

THE ABPP Specialist

Archival Issue



ABPP

SPECIALTY CERTIFICATION
IN PSYCHOLOGY SINCE 1947

THE ABPP Specialist

Vol. 27, No. 1 Winter 2008

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Editor's Corner

The Specialist Goes Electronic!

By Robert W. Goldberg, Ph.D., ABPP, FAACP



Dr. Goldberg

To celebrate ABPP having entered the 21st Century, as well as having embarked on its second sixty years, the BOT has decided to make *The ABPP Specialist* an electronic publication. Accordingly, the issue you hold in your hand will be the last hard copy to be distributed to the entire membership. Cost savings to the organization will be considerable and the "response latency" of the process from deadline to final product will be reduced. We will also have the flexibility to make last minute changes based on just-breaking developments. Consistent with this transition, I am requesting that all submissions be electronic, and transmitted by e-mail attachment to ABPP Central Office.

In preparation, I am mothballing my typewriter (I *had* progressed from a manual to an electric model!) and discarding my carbon paper and bottle of Wite-Out. My ophthalmologist has prescribed trifocal glasses for me, so that I will be able to see text at the intermediate distance of a computer monitor. And I am trying to upgrade my vocabulary; until recently, I could not tell a Blackberry from a Bluetooth. I welcome other suggestions which might facilitate my metamorphosis.

A Message From the President

The Changing Face of ABPP: Past, Present, and Future

By Christine Maguth Nezu, Ph.D., ABPP

I am delighted and honored to write my first message as incoming President of the American Board of Professional Psychology. In concert with an inaugural message, I would like to begin with a few comments to acknowledge and thank the recent past presidents with whom I have had the good fortune to work and learn the “nuts and bolts” of the organization. The wisdom and dedicated work of Drs. **Norma Simon** and **Al Finch** allow me to report to you a strong and active affiliation of speciality boards, a professional and efficient central office, and a sound infrastructure that is poised to create a stimulating future. Under Norma’s tenure, we completed a relocation and re-staffing of our central office, and navigated all the inherent challenges associated with it. Norma represents the epitome of “grace under pressure.” Al spearheaded our approval for continuing education credits, insured the implementation of the comprehensive review process for all of our specialty boards, and coordinated the hiring of our new Executive Officer, Dr. **David Cox**, following Dr. **Russ Bent’s** retirement. Al has had the courage to ask difficult and provocative questions and follow through with important initiatives that have made our organization stronger.

While Russ is still sorely missed, our new EO, David, has already distinguished himself as the new face of ABPP’s Central Office. At the December meeting of the Board of Trustees, the position of EO was expanded to a full-time position. David’s professionalism and solid problem-solving abilities will be a huge advantage to the future of ABPP. The day-to-day operations in the hands of David, Assistant EO Nancy McDonald, along with the Administrative Assistant, Judy Cline, continually receive accolades regarding the warm and professional welcome that the office provides its current and applicant specialists.

The past year marked ABPP’s 60th anniversary and our last issue of *The Specialist* was devoted to honoring the

past, reflecting upon how the organization has grown, and recognizing the accomplishments of the many distinguished individuals who have contributed to its importance to the culture of professional psychology. Looking toward the future, we have a new President-elect, Dr. **Nadine Kaslow**, who brings a wealth of experience, expertise, and dedication that will provide incredible leadership regarding our road ahead. Our other newly elected officers include Dr. **Randy Otto** as Treasurer, and Dr. **Arthur M. Nezu**, as Secretary. Both Randy and Art are hitting the ground running, each bringing their unique perspective and wisdom to the Executive Committee. In this regard, I believe that we are in a position to move forward as never before to inform and best impact the culture of professional psychology. Therefore, with a strong recognition of the history that has brought us to this point, I would like to focus the remainder of the message on the future.

“Change is the law of life, and those who look only to the past or present are certain to miss the future”

John F. Kennedy

As articulated by JFK, we must actively participate in planning for the future in order to create our own destiny. This is an incredibly exciting time to look to the future of ABPP! Our Executive Committee, Executive Officer, Assistant Executive Officer and Staff, and Board of Trustees, recently devoted the majority of our annual meeting in Savannah engaged in a strategic planning retreat. We invited consultants from SCORE, a nonprofit firm that provides free and confidential consultation and advice to small businesses. The SCORE consultants are retired professionals with a wealth of business, marketing, and consulting experience and entrepreneurship, who are willing to be of help to organizations that are looking toward their future. Our meetings and workgroups, led by SCORE consultants Doug Fuss, Jules



Dr. Nezu

Homans, and Al Torpie, provided us all with a rare opportunity to review and consider our organizational priorities, define our mission, confirm our value to the profession, and plan for the future.

Reflecting on the four days spent in strategic planning, I am struck by the insight, creativity, consideration of change, and the intensity of effort that joined all trustees from our 13 specialities, professional liaisons, and various executive officers. Chief among our tasks is to develop a plan that disseminates our value to eligible psychologists who have not yet become board certified, as well as to the “next generation” of professionals who are emerging from internship, residency, and other pre-licensing experiences. Whereas many wonderful ideas were shared concerning how this may be accomplished, the challenge confronted by our workgroups involved developing a creative and realistic action plan with a relatively small current organizational structure. We estimate at present approximately 3 to 4% of licensed psychologists are board certified, and our current budget and office staff are operating at full throttle. Therefore, any feasible plan necessarily involves a cost-benefit analysis of available resources, and our decision-making efforts require us to remain on growth as a major priority.

(continued on page 21)

From the Executive Officer

2007 Year-End Report

By David R. Cox, Ph.D., ABPP, Executive Officer

ABPP is committed to continuing to increase its visibility and participation in professional psychology committees and organizations. Toward that end and on behalf of ABPP I have become involved with a number of committees and organizations within the field of professional psychology. Some of these are ones in which ABPP has traditionally participated, others are not. This has included participation with the Council of Specialties (COS), Committee for the Advancement of Professional Psychology (CAPP), Board of Professional Affairs (BPA), Board of Educational Affairs (BEA), the Association of State and Provincial Psychology Boards (ASPPB), Psychology Executive Roundtable (PER), Trilateral (now merged with PER), Council of Credentialing Organizations in Professional Psychology (CCOPP), National Council of Schools and Programs in Professional Psychology (NCSP) and others. I am also working on the American Psychological Association Task Force on Taxonomy.

These activities have provided a



SCORE Consultants Jules Homans, Al Torpie, and Doug Fuss at December BOT Meeting



Dr. Chris Nezu makes a point. Others from left: Drs. N. Kaslow, Cox, and Finch

very positive response and I (we) have been welcomed and appreciated as a participant. It is my belief, and others have expressed a similar perception, that ABPP is more visible and active in a way that seems to be yielding positive results. Some of the ground we have covered this past year follows.

Florida Legislative and Rules Update

As you are aware, in mid to late 2006, ABPP was asked by the Florida Psychological Association to be involved in providing input to the Florida Board of Psychology (BOP) regarding board certification. The State of Florida passed legislation in 2006 requiring the BOP to create rules for recognition of board certifying organizations. ABPP was involved both due to the FPA request, requests from some individual psychologists in Florida and due to the clear potential impact of such rule on ABPP and ABPP specialists. The specific rule language adopted, effective Nov 1, 2007, follows in italics:

64B19-18.008 Board Approval of Specialty Certifying Bodies.

To obtain Board approval as a certifying body, eligible to grant formal recognition declaring a licensed psychologist to be a "certified psychology specialist," "board-certified psychology specialist," or a "psychology Diplomate," pursuant to Section 490.0149, F.S., an applicant shall file a petition demonstrating that it:

(1) Is an independent body, national in scope, that incorporates standards of the profession, collaborates closely with organizations related to specialization in psychology, and only certifies doctoral-level,

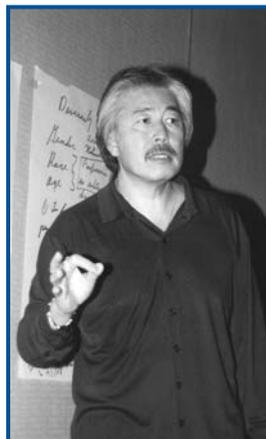


Dr. Cox

licensed psychologists as having advanced qualifications in a particular psychological specialty through demonstrations of competence in the specialty being recognized;

(2) Has clearly described purposes, bylaws, policies, and procedures, that include an internal review and budgetary practices, to ensure effective utilization of resources with an administrative staff, housed in dedicated office space that is appropriate for the certifying body's program and sufficient for responding to consumer or regulatory inquiries;

(3) Has established standards for specialized practice of psychology and adopts the American Psychological Association (APA) "Ethical Principles of Psychologists and Code of Conduct," effective June 1, 2003, to guide the practice of its members. The code is incorporated by reference and available for inspection at the Board office as well



Dr. Art Nezu leads discussion

FLORIDA UPDATE!

On January 25, 2008, the Florida State Board of Psychology officially recognized ABPP as a board certifying organization.

(continued on page 22)

ABPP 60th Anniversary 2007 Convocation

ABBP's 60 Anniversary Convocation and Awards Ceremony was held on August 18, 2007, during the APA Convention in San Francisco, CA.

As has become customary, the morning of the day was devoted to the BOT's Eighth Annual Preconvention Governance Meeting, with representatives of the Boards and Academies discussing policy matters and a new generation of specialty leaders in attendance.

At the Convocation itself, Dr. **Allan F. Mirsky** was announced as the 2007 Distinguished Service and Contributions to the Profession of Psychology Awardee for his seminal work in neuropsychology. Drs. **Alan M. Goldstein** and **Ruth Ochroch** were announced as the 2007 winners of the Russell J. Bent Award for Distinguished Service and Contributions to the American Board of Professional Psychology. Dr. Goldstein was recognized for his leadership in organizing and conducting continuing education in forensic psychology, and for his

contributions to the Forensic Board and Academy as well as the BOT. Dr. Ochroch was recognized for her contributions to certification through the American Board of Psychoanalysis in Psychology, her participation in the organization of the Clinical Board, and her BOT membership.

After a welcome from Past President **Dr. Norma P. Simon**, **Dr. Al Finch** made his Presidential Report and **Dr. Howard M. Cohen** delivered remarks from the perspective of the Council of Presidents of Psychology Specialty Academies. The audience was then privileged to hear the address of the 2006 Distinguished Service Awardee **Dr. David H. Barlow**, the world-renowned expert on anxiety disorders, who spoke on professional issues. His article based on that address appears elsewhere in this issue.

Finally, 144 new Specialists were formally recognized and those who were in attendance received a token of appreciation from the Board.

We hope to see you at the 2008 Convocation and Awards Ceremony in Boston!



Dr. Cohen reports on CPSSA



Dr. Mirsky



Dr. Ochroch



ABPP Officers at Governance Meeting: From left: Drs. Koffler, Cox, Chris Nezu, Simon, and Finch



Dr. Goldstein



The ABPP Exhibit Hall Booth. Dr. Frank Ezzo and Assistant EO Nancy McDonald provide the information

ABPP's 60th Anniversary Dinner

In an even more elaborate reprise of the 50th Anniversary Dinner in Chicago, ABPP held its 60th Anniversary Dinner on August 17, 2007 at the Hotel Monaco in San Francisco. The festivities included warm welcoming remarks from BOT President **Al Finch** and Executive Officer **David Cox** and, of course, an ample and suitably heartening meal, self-funded by attendees. The highlight of the evening was the ABPP Talent Show, coordinated by impresario **Florence Kaslow**, at which a number of specialists – including **Russ Bent** (magic) and **Stanley Moldawsky** (piano) – provided a varied program of entertainment. Other performers were **John Berez**, **Carol Naumann**, and **David Shapiro**. A good time was had by specialists from many generations, leaving a warm glow of memory as well as pleasant anticipation of a 70th Anniversary Dinner 10 years hence.



Dr. Stan Moldawsky tickles the ivories



Dr. Russ Bent, alias 'The Great Bentini,' dazzles attendees with his legerdemain

In Memoriam: Doris Gruenewald

Doris Gruenewald, who for many years contributed to theory, practice, and teaching of psychology and hypnosis, died on May 6, 2007 at her home in Bethlehem, Pennsylvania.

