Hortensia Amaro, dean’s professor of social work and preventive medicine and USC associate vice provost of community research initiatives, has been invited to serve on the Institute of Medicine’s (IOM) Committee on the Assessment of Resiliency and Prevention Programs for Mental and Behavioral Health in Service Members and Their Families. Sponsored by the U.S. Department of Defense, the IOM committee will focus on prevention strategies to mitigate behavioral and mental health outcomes among the military personnel who deployed to Iraq or Afghanistan. Committee members will conduct a systematic review and critique of integration programs and prevention strategies for behavioral and mental health, targeting service members and their families, and identify and evaluate models and metrics for measuring performance of these programs.

“The committee’s findings have the potential to inform and impact the development of new initiatives for services and research that will address critical issues on resiliency and prevention programs to improve mental and behavioral health in service members and their families,” said Amaro, who was elected to the IOM in 2011 and has previously served on four IOM committees. “I am thrilled to be part of this committee and feel honored to have been selected.”

Committee appointees are nominated by highly qualified members of the mental and behavioral health community and go through a strict vetting process before being selected. For this committee, the IOM was looking for individuals with expertise in psychiatry, clinical medicine, prevention, evaluation/effectiveness research, post-traumatic stress disorder, depression, recovery support, substance use disorders, suicide or interpersonal violence.

Amaro, who recently received the Ernest R. Hilgard Lifetime Achievement Award from the American Psychological Association’s Society for General Psychology, brings her insights from research on the integrated prevention and treatment of co-occurring disorders. Her groundbreaking research on drug addiction, mental illness and PTSD provided strong evidence that women receiving integrated treatment for these co-occurring conditions stayed in treatment longer; had lower rates of post-treatment drug use, mental health symptoms and trauma symptoms; and had lower rates of HIV-risk behaviors. The treatment model is now part of the SAMHSA’s National...
Minority Fellowship Program Information

The principal aim of the MFP is to provide financial support, professional development activities, and guidance to promising doctoral students and postdoctoral trainees, with the goal of moving them toward high achievement in areas related to ethnic minority behavioral health research or services. Our mission and aim are consistent with Healthy People 2010, the Report of the Surgeon General on Mental Health, the President’s New Freedom Commission on Mental Health, and other federal initiatives to reduce health disparities.

- The MFP Mental Health and Substance Abuse Services (MHSAS) Fellowship, funded by a grant from the federal Substance Abuse and Mental Health Services Administration (SAMHSA), was created to support the training of practitioners in behavioral health services and prevention. This fellowship program is designed for students in clinical, counseling, and school psychology and for other psychology doctoral students whose training prepares them to provide therapy, testing, assessments, etc. **Application deadline is January 15.**

- The MHSAS Postdoctoral Fellowship, funded by SAMHSA, was created to support the specialized training of early career doctoral recipients who have primary interests in developing a services or policy career related to the behavioral health or psychological well-being of ethnic minorities. **Application deadline is January 15.**

- The Psychology Summer Institute (PSI), funded by SAMHSA and APA, provides week-long intensive training to advanced doctoral students and early career doctoral recipients. PSI provides educational, professional development, and mentoring experiences to advanced doctoral students of psychology and psychologists who are in the early stage of their careers. Participants are guided toward developing a grant proposal, postdoctoral fellowship, dissertation, treatment program, publication, or program evaluation project. All projects must focus on issues affecting ethnic minority communities. **Application deadline is May 1.**

- **Recovery to Practice (RTP),** funded by SAMHSA, is a 5-year initiative to promote mental health recovery principles and practices for psychologists. The RTP initiative has two primary purposes: to develop an online resource on recovery principles and practices for mental health professionals across the major mental health disciplines and to develop recovery-focused trainings for mental health professionals. Through SAMHSA’s contractor Development Services Group, RTP is assessing the degree to which mental health recovery has been integrated in the field of psychology and developing a curriculum for training psychologists.

For more information and to apply online, visit our website: [www.apa.org/pi/mfp](http://www.apa.org/pi/mfp)
Registry of Evidence-Based Programs and Practices. She is considered a pioneer in applying research to practice and in the development of interventions for disenfranchised populations. Her research and service programs have led to real-world results that have touched the lives of many.

In addition to periodic meetings throughout the project, the 13-member committee will hold an information-sharing meeting that convenes stakeholders and topic experts associated with program evaluation and prevention efforts. And, while the study is independent from any given institution, Amaro is excited to represent the USC School of Social Work and contribute to the committee’s findings.

“Faculty participation in IOM committees is a reflection of faculty expertise and sound scientific reputation,” Amaro said. “As a faculty member in the School of Social Work, I feel that I can bring information to the committee about the highly relevant work that members of our faculty are conducting in the area of military social work.”

Amaro’s tenure on the committee runs through February 2014.

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ISalud Magazine Interviews Dr. Laura Bava on Survivorship Care at Children’s Hospital Los Angeles

Dr. Laura Bava returned to her native Buenos Aires, Argentina, in October 2013, as she was invited to participate in the VI Regional Conference in Pediatric PsychoOncology. The conference was organized by the Natali Dafne Flexer Foundation (http://www.fundacionflexer.org) and the University ISalud (http://www.isalud.edu.ar) under the coordination of Lic. Teresa Mendez. During her visit to Buenos Aires, she also visited the oncology services at the largest pediatric hospital in the region, the renowned Pedro de Elizalde Hospital, and had the opportunity to interact with different professionals, learn about their clinical models, research initiatives, and specific issues under a completely different health care system.

Dr. Bava originally graduated with a degree in psychology from the University of Buenos Aires and has been residing in the United States for the past 15 years. She completed a doctorate in clinical community psychology from the University of La Verne in California, an APA accredited internship, and a two-year APA pediatric psychology fellowship at Children’s Hospital Los Angeles (CHLA) University Center for Excellence in Developmental Disabilities (UCEDD), which is affiliated with the University of Southern California. She participated in the Minority Fellowship Summer Institute towards the end of her fellowship in 2011. . . . She was awarded the Exemplary Scholar Award (2011) from the USC-UCEDD at CHLA. Post fellowship, she was recruited to be part of the multidisciplinary LIFE Cancer Survivorship & Transition Program at CHLA to lead a clinical/research project under the leadership of David R. Freyer, DO, MS, the principal investigator. Her knowledge and experience in psychological assessment, school advocacy, and multiculturalism, particularly applied to serving underserved communities in pediatric settings, made her an asset for the design and implementation of this grant-funded service.

Dr. Bava’s presentations at the conference in Buenos Aires focused on survivorship care at CHLA and the characteristics of her clinical service applied to research. She was interviewed by ISalud magazine. The following are excerpts from that interview completed in her native Spanish and translated here.

How did you become interested in issues related to children’s health?

My interest in children started prior to my psychology degree, as I first became an elementary school teacher, but I never taught. Later, I shifted my interest to clinical psy-
chology but was originally interested not only in children, but mostly in adults and families, particularly . . . issues of domestic violence while families interfaced with the legal systems; all that was while I was in Argentina. Once I moved to the United States as part of my training, I completed an advanced placement practicum (fourth year of school) in neuropsychological evaluations for pediatric cancer patients at CHLA. I fell in love with psychology integrated in interdisciplinary teams in medical settings. Then I continued my training through my internship and fellowship in pediatric psychology. Although I started in hematology-oncology and always saw patients with those conditions, my training also included other diagnoses, including transplant and chronic conditions, and always with an emphasis in multiculturalism and providing services to underserved communities. Then, I was hired to remain at CHLA under the LIFE Cancer Survivorship & Transition Program.

Tell us about the experience of working in a pediatric hospital.

First, the concept of health system in the United States is different than in Argentina, as there is no universal health care. The concept of a “public hospital” as understood in Argentina is very different. As a patient, a person can receive emergency services but there is also the issue of how those services will be paid for. The insurance or the person will be billed for services. For standard care, you usually go to institutions and doctors covered by your insurance. With children, the issue of finding medical coverage tends to be easier than for adults, but still the system is very complicated and unequal. Issues of immigration pose additional barriers for people; some children can only get emergency coverage under the state plans. The coverage will end once those children become adults and that will compromise their long-term survivorship care for their pediatric cancer history.

In Los Angeles, we have a large percentage of Latino patients; race and ethnicity have implications for treatment outcomes and their role is still being investigated. They also play a role in certain sociodemographic indicators that are overrepresented in certain population groups and present families, and the medical teams serving them, with specific challenges and opportunities (for selected demographic characteristics according to the U.S. Census, see www.census.gov). Some of the challenges have to do with language barriers, poverty, and lack of resources. Some of the opportunities include families that are immensely resilient, have close-knit social supports, and sometimes parents report they would not have received the same quality of services in their country of origin. Due to our geographic location, we serve a large percentage of Latino patients and families. Our coverage area is quite large; sometimes families travel two to three hours to get services in our program. Especially if their initial treatment was completed at our institution, it is very difficult for families to take the child somewhere else, as they form a strong bond with the medical teams.

What is the situation regarding childhood cancer?

In the U.S. the primary cause of death for children is accidents, and the second highest due to disease is cancer. Although the incidence is very low, the survivorship rate high, and medicine has made great advances in treatments, once children are diagnosed, the long-term health implications can be negative. When they hear the words “pediatric cancer” or “child with cancer,” most people do not necessarily think about the high rates of survival. The advances in treatments have been remarkable during the last decades, mostly due to clinical trials and collaboration among institutions.

What is the type of treatment for pediatric cancer survivors?

Our survivorship clinic has an emphasis on long-term health information, follow-up, and education and empowerment to help children fulfill their best potential. There is also an emphasis on transitioning the responsibility and knowledge from the parents to the survivors so they will be able to manage their health care appropriately. . . . Our team is multidisciplinary, with a pediatric oncologist, specialized nurse practitioners, a clinical social worker, and research and administrative personnel. Patients can be self-referred or referred by their oncologist. Patients can receive these services within two years of finishing their treatment.

What are some the psychosocial issues affecting these children in regard to school reintegration?

One of the first things to keep in mind when working with survivors is their on-treatment experience, what type of
services were provided, what was the premorbid status of
the patient and the family, how has the family handled
that very stressful time, and what kind of resources and
challenges they have. In regards to school, was the child
out of school for a long time? Did they have a teacher
helping them while hospitalized? How was returning
to school for them? Was the school receptive and supportive
of changes and needs? Oncologists and medical teams in
general are key in helping families transition from treat-
ment and back to school in addressing their concerns and
referring patients for additional services if needed. We also
sometimes see that families are scared to send the children
back to school due to fears of infections and illness despite
the doctors saying that is OK to go back.

Taking all that into consideration—the fact there are
specific treatment exposures that affect cognition, the
difficulties when navigating educational systems, the dispari-
ties in resources faced by some of our communities and
schools, and the need to provide parents and patients with
resources—Dr. Freyer (PI) created the ABCs (Achieving
Best Cognitive Outcomes after Pediatric Cancer)
project. The project was launched to develop an effective
approach for increasing academic success of childhood
acute lymphoblastic leukemia (ALL) survivors in the LIFE
Cancer Survivorship & Transition Program at CHLA.
Particularly, the ABCs services focus on school-age ALL
survivors and look specifically at long-term cognitive
effects and academic performance. This portion of this
service is entirely free for patients and paid by a generous
grant. The development phase started in 2011 and once I
was recruited, implementation was launched.

Thus far, we have approached 113 patients in a little
over two years (cumulative through 12/15/2013). About
70% of those approached followed up wanting the
service. From those we have about a 90% retention rate
through the service. [Note post interview: We were
generously awarded a 3-year renewal for this service.]
Secrets to Happiness in Old Age

By Joaqlin Estus, KNBA News Director

Research shows happiness follows a U shape throughout life, with higher levels in youth that drop until about age 50, then rise again into old age. A Harvard study of adult development shows a good marriage at age 50 and the ability to play, create, and form new friendships after retirement are stronger indicators of happiness at age 80 than low cholesterol or high income.

University of Washington assistant professor Dr. Jordan Lewis says people who feel like they’re leaving a legacy, or making the world a better place, are also happier. For his doctoral dissertation, he surveyed Aleut, Athabascan, and Yup’ik elders in his home region of Bristol Bay. Lewis says some of them talked about how they overcame alcoholism, survived the suicide of a loved one, spent years gathering food from nature and practicing cultural traditions, and now want to pass on their experience.

