al.
*PLUS Understanding &
Respecting Patients'
Preferences*
Amber E. Barnato

Page 1244

Global Evidence

Care, Spending & Site Of Death
In Europe & Israel
Martina Orlovic et al.
End-Of-Life Spending In 9 Countries
Eric B. French et al.
Economic Disparities In England
Brendan Walsh & Mauro Laudicella

Page 1201

Hospice

Increasing Veterans' Hospice Use
Susan C. Miller et al.
Profit Margins & Hospice Discharges
Rachel Dolin et al.
Racial Disparities In Hospice Care
Rebecca Anhang Price et al.

Page 1274

A National Strategy For Palliative Care

Diane E. Meier et al.
*PLUS Improving
Communication In Primary
Care*
Joshua R. Lakin et al.

Page 1265

Spending On High-Cost Dual Eligibles

Julie P. W. Bynum et al.

Page 1309

WEB FIRST

Health Spending By State, 1991-2014

David Lassman et al.

Disparities In Medicare Advantage Readmissions

Yue Li et al.

WWW.HEALTHAFFAIRS.ORG

For higher impact in palliative and end-of-life care, it is important for psychologists to publish not only in journals read by other psychologists, but also high impact journals focused on practice and policy. For example *Health Affairs* issued an open call for papers and recently published this special issue on “Advanced Illness and End-of-Life Issues”, but psychologists do not appear well represented.

Discussant

William E. Haley

CONCLUSION

- Three cheers for the Working Group!
 - Suggest greater attention to bereavement and illnesses where psychology already has high impact
 - Watch out for interprofessional challenges in hospice, NHPCO
 - Strive for higher and broader impact in our scholarship
- 

APA ANNUAL CONVENTION

August 3-6, 2017 | Washington, D.C.

[THE POWER OF]

US