Dr. Gruenewald received her Ph.D. in clinical psychology from The University of Chicago. She was Director of the Adult In-Patient Program in the Department of Psychiatry at Michael Reese Hospital in Chicago and Associate Clinical Professor in the Department of Psychiatry at The University of Chicago. She held Diplomate status in both the American Board of Professional Psychology (ABPP) in Clinical Psychology and in the American Board of Psychological Hypnosis (ABPH) in Clinical Hypnosis and fellowship status in APA, SCEH, and ASCH.

Dr. Gruenewald's contributions to hypnosis were well recognized. She actively taught and organized workshops through Michael Reese Hospital and SCEH, and served as Vice-President, Secretary, and chair of committees including Ethics Committee and Education Committee of SCEH. She also was on the editorial board of the *International Journal of Clinical and Experimental Hypnosis*. Dr. Gruenewald served as President of the American Board of Psychological Hypnosis (ABPH) and was instrumental in arranging with APA to list the names of psychologists who hold the Diplomate from ABPH in the APA directory. She received a number of awards from SCEH, including the Bernard Raginsky Award for leadership and achievement in the field of hypnosis in 1978, the Roy M. Dorcus Award for the best published clinical paper on hypnosis in 1979 and 1982, and the Ernest R. and Josephine R. Hilgard Award for the best published theoretical paper on hypnosis in 1983. She also received the Morton Prince Award from ABPH/SCEH for distinguished contribution to the development of hypnosis in the science and profession of psychology.

Her areas of research and publication included dissociation and multiple personality, the relationship between laboratory data and the clinical context, and cognitive processes in the waking state of hypnosis.

Dr. Gruenewald was able to reconcile many facets of complex issues. She was a superb clinician, a creative theoretician, a dedicated professional, and a caring and astute teacher. Those of us who knew her have lost a trusted, warm and delightful colleague and friend.

Billie S. Strauss

Minutes of the Council of Presidents of Psychology Specialty Academies

San Francisco • August 19, 2007

Present: Howard Cohen (CPPSA Chair and Clinical Psychology), Bernard Brucker (Rehabilitation Psychology and CPPSA Past-Chair), Joseph Talley (CPPSA Treasurer and Special Liaison), Robert Goldberg (Chair, ABPP Communications Committee), Ric Steele (Clinical Child and Adolescent Psychology), Al Finch (President, ABPP Board of Trustees), Kyle Boone (Clinical Neuropsychology), Steve Eichel (CPPSA Chair-Elect and Counseling Psychology), Phil Witt (Forensic Psychology), David Cox (ABPP Executive Officer), John Northman (CPPSA Secretary and Couple and Family Psychology), George Katz (invited guest).

Update from Board of Trustees and Central Office

Strategic planning will be the major issue at the upcoming BOT meeting in December 2007. The BOT plans on looking at "everything:" what it wishes to achieve, where it wishes to go, and how it plans to get there. Outside facilitators will be brought in. There was much discussion about the role and presence of the academies at the December planning meeting.

Fundamental to issues surrounding strategic planning are the definition and relationships among 27 interrelated groups: 13 specialty boards, 13 corresponding specialty academies, and the BOT.

The BOT continues to address the issue of subspecialties and the definition of subspecialties.

Central office has been restructuring job assignments as the personnel within the office have changed.

ABPP wishes to update the *website* in both content and appearance. Currently there is considerable variation among academy websites. A key issue raised concerns the degree of uniformity or individuality of websites. (Note: See above paragraph concerning 27 groups that are both separate and interrelated.)

ABPP is initiating an *early entry program* which aims to get students to begin thinking about board certification while in graduate school.

Treasurer's report

All academies are currently "paid up" with this *CPPSA dues*. Sometimes it has been challenging to obtain compliance. The revenue is essential for CPPSA to carry out its mission.

VA ABPP update

The VA has been implementing its internal change giving a *salary step increase* of \$2,500 to any psychologist holding an ABPP. (Notes: The only exception is for a psychologist who is already at the top step.)

Psychopharmacology

ABPP is anticipating receiving an application for *psychopharmacology* to be defined as an ABPP specialty.

Status of definition of "specialty" in Florida

State attorneys are currently "tweaking" the language of the newly

enacted Florida law that defines a *recognized specialty board*. Any board must meet guidelines in order to be recognized by the state board of psychology; it is not ABPP-exclusive.

Branding and differentiating ABPP from other boards

There was discussion concerning how to best *differentiate ABPP from other boards*. There was consideration of both the legal approach and the marketing approach concerning how most effectively to continue to "brand" ABPP.

Recruiting strategies

Recruiting strategies discussed included workshops, scholarships, mentoring and CE credits.

Respectfully submitted by:
John E. Northman, Ph.D., ABPP
Secretary, CPPSA



CPPSA Members: From left, Drs. Witt, Northman, Eichel, Talley, Steele, Cohen, Cox, Boone, and Brucker

2006 Awardee Address

The Ascendancy of Competence in Professional Psychology

By David H. Barlow, Ph.D., Professor of Psychology and Psychiatry

Founder, and Director Emeritus, Center for Anxiety and Related Disorders at Boston University

A sea of pessimism surrounds professional psychology. We are witnessing an increasing number of practitioners; most with less than doctoral training, that some would say is approaching a deluge. In the area of health care, managed care waxes and wanes but does not disappear and indeed, most agree there will never be a return to the relatively unregulated (indemnity) insurance schemes of years past. We experience declining rates of reimbursement, cost cutting from both federal payers and insurance companies, and a general lack of recognition for our highly developed and varied expertise. And yet, there are reasons for optimism. How could one possibly be optimistic in the midst of these forces working against us? It is because I see the beginnings of a new era of competency and quality in professional psychology that is not just the light at the end of the tunnel. It is actually happening now. And ABPP stands for nothing if it does not stand for competence. In this column I will touch briefly on 3 areas that illustrate these trends: first the recognition of psychological treatments; second the impact of outcomes assessment; and third, the discovery of "psychological drugs" that are best administered by psychologists.

The Recognition of Psychological Treatments

Witness the following development in the field of health care in United Kingdom (UK): In October of 2007 Health Secretary Alan Johnson announced a substantial £170 million expansion of psychological therapies to provide better support for people with mental health problems such as

anxiety and depression. To quote the secretary, "Psychological therapies have proven to be as effective as drugs in tackling these common mental health problems and are often more effective in the longer term. National Institute of Clinical Excellence (NICE) guidance on treatment for depression and anxiety recommend (these therapies) . . ." In fact over the next three years the National Health Service (NHS) in the UK has committed to £300 million (\$600 million at current exchange rates) as an investment to improve access to psychological therapies. This would include training 3600 additional psychological therapists so that patients in all general practices throughout the NHS will have access to these treatment. Similar efforts are ongoing on a state by state basis in the United States as well as in the Department of Veteran Affairs and the Substance Abuse and Mental Health Services Administration.

Why has this happened? The major reason is that health care policy makers in the UK and around the world have decided that psychology has effective procedures that I have referred to elsewhere as "psychological treatment" (Barlow, 2004). Another reason is that the public desires these services. In fact, when individuals in need of mental health care are given a choice in either North America or the UK between drug treatments or psychological treatments, the overwhelming choice among the population is for psychological treatments (Barlow, 2004).

But my optimism is not simply because healthcare systems have recognized that we have effective psychological interventions and

assessment procedures. While technique is important and no profession really thrives without a set of techniques, it is also crucial that these procedures are implemented skillfully and with competence in order to reach the highest standard of quality care. Thus, it is very clear that what has been called the "common factors" of therapy such as intervening skillfully, building alliance, inducing expectancy for change, along with remoralizing and remotivating the patient, are all necessary ingredients in producing the highest quality care. Even in one of our fastest growing areas of practice, telehealth, where psychological services are provided remotely using telephone or web based interactive technology, these factors are subtle but important. Most importantly, research has now appeared demonstrating that the technical competence with which psychological assessment and interventions are applied, when combined with the common factors mentioned above, contributes directly to successful outcomes. Of course one might think this would be obvious. In fact, it has been somewhat difficult to demonstrate until recently (Barber et al., 2007).

The Impact of Outcomes Assessment

The other major force that will actually work in our favor is the widespread implementation of outcomes assessment in healthcare systems and other areas of professional practice. Outcomes assessment is at the heart of evidence

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Editor's Note: This is an adaptation of Dr. Barlow's August 2007 address to ABPP's 60th Anniversary Convocation and Awards Ceremony during the APA Convention in San Francisco.

Special Articles

The Periodic Comprehensive Review: Thoughts from the Clinical Board

By W. Michael Nelson III, PhD, ABPP, Past President, ABCP,
Nadine J. Kaslow, PhD, ABPP, President, ABCP
and M. Victoria Ingram, PsyD, ABPP, ABCP Liaison to the BOT

The American Board of Clinical Psychology was the first Specialty Board to go through the process of the Periodic Comprehensive Review (PCR). The purpose of the PCR is to enhance Specialty Board goals and functioning with some depth of analysis, and to present a comprehensive, informative description of each Specialty Board to the Board of Trustees (BOT). More specifically, the goals of this quality assurance process are to stimulate self-study, assure that Specialty Board policies and processes are consistent with ABPP's standards, assure each Specialty Board's articulation of identity, and communicate effectively about the Board Certification in this specialty to the public. We thought it might be helpful for other Specialties that will soon be going through this guided self study process to hear what it was like for our Board.

Our initial knee-jerk reactions upon receiving notification from Central Office that this "new" procedure for quality assurance would be implemented ranged from one of slight irritation to the dread of having to go through another formal review. Thus, it was initially seen as daunting and triggered emotional issues that could have stymied the process in our Board's effectively addressing this directive by Central Office. We quickly "centered" ourselves by talking about how this evaluation would be nothing compared to our dissertation defenses, state licensure oral exams, and our own ABPP examinations (many of which were a day-long process at the time). After a brief discussion, we quickly decided that we were up to the task and began planning how we would gladly be the first Board to go through this, particularly since we are

the largest specialty currently with 1,413 members.

Our task became clearer as we reviewed that PCR binder provided by the BOT, even though it seemed to be somewhat of a work in progress at the time we received it. We convinced ourselves that this was certainly a doable task, although realizing that it would involve a significant amount of work for all Board members, producing such a document with individuals spread across our six regions of the country was later to prove challenging, although certainly not inordinately so. We also decided not to request additional finances from the BOT, as we thought this would not be fiscally responsible in light of ABPP's limited budget.

As we got down to the task at hand, we were somewhat heartened that PCR was not considered to be a pass/fail review but rather more of a dynamic and ongoing process of quality review and improvement. The BOT indicated that as a result of the review, recommendations might be made but that our Board had the option of electing to incorporate such feedback or not. In all, the writing of our PCR took approximately one year before it was submitted to the BOT in Fall 2006.

After this, our attention turned to wondering just who would be the PCR reviewers from the BOT. At that time none of us really had had a great deal of contact with our new executive director, Dr. David Cox. Likewise, we did not know a great deal about Dr. Mitchell Rosenthal, although we certainly knew of his significant contributions to rehabilitation psychology and to the Rehabilitation Psychology Board. We did wonder



Dr. Ingram

about the fact that both of our reviewers were from the same board and what implications this might have. We decided to invite the PCR examiners to our semi-annual Board meeting, as this would provide an opportunity for them to meet the entire Board, as well as directly observe several of our clinical exams. Thus, we are able to accommodate the PCR within our regularly scheduled Board meetings. We examine over 40 candidates per year, and conduct approximately 5 to 6 exams during each semi-annual Board meeting. This is done not only primarily to defray excessive costs, but also to continuously evaluate the reliability of our exams across the regions.