“Elders... talked about the opportunity to share: ‘I have all this knowledge I want to share because once I’m gone, the knowledge is gone.’ Having those opportunities,” said Lewis, “gives them a sense of purpose, promotes their health, and they age better.”

Lewis is studying elders’ wishes to share what they know about subsistence and nature, or skills such as beading, kayak-building, and language. He says healthy communities draw on their elders.

“The benefit to the community is the history is there. They can learn their language. They know who their ancestors are, who they come from, where they’re from. It’s very important for Natives to know where they come from to know where they’re going. And so learning from their elders is really important because it promotes healthy families, healthy communities, and lifts this idea of preserving culture.”

Southcentral Foundation (SCF) vice president Ilene Sylvester says respect for elders, and heeding their advice, is a big part of Alaska Native cultures. She says that’s a value at SCF and is reflected in the weight given to its Elders Council.

“So we have an intern program because they brought that to us years ago, the need where they were watching their grandchildren and wanted them to have something positive to do,” says Sylvester. “So they were part of starting that discussion. And now we have an intern program with 60 young people that come in the organization every summer and about 15 in the wintertime.”

Teddy Mayac is 77, a retired civil engineer who grew up in the now-abandoned village of King Island. He says because of the close ties of everyone on King Island, its isolation from other communities, and the need to work together, villagers were taught to keep a positive attitude, to be patient, and to treat others with kindness and generosity—values he wants to pass on to younger generations.

“Let our people remember the good things, the honor, the respect, the love, the cohesiveness,” says Mayac. “It doesn’t matter who it is, we have to honor them and bear with whatever comes between us. Confrontation isn’t good.”

Mellisa Heflin, an elders outreach coordinator for the Alaska Native Tribal Health Consortium, says her grand-
mother urged her and her children to learn the Inupiaq language, which helped her realize something about how she views herself and her culture.

“It’s important to be proud of your heritage and don’t be shy to share it with others,” says Heflin. “When you put a mask over it, it just makes things more difficult. So if you speak your language, speak it. It’s part of who you are. If you eat another food, enjoy it. Because it’s who you are. So if you’re not proud of your heritage then you’re not proud to be yourself.”

Another reason to spend time with elders is that as life expectancy increases, many of us will be traveling the road they’re on and would benefit from learning how to live well, with joy, from retirement into our 80s and beyond.

The author's work on this article was made possible through a MetLife Foundation Journalists in Aging Fellowship, a project of New Media and the Gerontological Society of America. © 2014 KNBA. Adapted with permission. Retrieved from http://knba.org/part-6-secrets-happiness-old-age.

Responding to the Mental Health Needs of Multicultural Faith Communities: The Chaplain’s Balance

By Bernie Rosner

In a talk that ranged from an astronaut’s communion on the moon to the lifecycle of sea turtles, Dr. Glen Milstein’s keynote speech at HealthCare Chaplaincy’s Winter Clinical Pastoral Education Day reminded our staff and trainees of the unique work that we do, and the human-centered healing that we facilitate on our daily rounds.

Dr. Milstein is a clinical psychologist who after working for ten years in psychiatric hospitals is now an associate professor of psychology at the City College of New York. He first started collaborating with HealthCare Chaplaincy as a postdoctoral fellow at the Weill Cornell Medical College, thirteen years ago. In that time, his decade-long research collaboration with one-time HCC chaplain Amy Manierre has led to the development and implementation of their model for Clergy Outreach and Professional Engagement (COPE).

Milstein and Manierre use COPE to study the de facto role of clergy in mental health care service delivery and to facilitate collaboration between clinicians, chaplains and community clergy. They have found that mental health care providers have as much to learn about the importance of religious belief and practice as a resource to help persons suffering with mental illness, as clergy need to learn about recognizing when emotional difficulties of congregants reach the . . . severity requiring assessment, and possibly treatment, by a mental health professional.

In his talk, “Responding to the Mental Health Needs of Multicultural Faith Communities: The Chaplain’s Balance,” Dr. Milstein began in Africa at the roots of our human origin. He noted how a study of genetic samples from around the world has confirmed there is only one human species. With a picture of a human brain on the screen, he reminded us that whatever external differences of appearance may distinguish us, our humanity unites us. He spoke of how our human brain is born interlaced with potential for knowing, and not yet woven into networks of knowledge. All human brains are verbal, affiliative and spiritual; each human brain, over time, through our relationships within our families and communities, develops “my language, my culture, my prayers.”

Dr. Milstein said it was an honor for him to speak to a room filled with chaplains and proto-chaplains, and offered two reasons for his deep feeling. First, as an academic, he now spends most of his time teaching students, reviewing data, reading and writing. He honored the direct care carried out each day by chaplains among persons who suffer physical illness and mental disorders. Second, he honored our unique work bridging and balancing the varied spiritual needs of the many patients in
our hospitals, all the while maintaining our own specific religious rituals and traditions. For Dr. Milstein, this ability to acknowledge a universal humanity that deserves our blessing, combined with each chaplain’s learning and commitment and leadership within his or her tradition, makes up what Milstein has labeled the “Chaplain Balance.” He noted how, like a labyrinth, the balance turns back upon itself: within most religious traditions, there is an acknowledgement that all humans share an original creation, and so the connectedness of all persons is also an expression of the chaplain’s own religious beliefs. This understanding of interconnectedness is concurred with by geneticists whose data leads back to Africa.

As an example of Chaplain Balance, which both acknowledges spirituality within all persons and honors specific rituals for individuals, Dr. Milstein related the actions of Astronaut Buzz Aldrin after he and Neil Armstrong became the first persons to land on the moon on 20 July 1969. Buzz Aldrin was an elder in the Webster Presbyterian Church in Houston. The week before his launch to the moon, he celebrated communion with his family and pastor. Pastor Dean Woodruff had brought two loaves of bread; they celebrated communion with the first loaf. From the second loaf Pastor Woodruff cut a small piece for Buzz to take with him to the moon. The rest of the bread was set aside for the congregation to share in communion when Aldrin was safely on the moon. The pastor added a small amount of wine and a small silver chalice to the cache.

When the astronauts landed on the moon, they were given a required rest time prior to their lunar walk. During this time, on his side of the small lunar module, Aldrin removed the chalice and bread and wine in preparation for his personal communion. Before he performed his personal ritual, he spoke to the millions of people on Earth who were listening to these first persons to land on the moon. He said, “This is the LM Pilot. I’d like to take this opportunity to ask every person listening in, whoever and wherever they may be, to pause for a moment and contemplate the events of the past few hours and to give thanks in his or her own way.” Astronaut Aldrin then proceeded in silence to conduct a personal communion and read from a card he had prepared on Earth with his pastor’s guidance. He quoted to himself, John 15:5, “I am the vine, you are the branches. Whoever remains in me, and I in him, will bear much fruit; for you can do nothing without me.”

For Dr. Milstein, Buzz Aldrin’s actions exemplified the Chaplain Balance. As the astronaut commemorated this human achievement, he was both seamlessly inclusive of all human spirituality through his invitation for a moment of contemplation, as well as deeply specifically religious through his personal ritual of communion within his own tradition. Dr. Milstein taught us that this balance is an achievement within the daily conflict that sometimes passes as dialogue and discussion in our society.

After this journey to the cosmos, Dr. Milstein returned us to the topic of mental health care and chaplains, reminding us that mental illnesses are real and serious disorders, which in their worst manifestations can lead to suicide. Suicide is the third highest cause of death among persons 10 to 24, and the second leading cause of death among persons 25 to 34. It has also become a very serious problem among our soldiers and veterans. What role is there for the chaplain to play in helping persons with serious mental illness? One point was that the goal for someone who has experienced mental health problems is not only that the symptoms subside but also that he or she thrive. As one patient put it, he not only wanted medication to lessen his symptoms, he also wanted treatment to put his “shattered soul back together.” Such
intervention requires collaboration across disciplines to both reduce symptoms . . . and return persons to their communities, their congregations, their families, their spiritual journeys.

Dr. Milstein walked us through his four-step model of COPE. First, the COPE model acknowledges that much mental health is promoted through our regular involvement within our religious communities, which nurture positive attitudes of hope and perseverance. It is also in these communities where we strengthen our societies by helping educate our children and by engaging in acts of social justice. A central point of the talk came as Dr. Milstein asked us to accept fully that we are not sea turtles. Sea turtles are born ready to survive; they emerge from their egg shells small yet fully capable of crawling to the sea, swimming away; they are ready to find and eat what they need to live. Not humans.

Central to our survival is culture, and we are born with no culture. He reemphasized that it is from our family and community relationships that we integrate our knowledge to survive and thrive. It is also within our communities where we receive the guidance and support to respond to life’s stressors. In the second step of COPE, when we experience loss, religious communities respond through both ritual and presence; clergy guide us with rituals of mourning, and congregants come to be with us, and help us with emotional, and at times, financial needs. Through this strengthened spiritual coherence and social support, most persons improve their emotional well-being, never needing the services of a mental health professional.

Yet, some persons’ bereavement does not resolve. Clergy are experts with the range of grief their congregants suffer. They know when the depth of mourning is greater than most others, and at this moment—without the need for a formal diagnosis—it is appropriate, even necessary, for clergy to refer individuals to a mental health clinician for assessment and possibly treatment. At this third step of COPE, it is necessary that the individual receive professional mental health care. It may also be that the person is suffering from a chronic mental health disorder. This, in the fourth step of COPE, will require collaboration between the individuals, their clinicians, their families and their clergy to help the person recover and function at their highest possible level. As the person’s health improves, the congregation is a place that can facilitate a return to being a generative member of the community.

Reach out and find ways to collaborate with both mental health professionals as well as community clergy. In this way, we bring even more wholeness to the patients with whom we work.

Through Dr. Milstein’s work with the Nathan Kline Center of Excellence in Culturally Competent Mental Health, two tools have been developed for use by clergy. The first is a brief assessment to confirm that evaluation of a congregant by a clinician would be useful. The second is a brief religion and culture assessment to inform clinicians about aspects of individuals’ beliefs and social support that will be important for evaluation and treatment planning.

One of our strengths as chaplains is that we travel between clinical and pastoral worlds with regularity. We balance the clinical and spiritual with alacrity. Dr. Milstein applauded us and prodded us to reach out and find ways to collaborate with both mental health professionals as well as community clergy. In this way, we bring even more wholeness to the patients with whom we work.

Adapted from PlainViews®, the professional chaplaincy and palliative care publication of HealthCare Chaplaincy Network™, June 2, 2011. Adapted with permission.
TACKLING FAMILY STRESSORS

In the following articles, MFP Fellows Yuying Tsong, PhD, and George Hu, PsyD, look at family stressors from an innovative lens—at both a macro- and a microlevel.

Parachute Kids and Astronaut Families

April 29, 2014
By Yuying Tsong

Parachute kids,” or unaccompanied minors, are youngsters who are sent to study and live in the U.S. without their parents as early as the first grade. The stress of immigration, coping with separation from parents and having high academic expectations greatly affect the psychological and emotional well-being of parachute children. The common feelings of loneliness, sadness, anger, alienation and homesickness can become precursors for the development of serious psychological and behavioral problems, such as depression, anxiety, gambling or substance abuse.

“Astronaut family” is a term used to describe instances of one parent, usually the mother, immigrating with the children to the U.S., and the other parent, usually the father, staying in the country of origin, living and working to pursue economic advantages.

The children from astronaut families are known as “satellite kids.” This phenomenon first emerged in the 1980s, with most of them coming from Taiwan and South Korea. While there are no official statistics, it has been estimated that more than 37,000 minors left Taiwan between 1983 to 1993 to attend school in the U.S.

Family units as a whole are often affected by the separation in distance and different cultures. Parents who are overseas may feel guilty and worried for being apart from their children. For the astronaut family parents, physical separation between the parents also affects the marital relationship and relationships with children.

The adjustment process inherent in the immigration experience can be a risk factor in and of itself. There has not been much research examining the protective factors that contribute to the success in the academic lives and careers of these children, who are now adults or young adults. Similarly, limited research examines the effects on the parents’ relationships after being separated for a sustained period of time and if the U.S.-residing parent returns to the country of origin after the children graduate from college and no longer need their supervision.

My current research project on Asian transnational families aims to understand the experiences of individuals who are or were parachute kids or are from astronaut families. The focus of this research explores the risk and protective factors of their psychological well-being, family dynamics and relationships, as well as their success and achievements in their academic and professional lives.

From the interviews conducted so far, several themes have emerged. One of the unexpected themes is the role immigration status plays in the participants’ level of psychological distress. A subgroup of individuals from Asian transnational families are unaccompanied minors who are or were undocumented. In addition to the stresses identified earlier, they also experience high levels of fear and anxiety of being “found out” by the authorities or their peers, which creates further barriers to seeking help when they are distressed.

One common protective factor several interviewees have shared is the experience of hearing other undocumented Asian American students and adults openly sharing their experiences and resources. This reduces both psychological barriers as well as practical barriers to such things as getting a driver’s license, seeking a job or scholarships—help-seeking attitudes and behaviors—and general self-esteem.

The research is ongoing and input is welcome from those who identify themselves as parachute kids or members of an astronaut family. Those who are interested

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Gaining Control: Seven Steps to Teaching Your Kids How to Handle Anxiety

By Brittney Wong

When you’re 10, butterflies tickle the inside of your stomach before a school play. At 20, your hands tremble when your history professor tells you to start your final exam. At 30, your heartbeat quickens before you present a report to your intimidating boss. Although the causes are different at different ages, the result has the same name: anxiety.

“Anxiety is a common experience to all of us, adults or children, on an almost daily basis,” says Maria Hadjicharalambous, a psychologist at Vista Medical Center. It’s a natural human reaction, which originally served an important biological function, she adds. “It’s like an alarm system that’s activated whenever we perceive a possible threat.”

Although it’s completely normal, teaching your children how to cope with it is essential for healthy development. If you start when they’re young, it will become easier for them to handle tough situations when they’re adults and you’re no longer by their side.

Step 1: Look for the signs

The first step is recognizing when your child is anxious so you know when to act. Anxiety is more than just a feeling, it’s a physical sensation, says Dr. George Hu, a clinical psychologist at Beijing United Family Hospital and Clinics. Loss of appetite, sweaty palms, problems sleeping, muscle tension and even an upset stomach can all accompany stressful emotions. Children are especially likely to experience anxiety physically, because “they’re not as able to label their emotions, and they’re not as able to identify it because they’re not as used to it,” Dr. Hu explains. It’s important to take note of any major differences in your child’s behavior. “The key to recognizing anxiety is change,” Dr. Hu says. “If your child’s appetite is normally fine, but there’s a change now, that’s time to pay attention.”

Step 2: Normalize the nerves

Instill in your child that feeling anxious, especially in certain situations, is normal. Dr. Hu recommends saying things like, “It’s normal to feel nervous,” or relate it to your own life by telling kids a story about how you were anxious in a similar situation. For example, if your 4-year-old is scared to go to preschool for the first time, explain how you felt on your first day of school.

One mistake many parents make, with the best intentions, is dismissing their kids’ nerves in an effort to comfort them. For instance, if your child is worried about sharing something for show and tell, some parents might say, “Don’t worry so much, it’s just show and tell.” Instead of comforting them, though, this teaches kids their feelings are invalid or incorrect.

Step 3: Tell them what to expect

Sometimes anxiety stems from fear of the unknown. Perhaps your little one has a new teacher and he’s afraid of going to school, or he’s going on a plane for the first time. To alleviate these fears, “try to give the child an idea of what to expect,” Dr. Hu recommends. “As detailed as you can, explain the schedule, explain what’s going to happen, so that the kid can have some expectations.”

If your child is afraid to go to a new class or winter camp, get in touch with the teacher ahead of time and ask him or her about the schedule. This way, you can tell your child exactly what he’ll be doing and it will ease that feeling of uncertainty.
**Step 4: Look to the past**

For older kids, stress tends to no longer be about concrete objects (like monsters in the closet, dogs or strangers), instead centering on abstract worries (such as unknown social situations, grades or making friends). When they’re anxious about things like homework or new schools, it’s helpful to remind them of how they’ve coped with similar situations in the past. “Build on what they’ve done before,” suggests Aram Sohigian, visiting mental health counselor at Beijing International SOS Clinic.

For example, if they’re afraid they won’t make friends at a new school but they came home from camp this past summer with plenty of new pen pals, point that out and ask, “I remember you made lots of new friends at summer camp—how did you do that?” This way, you can bring attention to “options that they probably used before but didn’t realize it, which gives them power over the situation,” Sohigian says.

**Step 5: Play out the possibilities**

When kids don’t think through all of the possible outcomes of a situation, it makes the situation seem more intimidating and out of their control. That’s why it’s crucial to teach your kids to work through all of the possibilities beforehand. Dr. Hu recommends going through three things: what are you going to do, what are you going to say, how are you going to feel.

For example, if your son is asking a girl out on a date for the first time and he’s nervous about it, ask him to visualize all of the outcomes. What if she says yes? No? Maybe? Help him make a plan to deal with each one. If she says yes, he’ll smile, ask her if she’s free Friday, and get her number. If she says no, he’ll say, “No problem, maybe some other time,” and rush home to bang on his drum set for a while. The plan will ease the pressure.

**Step 6: Help them see the truth**

“Negative and irrational beliefs and thoughts … are significant factors in generating anxiety,” says Nemanja Arandelovic, guidance counselor at Canadian International School of Beijing. If your daughter keeps saying, “I’m stupid, I’ll never get good grades,” remind her of when she aced the physics quiz. Sohigian also suggests watching out for words like “always” and “never”; they’re often used, but rarely true. Help dissolve these illusions, and you’ll help lower their levels of guilt and self-blame.

**Step 7: Praise their bravery**

When your children fight through the fear and perform in the play, ask the girl out, or get through their final exam, praise them, no matter the result. “Point out that you are proud of [their] ability to act in the face of considerable anxiety,” Hadjicharalambous says. This encouragement will make it easier for your kids to face problems in the future instead of hiding from them. “Parents should try to help their children by rewarding brave, non-anxious behavior [and] refuse to engage in a child’s behaviors that allow him or her to avoid the situations,” Arandelovic says.

**Getting professional help**

Anxiety is normal, and a little anxiety can even be a good thing. “It helps us to stay alert, focused and ready to do our best,” Hadjicharalambous says. However, if the stress is prolonged and disrupting your child’s life, it may be a sign he or she would benefit from professional help. For instance, if your teenage daughter is too anxious to go to high school so she starts skipping, or your son is falling asleep in class because he’s not sleeping well, their anxiety is interfering with normal development. Sohigian adds that you may not see it yourself, but if other people are pointing it out to you, that may be a signal as well that it’s time to call a therapist.

The vast majority of the time, though, this isn’t necessary. “At the end of the day, the anxiety was normal to begin with,” Dr. Hu says. “We want to get it to the point where we can still function, where it doesn’t get in the way of what we want to do.”

Coerced Sex Not Uncommon for Young Men, Teenage Boys, Study Finds

March 25, 2014

A large proportion of teenage boys and college men report having been coerced into sex or sexual behavior, according to research published by the American Psychological Association.

A total of 43 percent of high school boys and young college men reported they had an unwanted sexual experience and of those, 95 percent said a female acquaintance was the aggressor, according to a study published online in the APA journal *Psychology of Men and Masculinity*.

“Sexual victimization continues to be a pervasive problem in the United States, but the victimization of men is rarely explored,” said lead author Bryana H. French, PhD, of the University of Missouri. “Our findings can help lead to better prevention by identifying the various types of coercion that men face and by acknowledging women as perpetrators against men.”

Of 284 U.S. high school and college students who responded to a survey about unwanted sexual encounters, 18 percent reported sexual coercion by physical force; 31 percent said they were verbally coerced; 26 percent described unwanted seduction by sexual behaviors; and 7 percent said they were compelled after being given alcohol or drugs, according to the study. Half of the students said they ended up having intercourse, 10 percent reported an attempt to have intercourse and 40 percent said the result was kissing or fondling.

Being coerced into having sexual intercourse was related to risky sexual behaviors and more drinking among the victims, and students who were sexually coerced while drunk or drugged showed significant distress, according to the findings. However, having unwanted sex did not appear to affect the victims’ self-esteem. “It may be the case that sexual coercion by women doesn’t affect males’ self-perceptions in the same way that it does when women are coerced. Instead it may inadvertently be consistent with expectations of masculinity and sexual desire, though more research is needed to better understand this relationship,” French said.

The type and frequency of sexual coercion varied according to the victims’ ethnicity. Asian-American students reported significantly fewer sexual coercion experiences compared with the other groups. Whites reported a significantly greater proportion of coercion that resulted in attempted sex compared to multiracial victims. In the written descriptions, significantly more Latinos reported sexual coercion, at 40 percent compared with 8 percent of Asian-Americans, 19 percent of whites and 22 percent of African-American students.

The findings revealed a need for more scientific study of the thin line between sexual seduction and sexual coercion, the authors wrote.

Article: “Sexual Coercion Context and Psychosocial Correlates Among Diverse Males,” Bryana H. French, PhD, Jasmine D. Tilghman, MEd, and Dominique A. Malebranche, BS, University of Missouri; *Psychology of Men & Masculinity*, online March 2014.

19 LGBT Micro-Aggressions You Hear On a Daily Basis
www.buzzfeed.com/hnigatu/19-lgbt-microaggressions-you-hear-on-a-daily-basis

Kevin Nadal, PhD
In a short video, PhD counseling psychology candidate Brandy Piña-Watson discusses her most rewarding experiences in the counseling psychology doctoral program at Texas A&M University and how it has afforded her opportunities to develop her interests and passions in the field: http://bit.ly/BrandyWatson.

Brandy’s first experience as a counselor was in the master’s program at Texas A&M University Kingsville, where she worked in a community mental health agency serving primarily low-income and ethnic minority families as well as juvenile offenders on probation. After obtaining her master’s degree, she worked for the Youth Services Department at the Behavioral Health Center of Nueces County, where she conducted behavioral skills training with children and their parents. After entering the doctoral program at Texas A&M, she continued to be involved in various counseling settings, including community mental health, high school and alternative schools, university counseling centers, and the county jail.

In the film, Brandy goes on to discuss what initially drew her to the field of psychology. While growing up, she witnessed various people struggle with challenges and social service organizations, and among college students. However, people in general society may not be aware of the term at all. We need to teach more people about microaggressions in order to educate people about how hurtful microaggressions are and how they negatively affect people’s lives. We need people to be mindful of their language and the little things they do and say that harm people’s lives.”

In his research on LGBT microaggressions, Nadal has found: “All of these microaggressions have a significant impact on people’s lives. While some of these experiences may seem brief and harmless, many studies have found that the more people experience microaggressions, the more likely they are to report symptoms of depression, psychological distress, and even physical health issues.”

For more of Nadal’s research, check out his book That’s So Gay! Microaggressions and the Lesbian, Gay, Bisexual, and Transgender Community.

Reprinted from Heben Nigatu, December 9, 2013, 19 LGBT Microaggressions You Hear on a Daily Basis. © 2014 BuzzFeed, Inc. All rights reserved. Used with permission.
Spotlight on Training: Our Summer Intern

September 17, 2013

Jennifer Hsia

This summer, CBAM [UCLA Center for Behavioral and Addiction Medicine] has had the pleasure of hosting 5th-year PhD student Jennifer Hsia as our volunteer intern from the University of South Dakota’s clinical psychology program. Originally from the Los Angeles area, Jennifer chose to volunteer with UCLA CBAM after hearing about us through one of our professional colleagues at NIDA.

Ms. Hsia is a recipient of the Mental Health and Substance Abuse Services Fellowship, funded by SAMHSA and administered by the American Psychological Association’s Minority Fellowship Program. Along with completing coursework focusing on substance use, Ms. Hsia has worked with patients with substance abuse problems in her clinical practica.

This summer, Jennifer has been seeing patients at the UCLA Vine Street Clinic as part a study testing a novel medication for the treatment of methamphetamine dependence. By gaining more experience with this specialized population, Jennifer feels that her work with CBAM will help to inform her clinical work upon returning to South Dakota in the Fall.