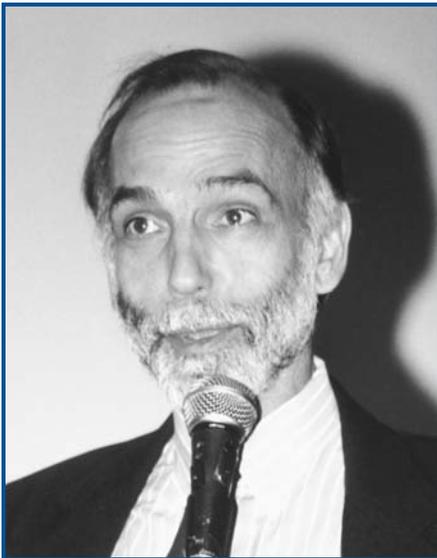
Our semi-annual Board meeting was held from October 6-7, 2006 in Boston and our formal review took place at that time. We were pleased about the graciousness and flexibility

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The Council of Presidents of Psychology Specialty Academies (CPPSA), ABPP Academies, and Veterans Affairs Psychologists

By Joe Talley, Ph.D., FPA, FAACoP, FAACIP
Special Liaison, Former Chair and CEO of CPPSA

The Executive Committee of CPPSA partnered with the Executive Committee of the ABPP BOT and with the help of Nancy McDonald and Dr. Dave Cox to take out a full page ad that will appear four times in the journal *Psychological Services* that is marketed to VA



Dr. Talley

psychologists. The ad will inform VA psychologists that they are now eligible under Hybrid Title 38 to qualify for a pay raise if they become ABPP Board Certified. The VA is the largest single employer of psychologists in the United States and as such Title 38 provides ABPP with an amazing opportunity to increase our numbers since no other board certification will fulfill the requirements of Title 38.

This is the perfect time for each academy to market its specialty also by taking out a similar ad. An academy could work with Central Office and modify the present ad by identifying and describing the specialty, including a welcome to prospective applicants, describing available mentoring, etc. The gain in members should be well worth the investment. In correspondence with VA psychology administrators, one explicitly wrote that they expect there to be considerable interest in ABPP Board Certification within the VA, given the passing of Hybrid Title 38. Contact information to take out an ad in *Psychological Services* is as below.

Jodie Ashcraft
Director, Advertising & Exhibit Sales
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: (202) 336-5565
Fax: (202) 216-7610
Email: jashcraft@apa.org

Another advertising option to reach VA psychologist is in the Division 18 newsletter, as follows:

Advertising in *Public Service Psychology*

Ad rates:	
Full page (8.5 x 11 in)	\$500.00
Half page	\$300.00
Quarter page	\$200.00

Advertising information:

Public Service Psychology is an electronic newsletter issued three times yearly. Due dates for receipt of final ad copy are March 1, July 1, December 1. Submission of an ad does not guarantee publication. The newsletter editor(s) and Division 18 reserve the right to refuse advertising. Advertising for Division 18 events and job/training in public service psychology are encouraged and are published without charge, space permitting. Advertising copy should be submitted electronically. File formats preferred are JPG, TIF, EPS and PDF at 300 dpi or higher.

For questions or to reserve ad space, please contact Melisa Rempfer, PhD, Division 18 advertising coordinator, remperfer@umkc.edu.

Payment is due upon receipt of final ad copy. Please make checks payable to APA Division 18 (Psychologists in Public Service) and send to:

Gil Sanders, Ed.D
Secretary-Treasurer
APA Division 18 (Psychologists in Public Service)
7315 N. MacArthur Blvd.
Oklahoma City, OK 73132
Phone: (405) 721-2790 (H)
(405) 721-0094 (O)

I hope that the Executive Board of each academy will consider allocating funds to gain membership through this marketing opportunity and I commend our CPPSA, BOT and CO officers for supporting this initiative.



ABPP

SPECIALTY CERTIFICATION
IN PSYCHOLOGY SINCE 1947

Kazar is Recipient of 2007 APA Heiser Award

David B. Kazar was the recipient of the 2007 APA Karl F. Heiser Presidential Award, presented during the 2007 APA Convention in San Francisco. Dr. Kazar was recognized for his groundbreaking achievements in the State of Florida, including his efforts to protect the public by formulating and encouraging legislation setting criteria for using the designation of "board certification." The purpose was to eliminate confusion regarding the legitimacy of the multitude of credentials promulgated. On January 25, 2008, the Florida board of Psychology officially recognized ABPP as a board certifying organization.

Dr. Kazar was also involved in the passage of the bill



Dr. David Kazar receives 2007 Heiser Award. From left: APA President Dr. Sharon Brehm, Dr. Jack Wiggins, Dr. Kazar, and Award Coordinator Dr. Jeff Brantley



2001 Heiser Award Ceremony. From left: then APA President Norine Johnson, recipient Dr. David Cox, past recipient Dr. Richard Cox, and Dr. Jack Wiggins

requiring professional licensing boards in Florida to set standards for assessing and treating sex offenders. Dr. Kazar is President of the Forensic Division of the Florida Psychological Association and has been a Member of its Board of Directors. He was nominated on behalf of FPA by Dr. Warren J. Rice, FPA President.

Dr. Kazar is not the first ABPP-certified specialist to receive the Heiser Award. Executive Officer **David R. Cox** was the 2001 recipient and his father, **Richard Cox**, was also a past recipient, making them the first father-and-son pair to be so honored.

In Memoriam: Nathan W. Perry

Nathan W. Perry, Jr., PhD, ABPP died from cancer in Tallahassee, Florida on December 1, 2007. For 20 years Nate was the Chair of the Department of Clinical and Health Psychology at the University of Florida Health Science Center, where he was a leader in the development of education and training, research and professional services in the areas of clinical health psychology, clinical child psychology and clinical neuropsychology. In addition he served as President of the Florida Psychological Association, President of the American Board of Health Psychology, President of the Assembly of Scientist-Practitioner Psychologists and President of APA Division 12. He was a fellow of APA Divisions 3, 12 and 38 and served on the APA Council of Representatives as well as its Board of Directors. Nate received numerous awards for his professional service. He was a strong advocate for psychology in public policy, and co-chaired the National Conference on Education and Training for the Professional Practice of Psychology, areas of leadership for which his passion never waned.

David R. Cox

Archival/Historical Descriptions of The Specialties

Clinical Neuropsychology

The American Board of Clinical Neuropsychology (ABCN) can trace its origins to the International Neuropsychological Society/American Psychological Association Division of Clinical Neuropsychology (APA Division 40) Joint Task Force on Education, Accreditation, and Credentialing in Clinical Neuropsychology which met in June 1981 to discuss the need to develop credentialing procedures in clinical neuropsychology. Because no credential existed at the time that could assure the public that an individual had the appropriate education, training, and clinical competence to practice clinical neuropsychology, the ABCN (www.theabcn.org) was organized and incorporated in August 1981. From its inception, the founding members of ABCN decided to pursue attachment to the American Board of Professional Psychology (ABPP), and a formal affiliation between ABCN and ABPP was established in 1983. ABPP is the only recognized body that has historically assessed competency in applied areas of psychology, and provides an umbrella organization for 13 psychological specialties in which board certification may be obtained.

Clinical neuropsychology was the first psychological specialty to be formally recognized as a specialty by APA's Commission for Recognition of Specialties and Proficiencies in Professional Psychology (CRSPPP) in 1996. Clinical neuropsychology is the specialty that applies the principles of neuropsychological assessment and intervention as it relates to normal and abnormal functioning of the central nervous system. The specialty is dedicated to enhancing the understanding of brain-behavior relationships and applies such

knowledge to human problems. Clinical neuropsychologists examine the cognitive and emotional consequences of neurological diseases and use the results to assist in diagnosis, monitor the progression of disease, determine efficacy of treatment, or to help formulate rehabilitation strategies.

Attainment of the diploma in Clinical Neuropsychology designates individuals as neuropsychologists who: 1) have had their credentials thoroughly reviewed, 2) have been subjected to a thorough examination of their knowledge and practice by their peers, and 3) have been found competent to practice. Through ABPP, ABCN has awarded the diploma in Clinical Neuropsychology to 571 individuals as of May of 2006 who practice in a wide variety of settings in 46 states, the District of Columbia, and four provinces in North America and Mexico. The majority of clinical neuropsychologists work in hospital-medical centers, rehabilitation facilities, or medical clinics and roughly one-third are in private practice.

Examination of Diplomate candidates is accomplished in four major steps (refer to www.abpp.org or www.theabcn.org for application information and materials). Applicants first submit documentation of appropriate education, licensure, practice, and specialty training in clinical neuropsychology. For step two, candidates must pass a 100-item, multiple-choice Written Exam which is administered three times a year at major neuropsychological professional meetings. Following successful completion of the Written Exam candidates proceed to step three: submission of two Practice Samples which are representative of

the candidate's day-to-day work in clinical neuropsychology. The Practice Sample contains a report of a neuropsychological evaluation, as well as the relevant background of the patient and other supportive material (i.e., raw data) necessary for the ABCN reviewers to judge the candidate's skills. After the Practice Samples are judged acceptable, candidates are scheduled for the fourth and last step, Oral Examination which is held each year in May and October at the Rush University Medical Center in Chicago, Illinois.

The Oral Examination presents candidates with situations that allow them to demonstrate the breadth and depth of their professional experience, knowledge, skill, and reasoning ability. A three-person Oral Examination committee works to discover how the candidate conceptualizes, evaluates, and manages neuropsychological problems. The Oral Examination has three components: Fact Finding, Practice Sample, and Ethics and Professional Issues. Every attempt is made to include one or two examiners in pediatric or adult neuropsychology, depending on the candidate's expressed preference. Each examiner rates the candidate's performance on (1) Evaluative Skills, (2) Intervention Skills, (3) Scientific and Professional Knowledge, (4) Ethics and Social Responsibility, and (5) Professional Commitment. More detailed information about the ABCN examination is provided in a 76-page study guide developed by the American Academy of Clinical Neuropsychology (AACN). The AACN Study Guide may be obtained online at the following address: www.theaacn.org/study/.

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Cognitive and Behavioral Psychology

The American Board of Cognitive and Behavioral Psychology (ABC&BP), a specialty board of the American Board of Professional Psychology (ABPP) certifies Psychologists at a specialty level of professional competence in one or more of the following sub-areas of the behavioral therapies: Applied Behavior Analysis; Behavior Therapy;

Cognitive-Behavior Therapy & Modification; and Cognitive Therapy. The board was originally incorporated in 1987 as the American Board of Behavioral Psychology (ABBP) and affiliated with ABPP in 1992. Psychologists with training and experience in the broad areas of cognitive and behavioral psychology are encouraged to seek board certification through the ABC&BP.

Cognitive and Behavioral psychologists are employed in many settings, including hospitals, schools, Universities, and in the private practice sector. Cognitive and behavioral psychologists utilize techniques developed from cognitive and social learning theories that have demonstrated efficacy in many clinical trials for a variety of human problems.

Counseling Psychology (ABCoP)

The American Board of Counseling Psychology (ABCoP) is one of the original specialties recognized in 1947 when the American Board of Professional Psychology (ABPP) was founded. The ABCoP is responsible for establishing criteria related to the definition, education, training, competencies, and examination leading to certification as a specialist in Counseling Psychology. The ABCoP is governed by a board composed of members certified in Counseling Psychology who represent the specialty on a national basis.

The definition used to determine if an applicant has been functioning as a Counseling Psychologist is taken from *The Diplomat in Counseling Psychology*, which states:

A Counseling Psychologist facilitates personal and interpersonal functioning across the life span with a focus on individual, group, and community interventions for emotional, behavioral, vocational, and mental health problems using preventative, developmental, and remedial approaches, and in the assessment, diagnosis, and treatment of psychopathology. Counseling Psychologists participate in a range of activities including psychotherapy, assessment, teaching, research, supervision, career development and consultation. They employ a variety of methods closely tied to theory and research to help individuals, groups and organizations function optimally as well as to remediate dysfunction.

ABCoP now examines Counseling Psychologists in several areas of competence reflecting the wide-range of practice settings in which member of our specialty including Counseling involving assessment and intervention in mental health settings; Career and Vocational Intervention with occupational and employment issues; Consultation in mental health, educational, governmental, employment and/or other settings; Counseling and/or Academic Administration/Management; and Teaching and/or Supervision including supervision of mental health professionals and/or teaching in professional counseling skills.