Jennifer has also been working with the CBAM team to analyze data for a paper studying the efficacy of integrating behavioral and primary care. Jennifer believes that integrated healthcare is exciting and that the future of health services lies in integrated models of care.

This coming year, Jennifer will work as a clinic assistant at the PSC, or Psychological Services Center, an on-campus outpatient training clinic for USD’s clinical psychology graduate students. Along with helping to train and supervise junior students, Ms. Hsia will conduct interviews to screen potential patients. Ms. Hsia also plans to work on writing journal articles that are based on findings from her thesis and dissertation. Thank you, Jennifer, for all of your hard work, and we wish you luck in your continued success!

Andrew T. Austin-Dailey, MDiv, MS, is the director of the Minority Fellowship Program (MFP) at the American Psychological Association. Before joining the MFP, he completed a master’s degree in psychology at Palo Alto University. He received a BS in economics from the Wharton School of the University of Pennsylvania and an MDiv in pastoral psychology at the Eastern Baptist Theological Seminary in Philadelphia. He has been active in the community through developing counseling, training, and support programs for ethnic minorities for over 20 years.

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Beth Boyd, PhD (2014 TAC chair), is the director of the Psychology Service Center at the University of South Dakota (USD). She is an enrolled member of the Seneca Nation of Indians. Since completing her PhD in 1992, she has taught in the clinical psychology graduate program at USD. She is involved in a number of projects seeking to train culturally competent clinical psychologists and develop culturally responsive mental health services for Native American communities. She is a faculty member in the USD Disaster Mental Health Institute and has responded to disaster and crisis situations, particularly in Native communities.

Dr. Boyd has served on a number of APA governance groups and was the 1998 recipient of the APA Division 12 (Clinical Psychology) Early Career Award for Outstanding Contributions to Professional Clinical Psychology, as well as the 1999 recipient of the Division 45 (Society for the Psychological Study of Ethnic Minority Issues) Distinguished Career Contributions to Service Award. She is the immediate past president of the Society for the Psychological Study of Ethnic Minority Issues.

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Elida M. Bautista, PhD, is an associate clinical professor at the University of California, San Francisco (UCSF) and the director of clinical training for the Child and Adolescent Services’ Multicultural Clinical Training Program. She earned her BA in psychology and Chicano Studies from Claremont McKenna College and her PhD in clinical psychology from the University of Michigan. Dr. Bautista completed her internships at the University Center for the Child and Family (Ann Arbor, MI) and at the University of Michigan Counseling and Psychological Services. In addition, she received a one-year dissertation fellowship from the University of California, Santa Barbara, where she taught psychology in the Chicano Studies Department. She completed her postdoctoral training at UCSF/San Francisco General Hospital Child and Adolescent Services, where she specialized in working with Spanish-speaking Latino clients, primarily victims of crime. Her research, teaching, and clinical work have focused on multicultural mental health issues, primarily issues of class, violence, and Latino acculturation.

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Meet the TAC 2013–2014, continued on page 18
Jesus Felizzola, MD, MHSA, MA, currently serves as the executive director of Neighbors Consejo, a Washington DC-based nonprofit behavioral health care provider for Latinos. He is a research professor in the Department of Psychology at George Washington University and principal investigator of a 5-year HRSA/HAB-funded Special Project of National Significance (SPNS)—Building a Medical Home for HIV Homeless Diagnosed Individuals—in rural North Carolina. Dr. Felizzola has also worked as senior director of research and evaluation and project director of the AIDS Education and Training Center, National Center for HIV Care in Minority Communities at HealthHIV in Washington, DC.

Dr. Felizzola was the director of two NIDA-funded RCTs in the Department of Psychiatry and Behavioral Sciences at Howard University College of Medicine in Washington, DC. During his tenure at Howard, he also served as associate director of the NIH-funded Research Program in the Epidemiology and Prevention of Drug Abuse and AIDS, project director of the Minority Institutions’ Drug Abuse Research Development Program, and cultural competency manager for Howard’s National Minority AIDS Education and Training Center. He served as principal investigator of a HRSA/SPNS outreach demonstration project in Miami, FL, and associate director of the NIH-funded Latino HIV/AIDS Behavioral Sciences Center at Florida International University.

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Paul Leung, PhD, is a professor at the University of North Texas. He has held academic and administrative appointments at Deakin University (Melbourne, Australia), the University of Illinois at Urbana-Champaign, the University of North Carolina at Chapel Hill, and the University of Arizona. His area of interest is disability and rehabilitation of underserved populations. He has written extensively in this area and has served as an advocate of eliminating disparities related to minorities and disability. Dr. Leung is a past president of Division 22 (Rehabilitation Psychology) and was honored with their Lifetime Achievement Award in 2008. He has served on APA’s Committee on Disability Issues in Psychology and on the Committee on APA Division Relations. He has been an active site reviewer and site reviewer chair for accreditation visits.

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Jeanne E. Manese, PhD, is director of the Counseling Center at the University of California, Irvine. She received her doctoral degree from the University of Maryland, College Park, with a specialization in counseling psychology. She is a fellow of APA Divisions 17 and 45. Dr. Manese has published numerous articles and chapters related to training and practice, with a focus on multicultural competency and social justice. She is currently conducting research and implementing programs focused on strength-based interventions for academically at-risk populations. She has practiced around the world with an education abroad program and is interested in the global application of counseling psychology.

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Micah L. McCreary, MDiv, PhD, LCP, is a tenured associate professor of psychology at Virginia Commonwealth University, Richmond, VA. Dr. McCreary earned his BSE in engineering from the University of Michigan and master of divinity degree in pastoral theology from Virginia Union University, School of
Theology, in Richmond. He earned his MS and PhD in counseling psychology from Virginia Commonwealth University (VCU) and completed his clinical internship at the Philadelphia Child Guidance Clinic, Children’s Hospital, in Philadelphia. He is an alumnus of the APA Minority Fellow Program and the American Council on Education Fellows Program. He has also worked as the assistant vice provost for diversity, the coordinator of the Quality Enhancement Plan for VCU, and co-director of the counseling psychology program at VCU. As an academician, Dr. McCreary’s current teaching, research, and clinical focuses are in the areas of family psychology, family counseling, and faith-based organizations. He and his research team are also conducting and evaluating interventions with adolescents, parents, and families designed to reduce and prevent family violence while promoting prosocial skills. He has developed a family/parenting intervention called the I Must Pause Pray Analyze Chill and Take Action Program. Currently, he teaches introduction to psychology, the psychology of African Americans, multicultural counseling, child psychology, and family therapy. As a licensed clinical psychologist, he serves as a consultant and trainer and lectures to the Richmond community. As a joint-pastor with his wife, he works very closely with the seminary and religious community in various capacities.

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Veronique Thompson, PhD, is a licensed clinical psychologist and tenured faculty member of the Wright Institute in Berkeley, CA. She is also the director of clinical training at the Center for Family Counseling in East Oakland, where she conducts training for the counseling staff that provides family therapy and community-based prevention programs. In addition, she maintains a small independent practice. Her advanced professional training has been in narrative therapy and social justice therapy. As an African American woman, Dr. Thompson’s personal experience complements her academic training in clinical psychology. Her practice of psychology is enriched by dual dimensions of culturally informed and gender-related perspectives.

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Aileen Torres, PhD, is the associate director of clinical services/internship director at the Youth Consultation Services Institute for Infant and Preschool Mental Health. She is an instructor for Rutgers University and a licensed clinical psychologist in New Jersey and Puerto Rico. Her private practice specialization is in psychological testing assessments, mainly for immigration purposes. These evaluations are related to asylum, human trafficking, torture, family separation, and domestic violence. Currently the president-elect of the Latino Psychological Association of New Jersey (LPANJ), in 2011 she represented LPANJ on the Advisory Group on Child Abuse and Neglect Mental Health Evaluation, part of the New Jersey Department of Children and Families. She was formerly the director of the grant-funded Bilingual Integrative Trauma Treatment Program at Newark Beth Israel Medical Center. Dr. Torres attended graduate school at Teacher’s College, Columbia University, and Carlos Albizu University in San Juan, Puerto Rico. She also attended the marriage and family program at Seton Hall University.

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Meet the TAC, continued on page 20
Janeece Warfield, PsyD, is an associate professor in the School of Professional Psychology at Wright State University, director of the Center for Child & Adolescent Violence Prevention, and principal investigator for the Parents Early Childhood Education—Positive Action Choices Training Program. She completed an APA-approved postdoctoral fellowship in pediatric psychology with a specialization in working with chronic illness, infants, and developmental disabilities at Georgetown University Hospital. As a pediatric psychologist, she specializes in assessment of and therapeutic services for infants and children, developmental disabilities, and children with chronic illness. She also has expertise in play therapy, violence prevention, trauma, and multicultural/diversity training, which are her teaching and private practice interests. She has leadership and membership experience in professional organizations such as the Association of Play Therapy, the Ohio Association of Infant Mental Health, the National Black Family Coalition, and APA’s Leadership Institute for Women in Psychology and ACT and Effective Prevention Provider programs.

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Internships of MFP FELLOWS

Congratulations to our MFP fellows who are going on internship in 2014–2015!

Anjali Alimchandani: VA Greater Los Angeles Health Care System—Sepulveda Ambulatory Care Center

Jeannie Celestial: VA Pacific Islands Health Care System, Honolulu, HI

Candice Crowell: Emory University CAPS

Mirella Diaz-Santos: University of Florida—Neuropsychology track

Vanessa Durand: Louisiana School Psychology Internship Consortium

Pura Garcia-Serrablo: Long Island Jewish Medical Center/Zucker Hillside

Daniel Gaztambide: St. Luke’s-Roosevelt Hospital Center

Jennifer Hsia: VA Puget Sound—American Lake, WA

Gihane Jeremie-Brink: University of Illinois Urbana-Champaign Counseling Center

Oswaldo Moreno: Center for Multicultural Training in Psychology, Boston Medical Center/Boston University School of Medicine

J. Alexis Ortiz: VA Palo Alto, CA

Reginald Riggins: VA Atlanta, GA

Melissa Tehee: University of California San Diego/VA Med Consortium

Michele Vella: St. Luke’s Roosevelt Hospital Center
Ana Abraído-Lanza, PhD, was named a Provost Leadership Fellow, Columbia University.

**Publications**


Kiara Alvarez, PhD, is completing her predoctoral internship year at Boston Children’s Hospital/Harvard Medical School.

**Publications**


Hortensia Amaro, PhD, was promoted to associate editor of the *American Journal of Public Health*. She is a member of Research!America, the Institute of Medicine, and the Committee on the Assessment of Resiliency and Prevention Programs for Mental and Behavioral Health in Service Members and their Families, 2013–2014. She was awarded the 2014 USC Professors of Color Recognition Award.

**Publications**


Mona Amer, PhD, was promoted to associate professor with tenure at the American University in Cairo.

**Publications**


Cheryl Anne Boyce, PhD

Publications

Danice Brown, PhD, was granted tenure and promoted to associate professor at Southern Illinois University Edwardsville and became a licensed clinical psychologist in Missouri. She was also part of the APA Society of Counseling Psychology Leadership Academy.

Publications


Ashley Butler-Hines, PhD, was selected as a 2013–2015, 2011–2015 recipient of the NIH Loan Repayment Program for health disparities research.

Publications


Wing Chan, PhD

Publications


Ashley Butler-Hines, PhD, was selected as a 2013–2015, 2011–2015 recipient of the NIH Loan Repayment Program for health disparities research.

Publications


Wing Chan, PhD

Publications

Grants

Publications

Grants
Co-Investigator, Perspective From Indigenous Lay Counselors Working With Youth Rescued From Trafficking and Sexual Exploitation in Cambodia, Azusa Pacific University Faculty Resource Committee Grant, 2013-2014, $10,000.

Jens Chang, PhD, is now an assistant professor at Azusa Pacific University and became a licensed psychologist in California in Jan. 2013.

Karen Cheng, PhD, gave birth to Ezra Michael Cheng Ramos on October 17, 2013.

Publications


Le Ondra Clark Harvey, PhD, was appointed by the APA Board of Directors to the APA Committee on Early Career Psychologists (CECP) as the State, Provincial, and Territorial Associations representative. In addition, she was selected as a Nehemiah Emerging Leaders Program (NELP) fellow. NELP aims to highlight diverse emerging leaders throughout the Sacramento, CA, region. She was appointed by the Sacramento County Board of Supervisors to the Children’s Coalition as their child and family health representative. She was selected as the CECP representative to APA’s Alliance of National Psychological Associations for Racial and Ethnic Equity. She was also nominated for the Unsung Hero Award, given by California Rep. Doris Matsui, Sen. Darrell Steinberg, and Assemblymember Roger Dickinson in recognition of strong women leaders who have made a difference in the Sacramento community. She was the 2013 recipient of Division 45’s Emerging Professional Contributions to Service Award. This award is given in recognition of an individual who has made outstanding service contributions in the promotion of ethnic minority issues within 10 years of graduation.

Monica Clement, PhD, joined the Department of Veterans Affairs New Jersey Healthcare System Extended Care Service in April 2014 as a full-time, practicing clinical neuropsychologist. She and her husband (Newton Clement) announce the birth of their second child, Anthony Newton Clement, born December 8, 2013.

Bridgid Conn attended her PhD commencement May 2014. Her degree conferral will be in September 2014.

Publications


Elizabeth Cordero, PhD, was selected as “2014 Most Influential Faculty” at San Diego State University, Imperial Valley in May 2014. She was also tenured and promoted to associate professor beginning fall 2013 at San Diego State University, Imperial Valley.

Publications

Erika Dawkins, PhD, graduated from Widener University on May 16, 2014, with a doctoral degree in clinical psychology and a master of education in human sexuality. She also recently passed the school psychology certification exam and will be submitting paperwork to become a certified school psychologist.

News About Fellows, continued on page 24
Miraj Desai, PhD, was awarded the Robert Wood Johnson Foundation New Connections Program, APA Convention Support.

**Publications**


Mylien Duong, PhD, was awarded the 2013 APA Early Career Convention Travel Award.

**Publications**


Schwartz, D., Kelly, B. M., & Duong, M. T. (2013). Do academically-engaged adolescents experience social sanctions from the peer group?

Elena Flores, PhD, was promoted to associate dean of Academic Affairs and Faculty Development, School of Education, University of San Francisco. She was awarded the Most Influential Women in Bay Area Business Award by the San Francisco Business Times; her profile appeared in the May 2014 issue.

**Publications**


Dawn Foster, PhD, is currently a postdoctoral fellow at Harvard and cochair of Translating Psychological Science for the Public, one of 2014 APA President Nadine Kaslow’s committees.

**Publications**


NEWS ABOUT FELLOWS

Bryana French, PhD, received the University of Missouri College of Education Graduate Instructor of the Year award in 2014.

**Publications**


**Grants**


Ayorkor Gaba, PsyD, has been selected as an APA-appointed representative at the United Nations. Representatives collaborate with other NGO representatives and members of APA offices and governance to identify issues, organize programs, and draft statements that bring psychological science and a psychological perspective to bear on global policies and programs. Representatives also foster dialogue and information exchange between psychologists and APA and the U.N.

Daniel J. Gaztambide received the Multiculturalism & Psychoanalysis Award from the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis. He presented his work “A Preferential Option for the Repressed: Psychoanalysis Through the Eyes of Liberation Theology” when he received the award.

Valerie Gifford, PhD, was promoted to assistant professor in the School of Education’s graduate program in counseling at the University of Alaska Fairbanks.

Cheryl Grills, PhD, was promoted to co-executive director of the Los Angeles County Blue Ribbon Commission on Child Protection and was awarded the President’s Volunteer Service Award in 2013.

**Publications**


Naomi Hall-Byers, PhD, was promoted to associate professor (tenured) in the Department of Psychological Sciences at Winston-Salem State University, Winston-Salem, NC, as of fall 2013. She was selected to participate in the Health Disparities Loan Repayment Program of the National Center on Minority Health and Health Disparities. Married in 2011, she gave birth to a Saige Amariah Byers on July 17, 2013.

**Publications**

Naomi Hall-Byers, PhD,
continued from page 25


Brittany Hall-Clark, PhD, completed her two-year postdoctoral program while attending the MFP Psychology Summer Institute. In September, she was promoted to assistant professor at the University of Texas Health Science Center at San Antonio. At the 47th Annual Convention of the Association of Behavioral and Cognitive Therapies in November 2013, her poster, “An Examination of PTSD and Protective Factors in African American Active Duty U.S. Army Soldiers,” which was presented as part of the African Americans Special Interest Group, received a “Best Poster” award.

Helen Hsu, PsyD
Grants
Applied Service Grant, Bridges to Behavioral Health- Mandarin Parenting Workshops, funded by the Kaiser Permanente Community Grants Program of Northern California, January 2014–September 2014, $30,000.

George Hu, PsyD, a clinical psychologist at Beijing United Family Hospital & Clinics, was promoted to assistant director of the Center for Cognitive Behavioral Therapy there. He is also a member of the clinical faculty at Palo Alto University.

Grace Kim, PhD, has been promoted to associate professor and obtained tenure at Wheelock College, where she was nominated for the Cynthia Longfellow Teaching Award.

Shahana Koslofsky, PhD, was appointed director of the interprofessional competence course in the College of Health Professions at Pacific University and selected as the diversity delegate to the APA convention for 2012-2014.

Grants
TARGET (Teaching Advancement and Research Grant in Educational Technology) grant from Pacific University for the interprofessional competence course, $2,000.

Elizabeth Lee, PhD, was recently hired as an associate director of analytics and research in the Office of Organizational Effectiveness at Central Washington University in Ellensburg, WA.

Frederick Leong, PhD, was awarded the Lifetime Achievement Award from the Asian American Psychological Association and the Distinguished Service to Psychological Science Award from APA.

Publications

Jordan Lewis, PhD, accepted an assistant professor, tenure-track position at the University of Washington School of Social Work and the Indigenous Wellness Research Institute in Seattle, WA. He was certified as a professional gerontologist in August 2013.
**Cindy Liu, PhD**

**Publications**


**Grants**

Principal Investigator, National Science Foundation (NSF-BCS), The Role of Facial Physiognomy in Stereotypic Trait Inference (BCS1226143), 2012–2015, $187,000.


**Michaela McLaughlin** was recently promoted to be an advanced practicum counselor at Macalester College for 2013–2014.

**Kimberly Miller, PhD** has focused all of her time on expanding her organizational consulting, coaching and training business (Kimberly A. Miller & Associates) and has been enjoying a thriving practice since June 2013.

**Jeanne Manese, PhD** is director of the University of California, Irvine, Counseling Center, which received the 2013 Suinn Minority Achievement Award for excellence in the recruitment, training and graduation of ethnic minority students in psychology.

**Jeanne Manese** is the University of California, Irvine, Counseling Center, which received the 2013 Suinn Minority Achievement Award for excellence in the recruitment, training and graduation of ethnic minority students in psychology.
NEWS ABOUT FELLOWS

**Glen Milstein, PhD**, received the Outstanding Mentoring Award for Extraordinary Commitment—the Student/Faculty Bond from the City College of the City University of New York, 2004. He has been a doctoral faculty member at the Graduate Center of the City University of New York since 2003. He was promoted to associate professor of psychology with tenure (2010 to present).

**Publications**


**Grants**
Principal Investigator, Veterans Coming Home, Chaplaincy and Mental Health, Department of Veteran Affairs (PRSY No. 76382-00-01; GS-07F0049U-PO# VA558-C00870), 2011–2013, $20,000.

Fellowship, “Culture Ontogeny: Human Identity Development and Immigrant Acculturation, One Brain at a Time,” Committee for Interdisciplinary Science Studies Mid-Career Fellowship, Andrew W. Mellon Foundation, Graduate Center of the City University of New York, 2012–2013, $12,000.

Principal Investigator, Coming Home: A Research Intervention to Facilitate Veterans’ Reintegration within their Communities, Colin Powell Center for Policy Studies, City College of New York Community-Based Participatory Research Grant Program, 2011–2013, $4,000.

**Jeffery Mio, PhD**, was elected a fellow of APA’s Division 9 (Society for Psychological Study of Social Issues).

**Publications**


**Della Mosley** will be serving as a counselor at the Gay and Lesbian Services Organization in Lexington, KY, beginning in August 2014.

**Kevin Nadal, PhD**, married R.J. Mendoza on February 16, 2014, in New York City.

**Publications**


**Sunnie Okazaki, PhD**

**Grants**

**Andrea Omidy, PhD**

**Publications**
Brandy Piña-Watson will receive a PhD in counseling psychology in August 2014 from Texas A&M University and will begin a tenure-track position there as assistant professor in the counseling psychology program (Department of Psychology). She was highlighted by the College of Education and Human Development at Texas A&M to represent the college during a fall 2014 recruitment campaign. (For a brief synopsis, see pages 15–16.)

Publications


Randolph Potts, PhD

Publications

Holly Ramsawh, PhD

Publications


Tazzarae Spivey-Mooring, PhD, accepted a position as inpatient psychologist for the U.S. Department of Veterans Affairs, Perry Point VA Medical Center. She gave birth to Avianna Joelle Mooring on February 14, 2013.

Publications

Elizabeth Terrazas-Carrillo, PhD, has accepted a position as assistant professor of counseling psychology at Texas A&M International University, Laredo, TX, starting September 2014. In 2013, she received the APA Division 43 Student Research Award and the Division 17 Student Travel Award; the Dr. Boleslaus Kurpiweski Scholarshi Award, University of Oklahoma; and Dover Air Force Base Officers’ Spouses Club Spouse Scholarship Award.

Publications
**NEWS ABOUT FELLOWS**

**Quyen Tiet, PhD**

**Publications**


**Grants**
Principal Investigator, Substance Use Disorder Treatment for Dually Diagnosed Patients in PTSD Outpatient Programs, Health Services Research and Development Service (SUD QUERI), Office of Research and Development, Department of Veterans Affairs, 2014–2015, $99,938.

Co-Investigator, Access to PTSD Care Among Veterans With and Without Substance Use Diagnoses, Health Services Research and Development Service (SUD QUERI), Office of Research and Development, Department of Veterans Affairs, 2013–2014, $100,000.

Co-Investigator, Development of a Substance Abuse Treatment App for Veterans With PTSD, National Center for PTSD, Dissemination and Training Division, Menlo Park, CA, 2013–2014, $40,000

**Yuying Tsong, PhD**

**Publications**


**Grants**
Principal Investigator, Faculty Mentorship of Undergraduate and Creative Activities Grant, National Center for PTSD, Dissemination and Training Division, Menlo Park, CA, 2013–2014, $40,000.

Principal Investigator, Older Chinese American Immigrants’ Help-Seeking Attitudes and Behaviors, CSU Fullerton Faculty Development Center, January 2014–December 2014.

**Jessica Turral** was the inaugural recipient of the Young Professionals Award American Red Cross of Chesapeake Hometown Hero.

**Shannen Vong**

**Publications**

**Grants**
Tak Yoshino Scholarship-Dean’s Scholarship, Alliant International University, Los Angeles, 2013–2014, $200.

**Courtney Warren, PhD**

received tenure at the University of Nevada Las Vegas (UNLV) in 2012 but formally retired from academia in 2014 to pursue a career that would allow her more time with her family and more interaction with the general public. She started Choose Honesty, LLC, as a platform to use psychological research and clinical observations to help the public live more fulfilling lives by confronting their self-deception. For more information, see her new book, *Lies We Tell Ourselves: The Psychology of Self-Deception*. She also gave a TEDx talk at UNLV on April 11, 2014, called “Honesty Liars: The Psychology of Self-Deception.” It is available for viewing on her website (www.chooseshonesty.com) and other media outlets. She is now a licensed psychologist in Nevada.
**Publications**


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**Kristin Williams-Washington, PsyD** assumed responsibility as the acting director of evaluation in December 2013 at the Child, Adolescent and Family Branch of the Center for Mental Health Services at SAMHSA. She was also a recipient of the Army Commendation Medal in May 2013–2014 and the CMHS Team! Hope Award: “demonstrating optimism, perseverance, solutions and excellence.” She welcomed a second child in 2014.