The process of becoming a Board Certified Counseling Psychologist is accomplished in three major steps. Psychologists who believe their training and experience meet the basic requirements listed below are encouraged to apply. Applications are accepted throughout the year. A check for the application fee should be included with the application. After the application has been received, applicants will be sent any additional forms, which may be necessary to complete their application, and will be asked to arrange for official transcripts of graduate credits to be sent to the Central Office. All applicants shall submit a copy of their vita/resume along with ABPP's basic application form, which is available from Central Office or at the ABPP website. Graduates of an American Psychological Association approved Counseling Psychology Program shall provide endorsements from two psychologists. Graduates of all other programs shall provide

documentation of their functioning as Counseling Psychologists from two psychologists. On successful review of the submitted credentials, applicants will receive a letter stating they are candidates for the examination process. The Practice Sample should be submitted within one year after receiving this notice of candidacy. Registration for, and completion of, the Oral Examination should take place within one year of satisfactorily completing the Practice Sample. Short extensions can be obtained by requesting them from ABPP's Administrative Officer.

Psychologists seek board certification through ABCoP for different reasons, but almost all who have gained the credential talk about how much they learned while preparing for the examination process and the both personal and professional satisfaction the award has carried with it as well as the collegiality that characterized the process. Board Certification is increasingly an expected aspect of practice in our specialty and is readily recognized as an important peer and professional recognition for practice by our legal and medical colleagues. Additional benefits of Board Certification include CEU's for the examination process, a reduction in malpractice insurance and salary increases for members of the military and Veterans Administration Psychologists. Please contact ABPP for an application for Board Certification in Counseling Psychology through its website at www.abpp.org.

Couple and Family Psychology

Definition & Description: Couple and Family

psychology represents a paradigm shift from contemporary individualistic psychology to understanding human behavior, psychological assessment, and intervention based on a systemic perspective and model. Family psychology conceptualizes human behavior in a matrix of reciprocal interaction between intrapersonal, interpersonal, environmental, and macrosystemic factors. Couple and Family Psychology focuses on assessment, treatment, and consultation with the individual, couples, families and other systems and considers the important areas of:

- The context in which various systems are embedded
- Identification of patterned interactions
- Accounts for developmental processes over the life span
- Recognizes the centrality of issues related to diversity and culture

The specialty of Couple and Family Psychology is not confined to couple and family therapy, but rather represents a comprehensive application of the science and profession of psychology with individuals, couples, families, and family subsystems. Psychologists specializing in Couple and Family Psychology stress the centrality of understanding and constructively changing the family unit or subsystems, as well as facilitating change with the individual. Specialists in the field also acquire knowledge in such areas of human functioning as:

- General systems theory and its applications to families and groups as a social system
- Life-span human developmental science
- Assessment, personality theory, and psychopathology
- Couples dynamics and treatment
- Group and organizational dynamics
- Ecological psychology
- Communication theory
- Theories and methods of sociology and anthropology

- Family life cycle including legal and ethical issues
- Methods of family research

Historical Development of Couple and Family Psychology: The importance of couple and family intervention is historically rooted in the Child Guidance movement in the early 1900's. In this early movement the focus of treatment was on the child's family environment where the child's symptoms were seen to be the result of tensions within the family. We now know that symptom formation is more complex, encompassing the biopsychosocial model, a true systemic model of conceptualizing behavior.

In 1958 at APA, the Academy of Psychologists in Marital, Sex and Family Therapy was formed. The 1960's and 1970's saw the growth of theoretical orientations and training institutes in couple and family therapy. In 1984 the APA Council of Representatives approved the Division of Family Psychology as APA Division 43. In 1990 the American Board of Professional Psychology (ABPP) recognized Family Psychology as a specialty and the American Board of Family Psychology (ABFamP) and the Academy of Family Psychology were created. A further evolution in Family Psychology occurred in April 2007 when the ABPP Board of Trustees unanimously approved a name change to The American Board of Couple and Family Psychology (ABCFP), which reflects and encompasses more accurately the focus of education, research and practice in the specialty area. The ABCFP is responsible for establishing criteria related to the definition, education, training, competencies, and the examination process leading to board certification in family psychology. The purpose of the Academy is to provide a forum for board certified family psychologists as well as advance family psychology as a science, and as a means of promoting family welfare through specific functional duties and responsibilities. The crowning jewel in the development of family psychology occurred in 2002 when APA's Council for the Recognition of Specialties and

Proficiencies in Professional Psychology (CRSPPP) approved family psychology as a specialty.

Board Certification: Board certification assures the public and the profession that the family psychologist specialist has successfully completed the educational, training, and experience requirements of the specialty including an examination designed to assess the competencies of: Assessment and Intervention, Science Base and Application, Ethics and Legal Foundations, Professional Identification, and Consultation and Supervision. Board certification involves three stages:

Stage I: Application and credential review by the ABPP Executive Officer for compliance with general doctoral degree and licensure requirements, followed by review by the Family Psychology Specialty Board for fulfillment of specific requirements of the specialty. Upon favorable review and verification the applicant becomes a candidate for certification and moves to Stage II. The regional examination coordinator is notified that a person has passed the credentials review and appoints a chairperson for the person's committee, who in turn finds two other suitable committee members.

Stage II: Two practice samples of videotapes and transcription of sessions (Assessment and Intervention) and a Professional Statement are submitted, in accordance with clear instructions. A mentor for this stage is available from the Academy of Couple and Family Psychology. The practice sample should reflect the candidate's usual practice of couple and family psychology. ABPP Central Office reviews this stage for completeness and the examination committee reviews the practice sample and determines the acceptability of the practice sample. If revisions are needed the practice sample is sent back to the candidate for the revisions. Once the practice sample is accepted the candidate moves to Stage III, the Oral Examination.

Stage III: The same examination committee appointed in Stage II

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Forensic Psychology

The American Board of Forensic Psychology (ABFP; www.abfp.com) originated from a Specialty Certification Study Committee of the American Psychology-Law Society (www.ap-ls.org). ABFP was established in 1978 to protect consumers of forensic psychological services by establishing, promoting, and revising the standards and qualifications for those who practice forensic psychology, and certifying as specialists in forensic psychology those voluntary applicants who qualify under the standards established by the board. ABFP currently operates as a specialty board of the American Board of Professional Psychology (ABPP; www.abpp.org).

Forensic Psychology, which is now recognized as a specialty by the American Psychological Association, focuses on the interface of psychology and the law. ABFP defines the forensic specialty broadly as the application of the science and profession of psychology to questions and issues relating to the law and the legal system. Practice areas of Diplomates in forensic psychology include, but are not limited to: forensic examination in criminal and civil contexts (the most common activity of those who hold the forensic diploma), arbitration and mediation services, legal consultation, litigation support, and research and teaching in forensic psychology.

Holders of the ABFP credential include clinical psychologists, clinical neuropsychologists, counseling psychologists, school psychologists, and industrial-organizational

psychologists. Some forensic Diplomates devote all of their professional time and energy to forensic matters, while others have practices characterized by a mix of therapeutic and forensic activities. The large majority of the approximately 230 forensic Diplomates are in private practice or provide administrative or clinical services in institutions, whereas a minority of forensic Diplomates identify their primary employment to be in academia. What ties all of these Diplomates together is the application of their expertise to matters that are legal or forensic in nature.

Examination of Diplomate candidates is accomplished in three major steps (go to www.abfp.com or www.abpp.org for application information and materials). First, applicants must submit documentation of appropriate education, licensure, practice, and specialty training in forensic psychology. Next, candidates must pass a 200-item, multiple-choice examination designed to ensure breadth of knowledge in forensic psychology. Finally, candidates must submit and successfully defend, in an oral examination, two practice samples. These practice samples, and the associated oral examination, provide a vehicle by which to assess the candidate's ability to apply psychological knowledge and skill in legal/forensic contexts. Each of the two practice samples should demonstrate the candidate's competence in a separate and distinct practice area of forensic psychology. Although the majority of candidates

submit for review and defense two forensic evaluations that they have completed, other types of work products are considered as well (e.g., a professional publication or continuing education workshop that was authored by the candidate which demonstrates forensic knowledge and skills).

ABFP, in addition to certifying and credentialing forensic psychologists, also is responsible for publication of the Specialty Guidelines for Forensic Psychologists, in conjunction with the American Psychology-Law Society. These guidelines, which are currently being revised, provide guidance for all psychologists when providing forensic services. ABFP also enjoys a close relationship with the American Academy of Forensic Psychology (www.abfp.com), which offers continuing education programming in forensic psychology practice, sponsors various awards, and operates a list-serve for AAFP fellows/ABFP Diplomates.

Psychologists seek board certification through ABFP for different reasons, but almost all who have gained the credential talk about how much they learned while preparing for the examination process, as well as the collegiality that they enjoy with their fellow Diplomates. Forensic psychology as a professional pursuit has received increasing attention in the last decade, ABFP has seen an increasing number of applications, and the number of board certified psychologists has grown accordingly. ABFP continues to actively seek applications from qualified psychologists.

Group Psychology

The American Board of Professional Psychology (ABPP) Specialty Diploma in Group Psychology has its origins in Division 49, Group Psychology, of the American Psychological Association. With the seminal discussions of the formation of an Academy of Group Psychology dating back to the late 1980s, the formal process of application for specialty recognition

and affiliation with the ABPP spanned a series of years in the early 1990s. By 1999 there were thirty Specialty Diplomas in Group Psychology awarded by the ABPP.

When candidates make their way through the steps of application and successfully complete the examination process in Group Psychology they are awarded membership in the American Academy of Group Psychology. The Academy is administered by a board

of directors elected from the membership. The purpose of the Academy is to promote the practice of group psychology. To quote from our website at www.aagp.net:

The Academy's mission is to educate the professional community to the value of the Diplomate for both the individual practitioner and to the

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Specialty Boards

Clinical Child and Adolescent

The American Board of Clinical Child and Adolescent Psychology (ABCCAP) met in August of this year in Niagara-on-the-Lake, Ontario, Canada, in conjunction with the American Academy of Clinical Child and Adolescent Psychology, and concurrent with the Fifth Biennial Niagara Conference: Evidence-based Treatments for Childhood and Adolescent Mental Health Problems. Board members were active at the conference, including presentations by **John Lochman** and **John Piacentini**, and several exams were conducted. The number of Child ABPP Diplomates is now nearing 100 individuals.

Board activities for 2007 included revision of the ABCCAP Examiners Manual which is now posted on the ABPP website, development of an ethics vignette guide including several vignettes and administration procedures by **Jim Johnson**, and an online survey of the Academy of Clinical Child and Adolescent Psychology membership spearheaded by **Michael Roberts** which will be used to guide future outreach efforts. Other ongoing child and adolescent post-doctoral training sites and travel for Board members and other child Diplomates to attend local, regional, and state psychological association meetings and other conferences to present the benefits of ABPP certification.

The Board will continue its policy of meeting in conjunction with leading clinical child and adolescent psychology conferences with the next meeting to be held in Miami Beach, FL, April, 2008, concurrent with the National Child Health Psychology Conference. Following prior practice, ABCCAP will serve as a sponsor of the concurrent Conference.

New officers for 2008 include **John Lochman**, President; **Philip Kendall**, Past President; **John Piacentini**, President-Elect and Exam Coordinator; **Jim Johnson**, Secretary/Treasurer; and **Mary Fristad**, Credentials Review.

John Piacentini

Counseling

ABCoP experienced a number of changes and accomplishments during the last year. One major accomplishment was the completion of the Periodic Comprehensive Review (PCR). Guided by **Arnold Spokane** ABCoP reviewed its policies and procedures, revised its Candidate Manual and received a site visit by **Christine Nezu** and **David Cox**, the ABPP Executive Officer. We express our appreciation to Nezu and Dr. Cox for their thoughtful and helpful site visit.

The ABCoP Board will experience a significant change of members. **Jairo Fuertes**, who has served as the Oral Examination Chair, **William Parham**, who served as the President of the Board and the Board of Trustees (BOT) Representative for ABCoP, and **Tom Skovholt**, who served as the President of the Board will leave the Board in December 2007. We express our deep appreciation for their service over the years.

Charme Davidson has been elected as the new Board of Trustees Representative. Dr. Davidson is the President-Elect of ABCoP and will begin her service as President beginning January 2008. **David Welch** ends his term as President effective December 31, 2007.

The American Academy of Counseling Psychology (AACoP) has been served effectively and well by **Steve Eichel** who will end his term at the end of 2007. Dr. Eichel also served as the Liaison to the ABCoP Board. We extend our appreciation for his service and commitment to Counseling Psychology. **Ted Stachowiak** will assume duties as the President of AACoP in January 2008.

New publications from Members of the Board include two works by **Tom Skovholt** including *Helping Skills and Strategies* (with D. Rivers) (2007, Love Publishing, Denver, CO.) and *Ethics in Small Communities: Challenges and Rewards for Psychologists* (with J. Schank) (2006, American Psychological Association, Washington, DC.) **David Welch** published *Under Pressure and Overwhelmed: Coping with Anxiety in*

College (with C. Vye and K. Scholljegerdes) (2007 Prager Publishing, Westwood, CT).

David Welch

CORRECTION

The authorship of the article "History of the Counseling Psychology Specialty Board," published in the Summer 2007 (Volume 26, Number 2) issue, should be attributed as "Submitted by Arnold Spokane for the ABCoP Board." Please also note that "The material in this article was excerpted from the archival documents and manuals of the American Board of Counseling Psychology and reprinted here."

School

The ABSP accomplished a number of goals during 2006. Efforts to enhance examination components included the addition of a Midwestern site to the current 3 regional sites (Northeast, Mid-Atlantic, Southwest), an increase in trained examiner cohorts, the updating of ethical vignettes (e.g., adding diversity issues), strengthening of the sample review processes, on-going review of the examination manual, and updating of website information by **Jeff Miller**. Close collaborations with the Academy (AASP) were successful in supporting recruitment efforts and in coordinating the mentoring process, with **Irna Wolf** as liaison.

Representation and affiliation with professional organizations in school psychology have also expanded to include the Council of Directors of School Psychology (CDSPP), the Leadership Council on the Future of School Psychology, and consortia composed of Division 16 of APA, the National Association of School Psychology (NASP) and other

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Specialty Boards *(continued from page 16)*

leadership groups. **Michael Tansy** represents ABSP in the re-specialization task force of the Leadership Council. **Giselle Esquivel** represented the ABSP as president at a recent major interdisciplinary national conference funded by NSF on the "nexus between social competence and academic learning" held at the University of Maryland and led by **Hedy Teglassi**. Consistent with her role as member of the Board of Trustees of the ABPP, **Rosemary Flanagan** has been actively engaged in maintaining

us informed and representing our views as a group to the BOT.

A recent special governance meeting in Indianapolis, Indiana was held in preparation for the self study report and to hold elections for 2007. **Tom Huberty** was welcomed as new Coordinator of Examinations. **Shelley Pelletier** continues in her role as Treasurer. **Michael Tansy** also continues as Secretary and is now Director of Mentoring and Liaison with the Academy. **Irna Wolf** is the new Coordinator of Practice Samples

Giselle Esquivel is Past President and Credential Reviewer. **David McIntosh** was thanked for his many contributions and leadership role as president during '04-'05. **Hedy Teglassi** was congratulated as newly elected president for 2007. We look forward to continue to enhance the standards of competence and the recognition of the Diplomate level of professional development within the field of school psychology.

Academy News

AMERICAN ACADEMY OF CLINICAL NEUROPSYCHOLOGY

Members **Bob Bilder**, **Leslie Rosenstein**, and **Susan McPherson** began five-year terms on the Board of Directors in 2007. **Chris Grote**, **Robb Mapou**, and **Joel Morgan** rotated off the Board after years of service.

AACN's membership growth of adult and pediatric neuropsychologists who take and ass the written and oral examinations administered by the American Board of Clinical Neuropsychology (ABCN) has continued to be very strong. The total number of clinical neuropsychologists who have been board certified through ABCN surpassed 600 in early 2007. Record numbers of individuals are taking the written examination and the oral examination. Retention of membership in the Academy has remained high, at approximately 97%.

Andrew Colvin has taken over the online continuing education (CE) program associated with our official journal, *The Clinical Neuropsychologist (TCN)*, established in 2007 by **Richard Kaplan**. As is the case with the workshops at our annual conference, these credits are provided under the auspices of the American Psychological Association CE program, and are available to all psychologists, whether AACN members or not, with the cost for non-members set higher than that for

members. Affiliate members are able to obtain CE credits at the same rate as members.

The AACN 5th Annual Conference and Workshops was held in Denver in June 2007, and was quite successful. The meeting is open to all who are interested in clinical neuropsychology. **Ida Sue Baron** was given the Distinguished Neuropsychologist of the Year Award at the all-conference annual luncheon. The AACN 6th Annual Conference and Workshops will be in Boston at the Seaport Hotel June 19-21, 2008. Program Chair **Susan McPherson**, with assistance from **Ida Sue Baron** and **Robert Heilbroner**, has organized a very high caliber program. Topics to be addressed in the numerous continuing education workshops and other activities include preparation for the ABCN exam, pediatric neuropsychology, general neuropsychology, forensic neuropsychology, and professional practice issues. **Kerry deS. Hamsher** will be awarded the Distinguished Neuropsychologist of the Year Award for 2008 at the all-conference annual luncheon. **Mary-Ellen Meadows** and **John Crouch** will be organizing the awarding of continuing education (CE) credits. The scientific poster session will be organized by **Gina Rehkemper** and **Pamela McMurray**. **Sandra Koffler** is once again serving as Conference Coordinator and Annual Meeting Committee Chair. **Aaron Nelson** is the Local Site Committee Chair for the Boston meeting.

Oxford University Press has been partnering with AACN on a co-branded workshop book series. In advance of each annual meeting, several workshop presenters work with Oxford to create a brief text, with publication to coincide with the presentation of the workshop, and sales during and after the meeting. Thus far, the workshop series has published three tests (**Shane Bush** on ethics, **Greg Lamberty** on somatization, and **Mike McCrea** on mild traumatic brain injury), and there are several more under production. Each volume includes online CE and access to the workshop's archived slide presentation and enhancements, such as additional photographs or illustrations. A second co-branded book series with Oxford, distinctive in featuring more comprehensive books than the workshop series and either co-authored or co-edited by AACN members only, has also been established.

Committees to develop an outcome studies grant program and an outcome studies research consortium have been organized by **Leslie Rosenstein**, **Ted Peck**, **Kira Armstrong**, **Paul Moberg**, and **Greg Lee**. Related, an online tax-deductible donations program has been set up on the AACN website.

Jerry J. Sweet

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AMERICAN ACADEMY OF COUNSELING PSYCHOLOGY

What a great ride.

This is my last column as President of the American Academy of Counseling Psychology. Soon, the reins of the AACoP will be turned over to **Ted Stachowiak** of Texas A&M. Ted has been an active AACoP Fellow for many years and has also served on the Counseling Board; he will bring to the Presidency a level of experience and competence that I hope to attain some time in the second decade of this century. I look forward to serving as Past President.

As anyone who has ever read a word I've written in *The Specialist* already knows, these are challenging times for counseling psychology as a specialty, and for the Counseling Board and Academy in particular. However, I am significantly more hopeful as I leave this Presidency than I was coming in. Our recruiting efforts, including changes in our examination procedure, seem to be bearing some fruit. Our relationship with Division 17, the Society of Counseling Psychology, has become somewhat closer. With Ted and President-Elect **Sherry Benton** on board for the next four years, this relationship should grow even stronger.

This year the Academy was proud to present its two major awards to highly deserving counseling psychologists. The James Cossé Memorial Award went to **Charme Davidson**, a private practitioner after my own heart who treats trauma, dissociative disorders, grief and loss, and borderline and narcissistic personality disorders. You know, the easy stuff. As a full-time clinician, Charme has a special place in my heart. But she has been anything but the optime of the lone, isolated private practitioner. She has been a trainer of healthcare professionals, a consultant and a counseling psychologist educator. She has worked in a variety of settings, with diverse populations, with a broad range of issues and concerns. Charme clearly fits the mold that I believe to be among the defining characteristics of our specialty: She is adaptable and a perennial learner. She knows how to size up a complex situation and go



AACoP Annual Meeting: Back row, from left: Drs. Pollard, Stachowiak, Davidson, Welch, Benton, Skovholt, and O'Regan. Front row, from left: Drs. Eichel, Talley, and Spokane.

with the flow until the time is right to intervene or lead. She goes where she is needed. Her time and devotion to the American Board of Counseling Psychology is legend. While every Board member's time is valuable, I think it is also important to note that for a clinician like Charme, time is literally money. Every hour she spends on ABCoP business is one less billable hour. To me, that makes her contribution all that more significant. Aside from that, Charme's involvement with the Board has been nothing short of crucial. She served as the Coordinator of the Practice Sample Review process for 9 years. Equally important, she has opened her home to ABCoP, AACoP and ABPP members for some of the best home-cooked meals north of New Orleans and west of New York. For that alone, she was most worthy of this Academy honor.

The National Leadership Award, which has traditionally gone to a counseling psychologist outside the formal organizational structure of the Academy and the board, this year went to someone with very close ties to both. In presenting the National Leadership Award to **Dave Welch**, I felt humbled, at a loss even. As President of the ABCoP David has piloted a battered but very worthy ship through some difficult times, and although I for one believe we are finally headed toward better waters, there are still plenty of hazards to negotiate along the way. With new categories for certification, a revised examination procedure and a reenergized relationship with the Academy, Dave and the Board are

poised for a comeback. And Dave has done much more. After a series of academic appointments, Dave ultimately settled into his last full-time, preretirement position: Professor of Counseling Psychology and Dean of the APA-accredited Graduate School of Professional Psychology at the University of St. Thomas in Minneapolis. Dave has been an inspiration to his students and to the specialty. He has written, co-written and co-edited numerous books, book chapters and articles on topics ranging from social policy to humanism to psychotherapy to professional burnout. But to me the real Dave Welch came through in the words of his graduate students. When I was at the University of St. Thomas in Minneapolis, Dave's students talked openly about their mentor, and they had only accolades to relate.

The Academy sponsored or cosponsored two continuing education programs, one in Minneapolis and one in Delaware. Counseling psychology already has an influence on ABPP that far outweighs its numbers. If we can continue to be aggressive in getting our name out, I believe we will once again have the number to match our influence.

Steve K. D. Eichel

AMERICAN ACADEMY OF COUPLE AND FAMILY PSYCHOLOGY

The presidency of the American Academy of Couple and Family

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Psychology has traditionally proffered a presidential theme for the incumbent's tenure. For example, Dr. **John Northman**, my predecessor's theme was one of family psychology organizational unification, a theme his presidency carried out with distinction. I would like to propose a broadening of the notion of 'theme' to include a strategic plan of ongoing development of the family psychology specialty within ABPP.