**Publications**


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**Henry Wynne**

**Publications**

This year marks the 40th anniversary of the Minority Fellowship Program. The program was founded by Dalmas Taylor, PhD, in 1974 and was led by James M. Jones, PhD, for over 25 years. Dr. Kim Nickerson then took the helm until he handed off the reigns to its current director, Andrew T. Austin-Dailey, in 2006.

Please join us at the APA Convention in Washington, DC, for the 40th Anniversary Kickoff Celebration!

Friday, August 8
6:00–7:00 p.m.
Renaissance Washington DC Hotel, Renaissance Ballroom West

We’d love to hear your ideas about ways to celebrate this event throughout the year. For example, one idea is to have MFP fellows in various parts of the country sponsor programs at next year’s regional conventions, such as at the Western, Eastern, Midwestern, and Southeastern Psychological Association conventions. That way, we can get the word out about MFP’s success and encourage students to consider applying for a fellowship. We’re open to other ideas; send your suggestions to the 40th Anniversary Committee/Dr. Kyra Kissam: kkissam@apa.org

See you in Washington, DC, for our kickoff celebration!

Congratulations to the following MFP fellows for their achievements in APA affiliate organizations!

Anthony L. Chambers, PhD
Division 43: Society for Family Psychology
President-Elect

Le Ondra Clark Harvey, PhD
2013 Division 45: Society for the Psychological Study of Culture, Ethnicity and Race, Emerging Professional Contributions to Service Award

Miraj Desai, PhD
Robert Wood Johnson Foundation New Connections Program, APA Convention Support

Mylien Duong, PhD
2013 Early Career APA Convention Travel Award

Bryana H. French, PhD
Division 51: Society for the Psychological Study of Men and Masculinity
Member-at-Large, Ethnic Minority

Jeanne Manese, PhD
UCI Counseling Center, 2013 Suinn Minority Achievement Award for excellence in the recruitment, training, and graduation of ethnic minority students in psychology

Jeffery Mio, PhD
Elected a fellow of Division 9: Society for Psychological Study of Social Issues

Elizabeth Terrazas-Carrillo, PhD
2013 Division 43: Society of Family Psychology Student Research Award and Division 17: Society of Counseling Psychology Student Travel Award

Join the Celebration—APA’S MINORITY FELLOWSHIP PROGRAM TURNS 40!
On the second day of the Minority Fellowship Program’s (MFP) Professional Development Workshop at the 2013 APA convention, the new MFP fellows visited the Department of Native Hawaiian Health at the John A. Burns School of Medicine at the University of Hawai‘i at Mānoa and an affiliated community health center, Kūlana Hawai‘i, in Honolulu. The Department of Native Hawaiian Health chair is our very own alumnus Dr. Keawe‘aimoku Kaholokula. The focus of the department is to develop models of health care that incorporate traditional health methods and translate science-based practices from a traditional healing lens. Kūlana Hawai‘i is one of the sites for I Ola Lāhui: Rural Hawai‘i Behavioral Health (a statewide organization that provides integrated behavioral health services to promote overall health and well-being for Hawaiian communities), and its main areas of focus are on healthy living and weight loss.

The visit started with a very nice lunch at Kūlia Grill, a student-run cafeteria at the university. We were then greeted by Dr. Kaholokula’s graduate student Pua Coen, who led a very descriptive tour of the healing garden on campus. She detailed all of the healing and medicinal properties of various indigenous plants, along with the different rituals associated with the plants. The fellows were fascinated by this tour and saw the connection between nondualistic traditional healing methods and evidence-based integrated health practices.

The second part of the visit was led by Dr. Robin E.S. Miyamoto, who is the director for training at I Ola Lāhui and works closely with Dr. Kaholokula at the medical school. She discussed the different patterns of health disparities in various Hawaiian communities across the state and how I Ola Lāhui’s outreach and treatment interventions are addressing the health and well-being of these communities. Dr. Miyamoto also encouraged the fellows to explore their recently APA-accredited internship program and their post-doctoral fellowship.

The visit ended with Dr. Kaholokula greeting the fellows, learning more about their interests, and answering questions regarding the collaboration between the medical school and the community center. Fellows were very impressed with how the model of health and well-being was driven by concepts of behavioral health and integrated care (rather than the typical medical model) in a medical setting. One of the fellows commented that it was “inspiring to see an alum from the [MFP] program creating such an impactful and culturally sensitive training program.” The fellows left the visit with a greater understanding of the meaning of I Ola Lāhui—“So that people will live and thrive.”

Kūlana Hawai‘i staff with MFP staff and fellows at the entrance to the health center.
### Useful Resources

**Emerging Scholars Interdisciplinary Network (ESIN)**
An interdisciplinary setting for information about research and career development resources to early career (maximum of 8 years postgraduate school), nontenured social, behavioral, and natural scientists of color.

[http://emergingscholars.net](http://emergingscholars.net)

**JustGarciaHill (JGH)**
A place where minority scientists can stay informed, create community, and make connections.

[http://justgarciahill.org](http://justgarciahill.org)

**National Postdoctoral Association (NPA)**
The NPA provides a national voice for postdoctoral scholars.

[www.nationalpostdoc.org](http://www.nationalpostdoc.org)

### Useful Websites

**www.apa.org/about/awards/index.aspx**
This APA website lists possible funding resources for graduation students.

**www.apa.org/careers/early-career/index.aspx**
APA’s website for early career psychologists contains links to career information, licensure, an early career listserv, funding resources, ways to further your education, and other information.

**www.finaid.org**
The SmartStudent Guide™ to Financial Aid (Scholarships).

**www.nas.edu**
The National Academies website provides information on fellowship and postdoctoral training opportunities (on the NAS site, click on Fellowships & Postdocs).

**www.drugabuse.gov**
National Institute on Drug Abuse (NIDA).

**www.nimh.nih.gov**
National Institute of Mental Health.

**www.samhsa.gov**
Substance Abuse and Mental Health Services Administration.
The Minority Fellowship Program in Mental Health and Substance Abuse Services received 168 predoctoral and 6 postdoctoral applications this past January. Each application underwent intensive reviews to evaluate the applicant’s potential for a promising and productive career in behavioral health services. Fellows are chosen from among national applicants to receive financial support for up to 3 years of funding. Fellows also gain access to professional networks and lifelong support systems.

The staff and MFP Training Advisory Committee would like to congratulate our newly appointed fellows for the 2014–2015 academic year. We hope their experience during their time with MFP is richly rewarding.

CONGRATULATIONS,
NEW FELLOWS!

Mental Health and Substance Abuse Services Fellows (2014)

Amanda Chiapa received her master’s in developmental psychology from San Diego State University. She is now working on her doctorate degree in clinical psychology at Arizona State University. Her main area of interest is underserved populations, with a particular focus on family interventions and substance abuse issues.

Morgan Conley is currently pursuing her PhD in counseling psychology at the University of Nebraska–Lincoln, where she also received her master’s in counseling psychology. Her areas of interest are college health and well-being, multiculturalism and diversity issues, first-generation students, eating disorders and body image, anxiety, and depression.

Michael Covone received both his MPH and MSW from the University of Hawaii in Manoa. He is currently pursuing his PhD in clinical psychology at the University of Alaska in Anchorage. His is mainly interested in health psychology, with a focus on suicide, substance abuse, and sexually transmitted disease prevention efforts with indigenous communities. He is also specializing in acceptance and commitment therapy (ACT).

Lamarra Currie earned her master’s in education in professional counseling from the University of Georgia. She is currently in Ball State University’s PhD program in counseling psychology. She is interested in issues relating to African Americans, at-risk youth and families, and adult offenders. She would also like to explore areas relating college students of color and sport psychology psychological assessment.

Ann Douglas earned her MA in counselor education at the University of Montana, where she is also pursuing her doctoral training in clinical psychology. She is in the child and family track and wants to work with American Indian communities.

Miatta Echetebu received her BA in psychology from Duke University and is pursuing her doctorate in clinical community psychology at the University of Illinois at Urbana–Champaign. She is interested in looking at culturally competent juvenile justice interventions and the impacts of policy and racial disparity in social systems.

Alicia Ibaraki earned her BA in psychology from Pomona College and is pursuing her PhD in clinical psychology at the University of Oregon. She is interested in factors influencing mental health care utilization and treatment outcomes in ethnic minority populations, particularly Asian Americans.

New Fellows,
continued on page 36
Skyler Jackson received his BA in psychology from Stanford University and is now in the doctoral program in counseling psychology at the University Maryland at College Park. His areas of focus are individual psychotherapy, group interventions, social stigma, identity development, and intersecting identities. He is also interested in minority stress, health outcomes, diversity training, and cultural competence.

Kahanaaloha Kuikahi received her BA in psychology at the University of San Diego. She is currently at Palo Alto University, pursuing her PhD in clinical psychology. She is mainly interested child and family dynamics in Asian American and Native Hawaiian Pacific Islander populations.

Caroline Luong-Tran recently completed her PhD in clinical psychology at the George Washington University and will begin her postdoctoral training at the Children’s National Health System in Washington, DC. Her main areas of focus are child clinical psychology, neuropsychology, and nonprofit management.

Fanny Ng earned her BA in psychology from Stony Brook University and is finishing up her PhD in clinical psychology at the University of Massachusetts at Boston. Her areas of focus are race and culture, racial and ethnic identity development, racism-related stress, racial empowerment, and Asian American women’s leadership.

Jessica Spigner received her BA in psychology from Stanford University and is completing her PhD in clinical psychology at the University of Florida. She is interested in clinical child psychology and is also pursuing a certification in public health, specializing in management and policy.

Elizabeth Thomas received her MA in psychology from Stephen F. Austin State University and is now in the doctoral program in counseling psychology at the University of Tennessee, Knoxville. Her areas of interest are emotion regulation and trauma outcomes of posttraumatic growth and posttraumatic stress.

Bianca Villalobos received her BA in psychology at California State University, Channel Islands. She is now in the clinical psychology PhD program at University of Arkansas. Her areas of focus are integrated behavioral health care, Latino mental health, cultural values, help giving, and mental health service utilization.

Congratulations to the 2014 MFP Award Winners!

Early Career Award for Distinguished Contributions

Nadine Nakamura, PhD
Department of Psychology
University of La Verne, La Verne, CA

Dalmas A. Taylor Award for Distinguished Contributions

Sumie Okazaki, PhD
Department of Applied Psychology
NYU Steinhardt School, New York, NY

James M. Jones Lifetime Achievement Award

Donelda Cook, PhD
Associate Vice President for Student Development and Director, Counseling Center, Loyola College–Baltimore
By Kyra Kissam, PhD

The MFP hosted its 11th Annual Psychology Summer Institute (PSI) July 14–20, 2013, at the American Psychological Association in Washington, DC. PSI provides educational, professional development, and mentoring experiences to advanced doctoral students of psychology and psychologists who are in the early stage of their careers. Participants work toward developing a grant proposal, postdoctoral fellowship, dissertation, treatment program, publication, or program evaluation project. All projects focus on issues affecting ethnic minority communities. Participants receive one-on-one mentoring on their projects and attend seminars on selected topics such as grant writing, publishing, and specific areas of research or service delivery.

“PSI is one of the most meaningful experiences of my doctoral training journey.” — PSI attendee

For more information, please visit www.apa.org/pi/mfp/psychology/institute/index.aspx.