The strategic plan would serve as a blue print for the life of the Academy. The Board of Trustees for ABPP has identified 9 strategic plan goals for the organization as a whole, which the AACFP may adapt for its own strategic planning. The AACFP proposed strategic plans goals consist of:

(1) Effective use of resources and enhancement of visibility to the public, i.e. consumers, agencies, other professionals.

a. *Our primary resource is academy members. Many of our members are involved in State policy making or are on regional or national psychology boards. The work that ABPP Diplomates are doing in Florida to get ABPP recognized there might serve as a template for the family psychology specialty. The idea is for us to use our individual and collective influence to promote the field of family psychology and especially ABPP.*

b. *We need to make sure that ABCFP is at the table when decisions are being made about the discipline of family psychology including definitions, policy making, education/training and research.*

(2) Improve our visibility within the profession by pulling together and sharing various marketing strategies

a. *The AACFP and the ABCFP are seeking to develop a strong alliance with other family psychology organizations, in particular Division 43 of APA, the Family Psychology Specialties Council and*

the Journal of Family Psychology. The Family Psychology Specialties Council has expanded its mandate to include coordinating common goals and activities of the various family psychology organizations associated with the ABPP and APA.

b. *Many professionals have a limited idea about what constitutes family psychology. The AACFP and the ABCFP have recognized that 'family psychology represents a paradigm shift from contemporary individualistic psychology to understanding human behavior, psychological assessment, and intervention based on a systemic perspective and model. Family psychology conceptualizes human behavior in a matrix of reciprocal interaction between intrapersonal, interpersonal, environmental, and macro-systemic factors. Family psychology focuses on assessment, treatment, and consultation with the individual, couples, families and other systems' (Ezzo, 2007). Such an understanding of family psychology makes it an applicable and often favorable paradigm in assessment, clinical and research settings.*

(3) Seek to better articulate and increase the value of board certification and increase the membership of the organization.

a. *The Academy has sought to increase the number of ABPP Diplomates in couple and family psychology through targeted recruitment efforts. We have sent recruitment letters and AACFP brochures out to all the Division 43 membership and to all Division 43 Fellows. There has been a significant response to these efforts and we are currently experiencing the largest pool of applicants in recent history.*

b. *One of the major motivating factors for applicants has been that*

Diplomate status may be beneficial for their clinical practices i.e. a higher salary, as with the VA, licensure portability among some states, or a more prestigious profile with third party payers. While all these motivations are actual and useful, we are looking for the tipping point where board certification becomes the industry standard rather than a value added aspect to practice.

c. *ABPP has established an Early Entry Application for graduate students enrolled in APA-accredited and ASPPB/NR designated psychology doctoral programs. Such students may begin their application to ABPP with a \$25 application fee. All members who are academics should encourage their family psychology students to apply for early entry (I have and have one student already who has applied).*

(4) Determine ways to improve the image of board certification and ascertain ways to reduce costs (money, workload, shame load) of certification.

a. *Another major resource is our structure. The AACFP board is seeking in the next year to revise the bylaws with more comprehensive definitions of offices and duties. For example, the board is outlining a set of guidelines for mentoring and for following the mentoring process of applicants who are in the 'pipeline.'*

The overarching goal is the strengthening and ongoing development of the AACFP and the ABCFP. The crafting of strategic goals and their implements will take several years. Input from couple and family Diplomates is welcome, in fact, strongly encouraged.

John Thoburn

Deceased Notifications (June 2007–February 2008)

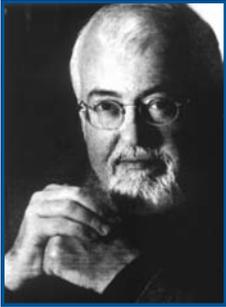
Bernard Brucker
John Stuart Currie

Carl Einhorn
Albert Ellis

Randall Evans
Stuart Greenberg

Nathan Perry

News from the Specialists



Byron P. Rourke is to receive the Distinguished Career Award from the International Neuro-psychological Society (INS) at the Society's

Annual Meeting in February. This is the first time that this award has been granted. Dr. Rourke was a charter member of INS in 1976 and served as its President in 1981. A journal that he co-founded and co-edited from 1979 through 1998 (*Journal of Clinical and Experimental Neuropsychology*) was adopted as the official journal of INS in 1985. He also co-founded and co-edited three other journals: *The Clinical Neuropsychologist* (1985-1998), *Child Neuropsychology* (1985-1998), and *Aging, Neuropsychology, and*

Cognition (1995-1999). Professor Rourke retired from the University of Windsor in 2004. More information about him and his continuing work is available on his website: www.nld-brouke.ca

At its annual Forum in November, the National Academies of Practice inducted **David R. Cox**, **Eugene J. D'Angelo**, **George P. Litchford, Jr.**, and **Kathleen M. McNamara** into the Psychology Academy as Distinguished Practitioners. **David A. Rodgers** is the current NAP President and **Howard Cohen** is Chair of the Psychology Academy.

Barney Greenspan has been appointed Chair of the Idaho State Board of Psychologist Examiners. He was formerly Vice Chair. He is now Board Certified in Clinical Child and Adolescent Psychology as well as in Clinical Psychology.

Joe Talley has just completed serving as the 2007 Chair of the

Awards and Recognitions Committee of APA Division 17 and will serve as the 2008 Chair of the Leona Tyler Award Selection panel.

Geoffrey R. McKee received the 2007 Chairman's Award for Outstanding Contributions to the Forensic Psychiatry Training Program of the University of South Carolina Medical School.

Mark Sherer has joined Memorial Hermann/TIRR as Director of Research and Director of the Psychology/Neuropsychology department. He also holds a faculty

appointment as Clinical Professor of Physical Medicine and Rehabilitation with the Baylor College of Medicine.



New Specialists (June 2007–December 2007)

Clinical

Travis R. Adams
Michael G. Cammack
Edrick H. Dorian
Julie K. Miller
William P. Reich
Roslyn E. Feierstein
Gary E. Ford
Harris L. Friedman
Frank E. Gantz, III
Melis Gazioglu
Lisa R. Grossman
Greg W. Jenkins
Deborah J. Lewis
Donald McAleer
Sean P. McDonald
David J. McIntyre
Rena Mei-Tal
Bret A. Moore
Ronald J. Saleh
Matthew D. Simon
Robert J. Vanecek
Richard Weiner

Clinical Child and Adolescent Psychology

Travis R. Adams
James J. Brush

Sandra A. Burkhardt
Barney Greenspan
Cynthia Harbeck-Weber
William E. Pelham
Molly K. Reid
Jennifer V. Schurman
Margaret A. Swank

Clinical Health

Travis R. Adams
Helen L. Coons
Maria Devens
Heather A. Kirkpatrick
Glenn M. Kaplan
James D. Meyer
Melodie K. Moorehead

Clinical Neuropsychology

James H. Banos
Richard Boada
Deborah Cahn-Weiner
Naomi S. Chaytor
Brian B. Combs
Sidney W. Dickson
Eric P. Ecklund-Johnson
Myron L. Goldberg
Renee A. Hudson
Howard A. Lloyd

Carol Anne Manning
Nathaniel W. Nelson
Marc A. Norman
Jacqueline D. Phillips
Beth K. Rush
David B. Salisbury
Simon Tan
Sharon M. Theroux
Seth G. Ubogy
Nancy L. Voight
Thomas R. Wodushek
John D. Wright
Weizhen Yu
Theodore A. Zabel

Cognitive & Behavioral

Kathryn E. Korslund
Steven A. Safren

Counseling

Donald Benson

Couple and Family

George K. Hong

Forensic

James N. Bow
Alexander C. Duncan

John Helminski
Jeffrey Kline
Kathleen M. O'Brien
Timothy J. Proctor

Group

Robert A. Farrell
Bennett E. Roth

Psychoanalysis

Marilyn Charles
Emily Ets-Hokin
Fred Millan

Rehabilitation

Michael S. Cohen
Serina L. Hoover
Trevan C. Pickett
Aida Saldivar
Cheryl L. Shigaki

School

Judith Kaufman

Message from the President *(continued from page 3)*

Historically, there has always been a recognition of ABPP's value as a "gold standard" for professional psychology that provides peer and public recognition of demonstrated competence in each of our designated specialty areas. Many previous articles have been published in various specialty newsletters and journals that articulate this message. However, if we are to realize our goal of exponential growth in the next 3 to 5 years, we bear the responsibility to disseminate this joint message of public confidence and professional opportunity to a wider audience. This audience includes current and potential individuals who are qualified to seek board certification, third-party payers, organizations and agencies in which psychologists practice, and jurisdictions who license and certify psychology practice.

As a means of better disseminating a clear and consistent message to all current and potential constituents, we will be fine tuning a "value statement" over the next month that will provide a statement of ABPP's value to the profession, the public, and all liaison organizations. Specific and increasing opportunities for the professional psychologist include areas of potentially greater employability, increased professional mobility, and increased compensation. For example, in a recent employment search reported by Dr. **Gregory Lee** of the Clinical Neuropsychology Board, over 30% of employment ads specified that board certification was expected or desired. Moreover, in a 2006 article in the *Clinical Neuropsychologist*, Sweet, Nelson, and Moberg (2006) reported on the salary advantages of board-certified practice. Similar situations have been reported for other specialties as well.

Our recent retreat resulted in an action plan by which we as an organization can liaison with other stakeholders interested in specialty competence and the development of a blueprint plan of action that we predict will instigate large growth in the number of ABPP certified specialists in the coming months and years. I would like to share with you the following action priorities, some of which are already in motion, with others to be enacted in the coming months.

- A statement of value will be developed by the executive committee using the suggestions generated by the Board of Trustees during the retreat.

- The Early Application Process, previously developed by Dr. Cox, will be further developed regarding the process of tracking candidates, facilitating mentorship, and promotion in doctoral programs, internships, and postdoctoral fellowships. Introduced at the APA Convention this past summer, the ABPP Early Application process allows the pre-licensed professional psychology candidate to submit a generic application to ABPP (it is not necessary at the initial stage to designate a specialty) for \$25, waiving \$100 of the usual \$125 fee. Their application is thus opened in the central ABPP office. As they accrue credentials (e.g., internship, doctoral degree, and postdoctoral experience), they are evaluated, and if approved, "banked" along the way in their file. At the time they are ready to actually apply to a specialty board and submit a practice sample, they will already be in the system with a solid sense of how exactly to proceed (if desired, a mentor may be provided through the relevant specialty board, and they will be notified about that process at the time of their eligibility). A few doctoral training programs have already agreed to submit applications for their candidates to give them a head start to candidacy.

- A joint Advertising, Marketing, and Communications Task Force will be convened to explore many ideas that were generated during our strategic planning sessions and weigh benefits, costs, and feasibility of the various alternatives generated. Some of these include possible continuing education symposia offerings, joint multi-specialty conferences, as well as other initiatives.

- A new ABPP Website Designer will be hired to help design a website that will reflect these new initiatives. As part of encouraging greater use of the website, and insuring greater distribution of *The Specialist* (but keeping costs low), *The Specialist* will be delivered electronically in the future. We will, however, print out and mail copies if specifically requested.

Of course, no action is possible without sources of revenue to invest in the future. As such, we developed an action plan to provide the revenue needed to implement all of these strategies toward growth. Some can be implemented quickly, such as increasing our fees to \$175.00 and \$50.00 for active board certified specialists and those in retired status, respectively. Additionally, Drs. Finch, Simon and I will co-edit a book, entitled, *Becoming Board Certified by the American Board of Professional Psychology (ABPP)* to be published by Oxford University Press. All royalties will go to ABPP and the book will serve as a user-friendly guide for board certification. Eventually, it will be available for purchase through our website and in bulk to the doctoral programs interested in our Early Application Procedure. The guide will not include specific specialty knowledge areas, but content that is descriptive and informative concerning the "process" of certification. It will be written in a conversational format, and contain references to link the reader with ABPP, specialty board and specialty academy websites, such that readers can gain more specific information about the specialty of interest. Although different authors will write each chapter, the book will be written as "one voice" and include chapters such as "who we are," "advantages of seeking board certification," "areas of competency that are typically assessed," "when to start the process," "how to complete a practice sample," "working with mentors," "pitfalls to avoid," and "suggestions regarding continuing education."

In another initiative that is designed to increase our resources, Dr. Finch will chair a small task force that will work with our attorney to establish ABPP as a 501(c)(3) entity. The recognition of a non-profit agency as a 501 (c) (3) tax exempt organization by the Internal Revenue Service offers numerous advantages, including the ability of donors to make charitable contributions and receive a tax deduction. Additionally, the organization may be qualified to receive private and public grant

(continued on page 22)

Message from the President *(continued from page 21)*

money, as well as discounted rates on corporate mailings. This would significantly pave the way for greater fund-raising opportunities. Finally, the task force that will study and make recommendations concerning offering conferences and seminars will be focused on increasing revenue.

I look forward to the next two years of service to ABPP. We have much to be proud of and our certification process is increasingly recognized as a major standard of specialty competency. There are now many states that recognize ABPP as a source of practice mobility, with more states getting involved each year. I look forward to collaborating with the Association of State and Provincial Psychology Boards (ASPPB) to work toward increased mobility for

psychology practice, while promoting competency and the integrity of the profession. There is increasing recognition of the importance of the ABPP credential by employers such as hospitals, health service systems, and organizations, such as the US Public Health Service, the US Department of Defense, and the Department of Veterans Affairs. Consistent with the broad range of specialty practice areas in professional psychology, increasing numbers of psychologists will be seeking board certification as a final important and necessary step in demonstrating their clinical competence to the public, third-party insurance, and the public.

As illustrated in our 60th Anniversary issue of *The Specialist*, change is part of our history, as the

number of its affiliated specialty boards has grown from 3 to 13. It comes as no surprise that our previous advances have involved acceptance and commitment to change. Insight and planful action is a choice. During the next two years, I am asking all of you to help us on the Board of Trustees and Central Office to choose wisely by getting involved in Specialty Board and Academy activities and communicating with those of us on the Executive Committee. Allow me to conclude by inviting you to contact me with questions, suggestions, or information that will help us implement our strategic plan for growth. Please accept my best wishes to all for a healthy and productive New Year.

From the Executive Officer *(continued from page 4)*

as at www.apa.org/ethics/code2002.html; and

(4) Has implemented and documented a comprehensive assessment procedure, designed to measure the competencies required to provide services characteristic of the specialty area, that describes security and grading standards, and consists of an oral examination and peer-review of practice samples and may include a written examination.

Specific Authority 490.0149, 490.004(4) FS. Law Implemented 490.0149 FS. History-New 11-1-07.

This rule is related to the legislative language (F.S. 490.0149) that follows: **490.0149 Specialties.**

(1) As used in this section, the term "certified psychology specialist," "board-certified psychology specialist," or "psychology Diplomate" means a psychologist with recognized special competency acquired through an organized sequence of formal education, training, experience, and professional standing that is recognized by a certifying body approved by the board pursuant to criteria adopted under subsection (3).

(2) A person licensed as a psychologist may not hold himself or herself out as a certified psychology specialist, board-certified psychologist, or psychology Diplomate unless the person has received formal recognition from an approved certifying body.

(3) The board shall adopt rules to establish criteria for approval of certifying

bodies that provide certification for specialties in psychology as provided in subsection (1). The criteria shall include that a certifying body: (a) Be national in scope, incorporate standards of the profession, and collaborate closely with organizations related to specialization in psychology. (b) Have clearly described purposes, bylaws, policies, and procedures. (c) Have established standards for specialized practice of psychology. (d) Provide assessments that include the development and implementation of an examination designed to measure the competencies required to provide services that are characteristic of the specialty area.

(4) A person licensed as a psychologist under this chapter may indicate the services he or she offers and may indicate that his or her practice is limited to one or more types of services when this accurately reflects his or her scope of practice.

ABPP has prepared and submitted application for recognition by Florida, and will hopefully be formally recognized by the time this reaches you.

Applications for Affiliation Update

In December 2006, the ABPP Board of Trustees voted to not accept for speciality recognition the area of *Pediatric Neuropsychology* as submitted

by a group called the American Board of Pediatric Neuropsychology (ABPdN). Concomitantly, it voted to encourage the American Board of Clinical Neuropsychology (ABCN) to engage in discussions with ABPdN to consider pediatric neuropsychology as a subspecialty of ABCN. The initial discussions began in early May 2007, with a subsequent meeting in June. ABCN has convened a committee to review the issue of subspecialties (not necessarily just pediatric). Discussions are anticipated to continue in this matter.

ABPP had anticipated that it would have received an application for affiliation for a group of individuals interested in having *psychopharmacology* become a specialty board. The group has continued to indicate that ABPP can expect an application for affiliation, although it has not been received to date and is therefore not up for consideration at this Board of Trustees meeting. The group reports representation from most, if not all, of the variety of RxP training models. Recent communications indicate that the group does still intend to submit the application in the near future.

Subspecialty Language

(continued on page 23)

The ABPP Executive Committee set aside a large portion of its agenda for its June 2007 meeting to consider if and how subspecialties might be established within ABPP. Initial drafting of language for subspecialty was completed, although it was determined that no formal implementation of this would occur until after the planned APA Taxonomy Task Force had a chance to consider the ABPP language, and ABPP had a chance to consider feedback from that group, as well as other groups. The language follows in italics:

- *Definition of a Subspecialty – A subspecialty is an identifiable area of practice that requires special educational, training, and/or professional experiences. A subspecialty may involve specific (1) problems, (2) populations, and/or (3) methods. A subspecialty is a concentrated area of knowledge, skills, and attitudes that is a focus within at least one existing specialty area.*
- *Definition of a Specialist in a Subspecialty – The specialist in a subspecialty demonstrates competence through focused knowledge, skills, and attitudes in the subspecialty. To qualify, the psychologist must be certified by a specialty board of the American Board of Professional Psychology and devote a significant portion of time to the subspecialty.*

Early Entry Option

ABPP has established an Early Entry Option for graduate students enrolled in APA-accredited and ASPPB/NR designated psychology doctoral programs, as well as other pre-licensure individuals (interns, residents). Such individuals may begin their application to ABPP with a \$25 application fee. No additional application fee will be necessary. The Early Entry Option will not include any special consideration other than the discount. Credentials review, examination and such will continue as usual. Early Entry Option applicants will not need to identify the board within which they seek to be examined at the application date, but may so specify a later date. ABPP

is encouraging graduate programs to consider underwriting the application fee for students, providing a professional “gift that keeps giving” in an effort to encourage their students toward ABPP board certification and excellence in professional psychology. Several institutions, including professional school and university programs, have agreed to sponsor their students in this fashion.

Continuous Quality Improvement through Periodic Comprehensive Review

ABPP has been undertaking what we call Periodic Comprehensive Review (PCR) of each specialty board. The following have undergone review: Clinical Psychology, Counseling Psychology, School Psychology and Clinical Neuropsychology.

Recognition with the Department of Veterans Affairs

We are proud to have the Department of Veterans Affairs recognize the value of ABPP. The DVA has initiated a program to encourage attaining board certification through ABPP and rewarding psychologists who obtain ABPP specialty certification with a significant salary increase.

Reciprocal Discount between ABPP and ASPPB

ABPP and ASPPB have agreed on the following: Psychologists who have a CPQ will be granted a \$100 discount on the usual \$125 ABPP application fee. Psychologists who have ABPP will be granted a \$100 discount on the usual \$200 fee for CPQ.

ABPP Strategic Planning

ABPP recently undertook a very productive Strategic Planning session at its November/December Board of Trustees meeting. Input from all ABPP-affiliated boards and academies has been sought and welcomed as part of that planning. As a result of the strategic planning session, I will

be increasing my time with ABPP to full-time. Over the course of the coming year, we will begin to see the payoff of the strategic planning as a variety of committees start working on issues such as the Early Entry Option,



Ms. Judy Cline and Assistant EO Nancy McDonald

increasing diversity within ABPP, improving communications and web presence and other areas. We continue to desire improvement in our web presence. Along these lines, I have sought input from many of you (and continue to do so) who may have contacts with web and database firms or individuals that I might look to as we seek proposals to redesign our presence.

Updates on Central Office

Nancy McDonald and Judy Cline have served us very well this past year. They are to be commended on their hard work, diligence and steadfast loyalty to ABPP. Their efforts have been appreciated by many, as is attested to through the numerous unsolicited positive comments about them that have been provided to me by ABPP specialists as well as others. Thanks go to them!

Rob Stangroom, our current web master, has taken a full time job that precludes him from continuing to assist us. We thank him for his help over the past few years.

I have enjoyed my time with ABPP. Engaging in the numerous committees and activities has had me on the road much more than originally anticipated (97 days the first full year!), but I believe that is serving ABPP quite well. I look forward to continuing to work with all of you and the others within ABPP in the coming years as we continue to improve our visibility, worth and presence in the profession of psychology.

based practice no matter what the area of practice and, as with most new initiatives, it is off to a rocky start. This is because governments and policy makers are unanimous that we should be moving to outcomes measurement in almost every area of service provision, but in many cases have not settled on the best methods for accomplishing this. This is a process that will play itself out over the next several years until consensus develops on the best ways to integrate outcome measurements in health and educational systems, and this consensus should and will be based on the full participation of all stake holders. This development will then get us past the problem of yet another unfunded mandate on practitioners requiring these individuals to carry out outcome measurements on their own time and with their own money. Nevertheless, outcomes measurement will ultimately highlight competence and quality that are evident in doctoral level practitioners of psychology who have achieved specialty certification.

Recent evidence of the promise of outcomes measurement has been widely noted in the field of cystic fibrosis. This devastating medical condition is ordinarily treated in specialty clinics around the country. As eloquently described by Gawande (2004) policy makers and third party payers persuaded these clinics several years ago to begin administering more uniform and valid outcomes measures under strict provisions of confidentiality (as requested by the centers) such that individual centers providing the services not be identified. These confidentiality provisions were motivated, of course, by the possible fall out or misinterpretation of data indicating less than optimal outcomes in a given center. As data were collected and shared among the centers, it became clear that one center was doing far better than the others in terms of increasing quality of life and survival time. At this point the remaining centers (still operating under anonymity) all requested that the leading center be identified so that the remaining centers could ascertain why and how they were achieving such superior results. A center in Minnesota

was identified and remaining centers quickly arranged to compare notes, visit and learn just what was happening at this leading center, how current practices differed from other centers, and how these differing procedures could be rapidly incorporated in centers across the country. The result was improved patterns of care for all patients and closer collaboration and cooperation among the centers on new advances.

A number of state psychological association officials have noted that outcomes measurement holds the promise of highlighting the superior services provided by board certified specialists since these findings are increasingly evident in research settings.

Psychological Drugs

A final area where competence and quality of care are emerging as crucial factors focuses on combinations psychological and pharmacological treatments for various mental disorders. Until recently, there has been a widespread belief that combining psychological treatments with pharmacological treatments might produce a better outcome than either treatment alone. Of course, this is true for psychotic disorders such as schizophrenia where psychological treatments directed at both positive and negative symptoms as well as social skills training as much as double the beneficial effects of medications. But for the emotional disorders, data on the beneficial effects of combining treatments are surprisingly sparse. For the anxiety disorders specifically, there seem to be no beneficial effects whatsoever.

In fact, to date there has been no good theoretical reason why combining drug and psychological treatments in the anxiety disorders would be effective. But now, based on exciting new research from neuroscience isolating brain circuits active in the learning and unlearning of fear and anxiety, new developments have occurred. Specifically, a drug called D-cycloserine, an old antibiotic, has been found to be synergistic with psychological procedures that enhance the extinction of fear and anxiety responses by acting as a partial agonist of the NDMA neurotransmitter

system which plays a major role in this type of learning. This drug is administered acutely, meaning that it is only taken just before the psychological treatment (exposure based session) begins. Several clinical trials have demonstrated that this drug does enhance competently administered psychological exposure based treatments for the anxiety disorders (e.g. Hofmann et. al 2006). Research is now rapidly expanding to other anxiety disorders. Promising leads are currently being pursued for Other pharmacological compounds that may enhance the effects of psychological treatments. If these results are confirmed, the logical group of professionals to administer these synergistic treatments would be doctoral level psychologists with specialty training.

It is noteworthy that the demand for admission to our training programs in psychology continues to soar. At my own university over six hundred individuals apply each year for ten slots in the clinical psychology program. At our neighboring professional school, the Massachusetts School of Professional Psychology, where I am privileged to serve on the Board of Trustees, well over three hundred applicants apply each year and the numbers are increasing. What this means, as was always the case, is that we are attracting "the best and the brightest" to our profession. I believe that the competence of these individuals will prove to be more highly valued in the years to come.

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The Periodic Comprehensive Review: Thoughts from the Clinical Board

(continued from page 9)

exhibited by our two reviewers and integrated them into the process of our examinations, as well as our Board meeting.

On October 10, 2006, we received the highly anticipated response from Drs. Cox and Rosenthal. In all, we were very pleased with the feedback we received, particularly that which recognized the quality of the extensive work we had done revising the *Examiner's Manual*. In fact, it was lauded as being a "model" for Specialty Boards. The comments about our examination process were not only rewarding, but also helpful and thought-provoking. A variety of issues were raised (e.g., areas covered well and not as thoroughly in our exam, questions about or Senior Examination process, manner in which examinees are examined). Questions about the standardization and operational definitions of our current exam criteria were particularly helpful. It forced us to revisit again our present scoring criteria which evolved from one where scoring had been based on extremely structured numerical tallying of competencies. This was abandoned over time as it was considered to be seriously flawed because of problems inherent in such a rigid numeric cut off for passing and failing. Also of importance, were issues regarding "fail letters" and how these need to be clearly based on the competencies described in our newly revised Examination Manual. Our Board has experienced some difficulties with BOT Standards Committee regarding "failed" decisions. This process led to frank discussions about this that hopefully will lead to a clarification of the appeals process in the future.