PSI 2013 Participants

Rachelle Barnes, PhD
Winston-Salem State University
Racial Microaggressions in Cross-Racial Clinical Supervision: A Multidisciplinary Study

Alabi Basirat, PhD
University of California, Los Angeles
Ethnic Identity, Ethnic Socialization, and Academic Achievement Among African American and Nigerian American Youth

Brigitte Beale
Wright State University
Making Pediatric Obesity Intervention Developmentally and Culturally Appropriate for African American and Latino Adolescents

Lauren Berger
University of California, Davis
Therapist Factors That Predict Treatment Outcomes Among Ethnic Minority Clients

PSI Participants, continued on page 38
Catherine Bitney, PhD
Texas State University
Broaching Racial Difference Between African American Clients and White Counselors: Racial Identity Attitudes and Therapy Process

Christina Campbell, PhD
Yale University
Understanding the Impact of Neighborhood Ecology on the Prevention of Delinquency and Substance Use Among Juvenile Offenders

Collette Chapman-Hilliard
University of Texas, Austin
Measuring Black Consciousness and Its Relationship to Empowerment and Self-Worth

Casandra Clark
Ponce School of Medicine and Health Sciences
Relation Between Relapse Styles and Levels of Impulsivity in Substance Dependence Subjects Among a Sample of Two Rehabilitation Centers in San Juan, Puerto Rico

Bridgid Conn
Suffolk University
Development and Evaluation of a Method for Assessing Adolescents’ Attitudes and Beliefs Regarding Prescription Medication

Mesmin Destin, PhD
Northwestern University
An Intervention to Develop Growth Mindsets Towards Social Class and Improve Achievement and Health of Racial Minority Adolescents

Mirella Diaz-Santos
Boston University
A Cultural Competence Model in Clinical Neuropsychology

Kristin Dukes, PhD
Simmons College
Toward HIV/AIDS and STI Prevention Among African American Women: Examining Underlying Attitudes About Sexuality and Associated Behaviors

Dawn Foster, PhD
MD Anderson Cancer Center
A Smartphone Intervention to Reduce Concurrent Cigarette and Alcohol Use Among Young Adults

Brittany Hall-Clark, PhD
University of Texas Health Science Center at San Antonio
The Development of a Culturally Sensitive Model of Risk and Resiliency for African American Military Families

George Hu, PsyD
Portia Bell Hume Behavioral Health and Training Center

Won-Fong Lau
University of California, Santa Barbara
Defining Parents’ Behavioral Involvement in Children’s Education: A Similar Phenomenon for English- and Spanish-Speaking Parents

Ryan Lei
Northwestern University
Egalitarianism, for Some or for All: Egalitarian Goal Activation and Stereotype Inhibition in a Multiple Social Categorization Context

Huijun Li, PhD
Florida A&M University
Enhance Mental Health Literacy Among African American Young Adults: A Critical Step to Reduce Mental Health Disparities

Angelica Lopez
University of California, Santa Cruz
Cultural Differences in Children’s Attentive Helping

Maria del Mar Rivera Castro, PhD
School Street Counseling Institute/Behavioral Health Network
A Family Therapy Training Curriculum for the Multicultural Predoctoral Internship Program of Massachusetts

Dionne Stephens, PhD
Florida International University
Identifying Intimate Partner Relationship Scripts to Reduce Verbal Sexual Coercion Among Hispanic Emerging Adults

Jasmine Tilghman, PhD
University of Missouri-Columbia
Culturally Validating Hardiness With Black College Students: A Mixed-Methods Study

Yuying Tsong, PhD
California State University, Fullerton
Culturally Specific Risk and Protective Factors of Eating Disordered Behaviors and Attitudes Among Asian American Women and Men

Shellae Versey, PhD
Rutgers University
Stress and Coping Among Formal and Informal Caregivers
Each year, the MFP draws from our talented network of alumni to form the MFP Initial Review Committee (IRC), a group responsible for the important task of reviewing hundreds of applications. In 2014, the following alumni provided valuable assistance and expertise in this process.

Edna Acosta-Perez  
University of Puerto Rico

William Davis  
Alvernia University

Deborah Jones-Saumty  
Retired

Monica Baskin  
University of Alabama at Birmingham

Tiara Dillworth  
University of Washington

Shanta Kanukollu  
Lake County Psychological Services, 19th Judicial Circuit

Samantha Beauchman  
Sanford Health

Katrina Domingo  
Kaiser Permanente

Chisina Kapungu  
University of Illinois at Chicago

Vanessa Bing  
City University of New York

Linda EagleHeart Thomas  
University of Montana

Abesie Kelly  
Social Security Administration

Jessica Brown  
Virginia Commonwealth University

Crystal Evans  
Blackfeet Family Wellness Center

Grace Kim  
Wheelock College

Gerard Bryant  
John Jay College of Criminal Justice

Ayorkor Gaba  
Rutgers University

Eric Kohatsu  
California State University, Los Angeles

Donna Castaneda  
San Diego State University–Imperial Valley

Debra Gillum  
San Diego VA Healthcare System

Jason Lawrence  
University of Massachusetts Lowell

Zoua Chang  
Hamm Clinic

Robyn Gobiln  
San Diego VA Healthcare System

Cindy Liu  
Harvard Medical School

Uraina Clark  
Icahn School of Medicine at Mount Sinai

Cheon Graham  
Randolph County Schools

Wandamaria Lopez  
Veterans Administration

Michele Cooley-Strickland  
UCLA

Naomi Hall-Byers  
Winston-Salem State University

Albert Meza  
University of San Francisco

Rosalie Corona  
Virginia Commonwealth University

Martin Harris  
Southern California University of Health Sciences

Jeffery Mio  
Cal Poly Pomona

Michelle Cruz-Santiago  
University of Illinois, Urbana-Champaign

Erica Holmes  
Loyola Marymount University

N’Jeri Mitchell  
CUNY, Independent practice

Eric John David  
University of Alaska Anchorage

Joseph Horvat  
Weber State University

Nicole Monteiro  
University of Botswana

Russell Jones  
University of Maryland

Donna Nagata  
University of Michigan

IRC, continued on page 40
REFLECTIONS

The Healing Power of Stories

By Jeannie E. Celestial

As an MFP fellow, I have always taken the charge to advance ethnic minority behavioral health services very seriously. This is especially true in my Filipino American community, in which shame and stigma about mental health services unfortunately still exist. To help address mental health stigma, I started volunteering for the Filipino Mental Health Initiative–San Francisco (FMHI-SF) in summer 2012. By serving on FMHI-SF’s leadership team, I help develop and implement culturally informed mental health services.
among Filipinas/os and Filipina/o Americans in the San Francisco Bay Area.

On April 11, 2014, I had the privilege of seeing one of our FMHI projects come to life. We at FHMI organized the inaugural Filipino Mental Health Symposium: Kwentuhan: Sharing Our Stories. We envisioned the conference as a time when mental health providers, community workers, college students, and community members including mental health consumers could come together to network and share stories, information, and resources. Over 100 people attended the symposium, which was held at San Francisco State University (SFSU). SFSU is known as one of the birthplaces of the ethnic studies movement in the United States, so it was very fitting that an ethnic-specific conference like this would be born here as well.

Alvin Alvarez, PhD, a Filipino American psychologist and SFSU’s associate dean of the College of Health and Social Sciences and the former president of the Asian American Psychological Association, gave the keynote address. He educated the attendees on mental health disparities and stigma in the Filipino community. He underscored the importance of advocating for culturally competent mental health services.

I was inspired by Dr. Alvarez’s sharing of his own experiences of microaggressions and how he attempts to channel his anger toward fighting for social justice. My passion to advocate for cultural competency was also reinvigorated by Dr. Alvarez’s talk. He quoted Carolyn Payton, PhD, the first African American and first female director of the U.S. Peace Corps, who asked, “Who must do the hard things [of social responsibility]? Those who can!” I was reminded that however tiring continually advocating for the voiceless and empowering clients to use their voices may be, I must continue to press on—as a social obligation and simply because “I can.”

The personal stories of “lived experience” told by mental health consumers at the symposium deeply resonated with me. “Maritess,” a college student, opened up about emotional difficulties surrounding her parents’ divorce, depressive bouts that plagued her college years, and her attempted suicide. Now she strives to encourage other young Filipinos and Filipinas to seek psychotherapy instead of wallowing alone in darkness and despair. “Lizelle” spoke of her father’s gambling addiction and her experience with sexual abuse. She recounted how faith and spirituality were important sources of healing for her. “Christopher,” a Filipino mental health clinician, shared his own struggle with complex bereavement and elaborated on his own self-stigma about seeking therapy and taking antidepressants.

The authenticity and candidness of the storytellers were truly helpful in chipping away at the audience’s collective shame and stigma surrounding mental illness and mental health services. The success of Kwentuhan exceeded our expectations and was rooted in the healing power of stories.

Autism Milestones

By Debra J. Gillum, PhD
MFP Fellow 1987–1988

My son, Austin, just graduated from high school. It is quite a remarkable milestone considering that he has autism and has been receiving special education services through the public school system his entire life. I think about how far he’s come, how much work he’s put in along the way, and what a journey it’s been. I think about all the challenges we, as a family, experienced along the way.

For kids with autism, graduating from high school is a monumental occasion in light of the thousands of unknowns they encounter along the way. I should say “unknowns that we’ve encountered along the way,” because it’s definitely been a family or group effort. For my family, “all of us” includes my husband, my daughter, Austin, and me. It also includes all of his teachers over
the years, the school administrators, his speech and occupational therapists, his various tutors, his ABA therapists, friends, neighbors, and (most important) his two very caring and knowledgeable instructional aides. We have been on this journey together ever since Austin was diagnosed with autism at age 3½. For his sister, Erin, the journey has been her whole life. She has never known life without autism. None of us have had a choice in the matter, but that is irrelevant. We are all on this journey called autism.

We’ve made clear sacrifices along the way. All of us have had to give up things on our autism journey. For Erin, it was perhaps play dates with friends or time with her father and me. For my husband, it was a move he didn’t want to make, a job he didn’t want to leave, and a lot of time and attention he didn’t get from me. Autism meant sacrificing his long-time wish to teach Austin how to play ball, for example. For me, my sacrifices have been innumerable and, to be honest, I cannot even “go there.” It’s too much of an emotional landmine to think about right now.

The point I’m trying to make is that all of those sacrifices, every one of them, have been worth it. That look on Austin’s face at graduation was like a salve that healed the scars of all the trying times, extra work, worrying, and lost sleep. For Austin, graduating from high school has been one of the few milestones he reached at the same time as his peers.

When I think of autism and Austin’s graduating from high school, I’m flooded with memories of the baby steps or baby hurdles we’ve encountered along the way. When Austin was a little boy, our celebratory milestones were such events as when he started putting words together and finally said “I love you” at about age 4, using the potty at about 4½, and sitting for a haircut without a major meltdown (because it “hurt”) at about 7.

During kindergarten, Austin’s class put on a small production for the parents. All the moms and dads wore proud faces as they watched their sons and daughters singing and performing. During the production, I was beam ing car to car because my son was still in the room despite the noise around him. Normally, he would run screaming from the room with all that noise and all those parents. For the performance, he was not singing or performing; he was turning the flip chart pages that cued the rest of the class, and I couldn’t have been more proud. He was there with all the other kids, he seemed happy with his job, and his hands were not covering his ears.

Milestones come in different sizes and shapes. For families affected by autism, milestones are events like sleeping through the night, going to a doctor’s appointment without a tantrum or behavior issue, finding a new food the child will eat, and being able to tolerate riding in an elevator. Some of these milestones don’t sound so abnormal; but when they occur at kindergarten age or older, they are indeed considered milestones.

On the autism journey, we cannot focus on the traditional milestones, like graduation or getting married, because we cannot be sure they will even occur. One of the cruelest burdens imposed upon me as a parent of a toddler was to think about whether or not Austin would be able to drive, be able to live by himself, or ever find someone to love and marry. A parent shouldn’t have to have these thoughts when their children are toddlers. But we do think about these things, and we lose sleep or eat too much or bite our nails doing so.

Parents of children with autism drive on one step at a time. We hope and pray the next skill and the next accomplishment will come. Sometimes they do and sometimes they don’t. We celebrate the small steps. We focus on the small steps. We have to focus on the small steps.

Austin turned 18 this past spring. That alone is another huge milestone. Shortly after his birthday, he registered to vote, registered for the selective service, and obtained his learner’s permit. More milestones. Onward I march, taking small steps and looking forward.

I’ve been supervising Austin while he drives for about three weeks now. He hasn’t learned about driving by watching me like normal kids, or “neurotypical” kids as we say in autism-speak. We talk about what it means for the car to be in the parking space. We spend several practice sessions just getting used to how the car feels. We will do in months what other kids do in weeks. We have “near misses” with street signs and parked cars. We are taking baby steps. Maybe next week I’ll take him out of our neighborhood—onto real roads. Another milestone, right? ♦
MFP EVENTS

APA Annual Convention, Washington, DC

August 7–August 10, 2014

New Fellows’ Professional Development Workshop
Wednesday and Thursday, August 6–7
8:00 a.m.–5:30 p.m.
Renaissance Washington DC Hotel, MFP Suite

MFP Fellows and Alumni Networking Breakfast
Friday, August 8
8:00–9:50 a.m.
Renaissance Washington DC Hotel, MFP Suite
The purpose of this meeting is to foster continued networking with other fellows and to discuss MFP’s future.

MFP Symposium
New Directions in Ethnic Minority Research
Friday, August 8
1:00–1:50 p.m.
Washington Convention Center, Room 156
Chair: Andrew T. Austin-Dailey, MDiv, MS, Director, APA Minority Fellowship Program
Participants
Maria Cristina Cruza-Guet, PhD, Postdoctoral Fellow, Recovery and Community Health
“A Longitudinal Analysis of the Relationship Between Social Support and Psychological Distress Among Hispanic Elders in Miami, FL”
Carlos Valiente, PhD, Associate Professor, T. Denny Sanford School of Social and Family Dynamics, Arizona State University
“The Roles of Social and Emotional Processes in Children’s Early Academic Success”

MFP Achievement Awards, Poster Session, and Social Hour
Friday, August 8
6:00–7:50 p.m.
Renaissance Washington DC Hotel, Renaissance Ballroom West
This is a great networking opportunity to meet many MFP alumni and ethnic minority psychologists.

MFP Breakfast for Faculty
Saturday, August 9
8:00–9:50 a.m.
Renaissance Hotel, MFP Suite
This is a time for advisors, chairs, and training directors of currently funded MFP fellows to learn about the MFP process and discuss program issues.

MFP Special Interest Symposium
Toward a More Comprehensive Understanding of Violence Against Communities of Color
Saturday, August 9
2:00–2:50 p.m.
Washington Convention Center, Room 140A
Chair: Janeece Warfield, PhD, Director of Early Childhood Services, Wright State University
Presenters
Richard M. Lee, PhD, Professor, Department of Psychology at the University of Minnesota
“Toward an Understanding of a Diasporic Identity”
Nicole M. Monteiro, PhD, Department of Psychology, University of University of Botswana
“The Psychology of Mass Violence”
Kevin L. Nadal, PhD, Associate Professor of Psychology, Acting Director, Forensic Mental Health Counseling Program at John Jay College of Criminal Justice
“Violence Towards Lesbian, Gay, Bisexual, and Transgender People of Color: Implications for Psychology”
MFP FELLOWS’ PRESENTATIONS

Cheryl Anne Boyce, PhD
Symposium (Division 3): Beyond Academe—Alternative Careers for Experimental Psychologists
“Your Role as Psychologists” (Participant/1st Author)
Thursday, August 7
12:00–12:50 a.m.
Convention Center, Room 147A

Symposium (Division 12): Research in Graduate School—Why and How Should I Get Involved?
“Integrating a Research, Clinical, and Public Health Career” (Participant/1st Author)
Thursday, August 7
1:00–2:50 p.m.
Convention Center, Room 204C

Symposium (Division 12): Adolescence—Brain Development to Prevention Policy (Cochair)
Friday, August 8
4:00–5:50 p.m.
Convention Center, Room 143A

Symposium (Division 12): Innovative Models With Evidence to Reduce Racial/Ethnic Health Disparities and Risk (Chair)
Saturday, August 9
1:00–1:50 p.m.
Convention Center, Room 140A

Discussion Session (APA): Plenary—Two of a Kind? Understanding the Research Domain Criteria and DSM-5 (Cochair)
Saturday, August 9
2:00–2:50 p.m.
Convention Center, Room 152B

Danice Brown, PhD
Poster Session (Division 45): Social Identity Beliefs and Discrimination Experiences
“Educational Achievement Among African Americans: The Influence of Internalized Racism” (Participant/1st Author)
Thursday, August 7
1:00–1:50 p.m.
Convention Center, Halls D and E

Symposium (Division 35): Improving the Quality of Psychological Health Research, Education, and Treatment for Black Women (Cochair)
Saturday, August 8
10:00–10:50 a.m.
Convention Center, Room 154A

Bryana French, PhD
Skill Building (Division 17): Expanding Our Reach—Building Media Skills for Counseling Psychologists (Cochair)
Friday, August 8
9:00–10:50 a.m.
Convention Center, Room 206

Naomi Hall-Byers, PhD
Poster Session (Division 45): Applied Work, Social Justice, and Adjustment
“Traditional Masculine Ideology, Norms, and HIV Prevention Among Black Men at an HBCU” (Participant/1st Author)
Saturday, August 9
9:00–9:50 a.m.
Convention Center, Halls D and E
Poster Session (Division 9): Identity, Intersectionality, and Beyond
“What Makes an STI/HIV Media Message Appealing to Black College Students?
Saturday, August 9
11:00–11:50 a.m.
Convention Center, Halls D and E

Helen Hsu, PsyD
Symposium (Division 12): Raising Our Voices—Updates From Ethnic Minority Psychological Associations on the APA Ethics Code (Participant)
Saturday, August 9
10:00–11:50 a.m.
Convention Center, Room 156

George Hu, PsyD
Discussion (APAGS): Psychology Without Borders—A Roundtable Discussion on International Teaching, Research, and Service (Participant/1st Author)
Saturday, August 9
8:00–9:50 a.m.
Convention Center, East Salon C

Symposium (Division 52): How to Be an International Leader—International ECPs’ Perspectives for Aspiring Leaders (Participant/1st Author)
Saturday, August 9
12:00–12:50 p.m.
Convention Center, Room 140B

Shahana Koslofsky, PhD
Skill Building (Division 2): Interprofessional Training—Preparing Psychology Students for the Changing Health Care Market (CoChair)
Sunday, August 10
1:00–1:50 p.m.
Convention Center, Room 154B

Michaela McLaughlin
Symposium (Division 29): Information About the Client, Just Not From the Client
“Problem or Possibility? Information Learned Outside the Therapy Hour” (Coauthor)
Friday, August 8
10:00–10:50 a.m.
Convention Center, Room 209A

Jeffrey Mio, PhD
Poster Session (Division 9): Social Justice
“Issues of Poverty Among Students at Large Public Universities” (Participant/1st Author)
Friday, August 8
11:00–11:50 a.m.
Convention Center, Halls D and E

Della Mosley
Poster Session (Division 17): Mental Health and Well-Being
“Contextualizing Paranoia on the MCM-III: African American Male Perspectives” (Participant/1st Author)
Thursday, August 7
9:00–9:50 a.m.
 Convention Center, Halls D and E

Poster Session (Division 35): Feminism and Gender Role Ideology, Sexual Mistreatment, and Sexuality
“Hashtags and Hip-Hop: Exploring the Online Performativity of Hip-Hop Identified Youth Using Instagram” (Participant/1st Author)
Friday, August 8
12:00–12:50 p.m.
Convention Center, Halls D and E

Quyen Tiet, PhD
Poster Session (Division 20): 1
“Religious Coping, Appraisals, and Depressive Symptoms in Caregivers of Seniors With Dementia” (Coauthor)
Thursday, August 7
3:00–3:50 p.m.
Convention Center, Halls D and E
Quyen Tiet, PhD

Poster Session (Division 45): Applied Work, Social Justice, and Adjustment
“Impact of Client–Clinician Language Matching on Satisfaction and Outcomes” (Coauthor)
Saturday, August 9
9:00–9:50 a.m.
Convention Center, Halls D and E

Poster Session (Division 43): II
“Negative Maternal Disclosure, Divorce, and Child’s Appraisal of Father–Child Relationship” (Coauthor)
Saturday, August 9
11:00–11:50 p.m.
Convention Center, Halls D and E

Poster Session (Division 35): Eating Pathology, Body Image, Gender-Based Mistreatment, and Feminist Ideology
“Sexting and the Objectification of College-Age Women” (Coauthor)
Saturday, August 9
12:00–12:50 p.m.
Convention Center, Halls D and E

Poster Session (Division 12): Issues in Clinical Practice, Training, Psychotherapy, Dissemination, and Implementation
“Role of Working Alliance and Substance Use on Relapse in Treatment for Early Psychosis” (Coauthor)
Saturday, August 9
1:00–1:50 p.m.
Convention Center, Halls D and E

Poster Session (Division 7): Adolescent and Adult Development
“Predictors of Emotional Disturbance in Foster Children in Alameda County” (Coauthor)
Saturday, August 9
4:00–4:50 p.m.
Convention Center, Halls D and E

Yuying Tsong, PhD
Conversation Hour (Division 35): Achievements and Challenges in the Mentoring Relationship for API Women (Participant/1st Author)
Saturday, August 9
10:00–10:50 a.m.
Convention Center, East Salon C

Shannen Vong
Poster Session (Division 45): Social Identity Beliefs and Discrimination Experiences
“Unveiling the Internalization of the Model Minority Stereotype Among Asians” (Coauthor)
Thursday, August 7
1:00–1:50 p.m.
Convention Center, Halls D and E

Website: www.apa.org/pi/mfp
With support from the Substance Abuse and Mental Health Services Administration, APA has launched the Recovery to Practice initiative, designed to develop a curriculum for training professional psychologists in recovery approaches to working with individuals with behavioral health disorders, including serious mental illnesses. The initiative is an outgrowth of increasing recognition that recovery is an attainable outcome. Given the emphasis in the health care reform legislation on providing interventions that are outcome oriented and evidence based, and given APA’s strategic initiative to expand psychology’s role in advancing health, the move to approaches that promote recovery is necessary if psychology is to remain a viable health care discipline in the years to come.

Facilitators’ Training for APA’s Recovery to Practice Curriculum

Friday, August 8
3–5 p.m.
MFP Suite, Renaissance Hotel

This training will provide an overview of APA’s Recovery to Practice curriculum. It will focus on facilitating and implementing the curriculum modules in different contexts, along with involving persons with lived experience as instructors. Specific teaching methods and examples will be discussed while selected modules are presented.

SYMPOSIUM
Integrating Recovery From Anomalous Mental States Into the Education and Practice of Psychologists

Saturday, August 9
10:00–10:50 a.m.
Convention Center, East Overlook Room

Chair: Ronald Levant, EdD, ABPP, Chair, Professor, Collaborative Program in Counseling Psychology at The University of Akron
Leader: Ron Bassman, PhD, Chair, The Community Consortium
Participants
Noel Hunter, Doctoral Student, Long Island University–Post
Melissa Schroeder, Doctoral Student, Long Island University–Post

Chaired by a former APA president, this symposium features a senior psychologist and two doctoral students addressing the disconnect between the experiences of recovery and what is currently being taught. The presenters will discuss from a personal and professional perspective suggested changes. Explored in discussion will be how to make the educational process more relevant and accessible to those who have personal experience with serious mental illness and what benefits might accrue to fellow students and faculty by such open dialogue. In attempts to remove the stigma associated with mental illness and to work toward a client-centered model of care, it is important for clinicians to evaluate and integrate their own experiences with extreme emotional states. The presenters hypothesize that stigma and discrimination are reduced and our knowledge base expanded when there are opportunities to interact with peers and colleagues who can be candid about their personal experience of the recovery process.

Website:
www.apa.org/pi/mfp
We need YOUR HELP!

A Message from the MFP Training Advisory Committee

CONTRIBUTE TO THE FUND FOR RACIAL/ETHNIC DIVERSITY IN NEUROSCIENCE AND PSYCHOLOGY

Established through the American Psychological Foundation

Administered by the MFP

Through this fund, we will offer a range of partial support including stipends, mentoring, networking, professional development, dissertation funding, tuition, and health insurance to trainees in psychology and neuroscience whose career goals are consistent with the MFP mission. We are asking that you join us in creating this permanent resource. We need to raise $250,000 to make the fund permanent. If 250 of you donate $100, that is $25,000 or 10% of the needed contributions. Your donation is tax-deductible.

The link to donate from the American Psychological Foundation, the tax-exempt organization administering the endowment, is included below. Our initial request is for at least $100. Please consider giving more if you can and feel free to give less if that is all you can afford. What is important is that you buy into a better future for underrepresented groups.

APF ONLINE DONATION LINK:

https://cyberstore1.apa.org/cyb/cli/casinterface1/apf

In the field located just under the Donation Amount, write in the fund name and the percentage to be donated to psychology and/or neuroscience (e.g., “Fund for Racial/Ethnic Diversity, 100% psychology”).

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