Much self-reflection also occurred in drafting our response to the PCR review. Overall, we felt that their

feedback was helpful and would be very useful in our efforts to fulfill our mission which is to certify that successful candidates have completed the education, training, and experience requirements of the clinical psychology specialty within ABPP. We were able to review again the hard work we have put in over the years to train our examiners in the "new" bar that had been set by the BOT--namely, that specialty level standing is conceptualized as higher than basic level of competence certified by jurisdictional licensure, but within the reach of most experienced practitioners in professional psychology. Again, we reflected on how this "change in the bar" about what board certification means has certainly not been an easy one for our Board and why this is discussed at every one of our semi-annual board meetings. It has involved a conscious effort on the part of our Board to change the "mind set" of what being a Board Certified Psychologist means, particularly those who still view the standard as a "watering down" of the credential. This issue still remains, certainly in our specialty, as it does in others. We support this also and it needs to be further addressed by all of the specialty boards. We strongly feel that it is important for the BOT to continue their efforts not only standardizing, but also maintaining the quality of the examinations across the 13 specialties utilizing this standard.

As a number of other Boards, the reviewers commented that our standards for passing the practice sample "may be set relatively low," particularly in so far as it pertains to the Senior Option. We reaffirmed our commitment to the fact that there is really only one type of exam and one

bar for the candidate to pass, whether the candidate has just come out of post-doc experience or has spent 30 years practicing as a clinician.

In all, we found that going through this process was helpful and that our on-going internal process of quality review and improvement.

In addition to responding to the specific observations and suggestions by the PCR Review Committee, this process provided us with an opportunity to provide formal input to the BOT about issues we consider important for ABPP as a whole. Among others, this involves clearly working will all of the Boards regarding the "basic level of competence bar" established by the BOT so that there is consistency across the various specialties. In addition, our Board is extremely supportive of the marketing efforts made by the BOT, as these are viewed as absolutely essential for ABPP to flourish. Another issue we feel that needs continued discussion pertains to "adding" or "subtracting" specialty boards from the current mix of 13 specialties. The possibility of creating sub-specialties under a more generic board needs to be considered.

In all, we felt that the PCR accomplished what it was designed to do--namely, provide an effective mechanism for quality assurance review. We applaud the BOT for implementing such a quality assurance process.

In closing, we were especially saddened to hear the untimely passing of Dr. Rosenthal. His professionalism, honesty, and thoughtfulness made the review process a particularly valuable experience for our board.



ABPP

SPECIALTY CERTIFICATION
IN PSYCHOLOGY SINCE 1947

Clinical Neuropsychology *(continued from page 12)*

There are additional resources besides the AACN Study Guide available to assist Diplomate candidates through the application and examination process. ABCN preparatory workshops are held at most major neuropsychology conferences including the annual meetings of the International Neuropsychological Society, National Academy of Neuropsychology, and AACN. These ABCN examination workshops give an overview of what to expect and tips on how to progress. There are also opportunities to ask questions and, if you are ready, to practice oral examination procedures. There also is a Mentorship Program sponsored by the AACN. Candidates who have had their credentials accepted to proceed with the examination process have the opportunity to request a mentor to help them prepare for the various steps. Mentors are ABCN board-certified neuropsychologists who have agreed to donate a limited portion of their time to assist candidates in preparing for the written examination, select cases for work samples, and

conduct mock oral exams. Although not required to sit for any of the components of the board certification process, the assistance of a mentor can be of considerable help to candidates. For more information on AACN's Mentorship Program, go to www.theaacn.org/study/mentorship.pdf. A further resource consists of a more informal group of Diplomate candidates who assist one other through the examination process called BRAIN (Be Ready for ABPP In Neuropsychology). In addition to maintaining a website with information about each phase of the application and examination process (www.cincinnatichildrens.org/svc/alpha/n/neurobehavioral/brain/), BRAIN hosts a list-serve for BRAIN group members that is designed to act as a forum for developing study groups and for soliciting examination preparation tips (see www.cincinnatichildrens.org/svc/alpha/n/neurobehavioral/brain/howtojoin.htm for instructions on how to join).

Board certification in clinical neuropsychology via ABPP/ABCN continues to grow at a steady pace.

This may be due in part to the fact that virtually all of clinical neuropsychologists' medical colleagues are board certified, and thus, there is an expectation at neuropsychologists' worksites that they also be board certified. Beyond serving the profession, ABPP and ABCN also serve the public by reviewing, examining, and certifying clinical neuropsychological practitioners. The evolution of ABCN's standards and procedures has paralleled clinical neuropsychology's maturation. Clinical neuropsychologists achieve ABPP/ABCN certification by completing rigorous, but fair, credential review procedures and both Written and Oral Examinations. Any appropriately educated, trained, supervised, and experienced clinical neuropsychologist should be able to obtain ABPP/ABCN certification. ABPP and ABCN are committed to maintaining our profession's highest standards, and both organizations will continue to adapt and grow as the specialty of clinical neuropsychology advances in the future.

Couple and Family Psychology *(continued from page 14)*

conducts the oral examination. In this collegial process the Chair attempts to select examiners whose areas of theoretical orientation, practice, and professional interests are similar to those of the Candidate. Standardized ethical issue vignettes are used as part of the examination, which preferably takes place at an APA Annual Convention or at the American Board of Couple and Family Psychology mid-winter board meeting. The collegial oral examination typically takes three to four hours.

The results of the examination are forwarded to the Executive Officer of ABPP and the successful candidate is then awarded a Diploma Certificate and encouraged to attend the Annual Convocation held in conjunction with the APA Annual Meeting.

Senior Track: A Senior Family Psychologist track is available to psychologists with fifteen or more years of practice as a couple and

family psychologist- as a clinician, researcher, academician, supervisor and/or consultant. The Senior Track Couple and Family Psychologist must also meet 6 of 9 criteria for recognized, substantial contributions to the practice and science of Couple and Family Psychology.

Benefits of ABPP Certification in Couple and Family Psychology:

- "Gold standard" of professional practice
- Provides for potential increased financial and professional recognition
- Provides a clear recognition of specialization
- Addresses the increased demand for specialty credentials
- Reflects a higher standard of expertise over basic licensure
- National recognition
- Distinction in the Field
- Enhanced collegiality
- Increased visibility

- Lower malpractice insurance premiums from the American Professional Agency
- Licensure mobility in various formats currently in 34 states and District of Columbia

Finally, the Board Certification process in Couple and Family Psychology helps one to crystallize his/her theoretical views and assessment/intervention strategies into a more coherent and integrated model of Couple and Family Psychology. Board certification contributes to raising public awareness and respect for board certification in specialty areas of psychology.

For additional information go to: abpp.org and click on links specific to board certification in Couple and Family Psychology or call the ABPP Central Office for more information @ 1-800-255-7792.

Frank Ezzo

development of the entire discipline of "Group Psychology." The Academy serves as an independent body, whose major function is the recruitment of psychologists to sit for the Diplomate examination offered by the American Board of Group Psychology.

The American Board of Group Psychology (ABGP) is charged with the development and maintenance of standards and procedures for the examination in group psychology as well as the administration of the examinations. The ABGP is governed by a board of directors who are elected from the Academy membership and serve staggered three-year terms. Those psychologists who apply for the Specialty Diploma in Group Psychology will be interfacing with the examination coordinator as well as others who may offer mentorship or consultation in the course of the application and examination process.

The American Academy of Group Psychology website (www.aagp.net) gives specific policy about eligibility which in essence consists of holding a license in psychology in your state or province, graduation from an APA or CPA accredited program and having demonstrated specialty training and professional experience in the practice of group psychology. This step in the application process will require the collection of transcripts and documentation of training and experience. The forms for this application process are available at the ABPP website at www.abpp.org. Upon completion of specialty specific eligibility, candidates are asked to provide a practice sample which is comprised of two separate tasks. The first is to answer a series of questions in the form of a professional statement that describes their work, theoretical orientation, continuing education, practice methods, and approach to ethical dilemmas in the course of daily practice. Many psychologists who have been through this process have found that writing the professional statement is both useful and thought provoking. In many ways this examination process is not any different from what most psychologists do in the course of peer review and consultation. The questions are meant to assist the candidate in

thinking about their work and their approach to the clinical tasks of group psychology

The other component of the practice sample is a piece of professional work that you choose to share with the committee. The most common work sample product is a video tape of your work with a group. Other work sample formats may include written transcripts and audio tapes. This might be a therapy or counseling group, a consultation or supervision group, a lecture about group psychology, or a group psychology intervention of one kind or another. The purpose of the work sample is to allow the committee to see your work and to have sufficient exposure to know how you go about applying the principles of group psychology. The work sample also includes the candidate's responses to a series of questions that address the theory, intervention context, formulation of both group and individual psychology dynamics, summary and rationale for leader interventions, and a self critique. The specific questions are available on the www.abpp.org website under group psychology.

In the case of those psychologists who have earned their doctorate fifteen years prior to the date of application we also offer a Senior Examination. This format allows the candidate to submit a practice sample rooted in other professional activities such as professional writing, course outlines, audio or video material developed to teach or demonstrate group theory and/or technique or any previously prepared professional work product which allows the candidate to demonstrate their mastery of group theory and the application of group techniques. In the senior examination process the applicant may submit a CV or professional resume that documents postdoctoral training and experience as a group psychologist that is augmented with a fellow psychologist's attestation that the applicant has developed their group skills at the postdoctoral level through coursework and supervision.

Upon the receipt of these materials, the examination coordinator reviews the materials and if necessary consults with fellow members of the Board to verify eligibility. Upon approval the candidate is scheduled for an oral examination with a committee

comprised of a chair and two additional Academy members. The examination is about one-half day in duration and involves a variety of experiences. Initially candidates are shown a video of a therapy group and are asked to make comments. The committee will then discuss the contents of the candidate's file including his/her experience in training, practice, and supervision as described in the application, the professional statement, and the work sample materials. Upon completion of the examination the candidate will receive a letter from ABPP central office notifying him/her of the results.

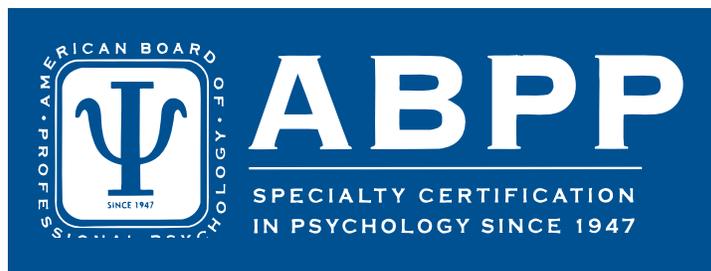
Most psychologists who have been awarded the ABPP Specialty Diploma in Group Psychology describe this as a long and detailed process that proved to one of their best professional growth experiences. The procedures are essentially a highly structured peer review process where you are asked to share your history, thoughts and overall approach to professional practice with other group psychologists. The process is respectful, rigorous, and regulated. Many candidates report that they learned far more than they thought they would when they started the process. Many psychologists report their experience with the examination as requiring focus and discipline to organize their thoughts in order to convey their professional approach. Most everyone who has been through this experience seems to agree that this was a worthwhile professional experience. Those members of the Academy who sit on examination committees have very similar comments. They volunteer their time to review the candidate's materials and often have to travel to sit on a committee. All of us who engage in this work experience learn a lot about our candidates, our profession and ourselves.

We hope that this has been of some help to you in terms of better understanding the process that leads to the ABPP Specialty Diploma in Group Psychology. Any member of the Academy who is listed on the websites cited above would be more than happy to speak with you as well as offer advice, mentorship, and assistance in your decision to engage in this process.

ATTENTION ALL SPECIALISTS!

Have YOU returned your Annual Attestation Form?

The deadline is March 31st
to avoid our Late Fee.



Thanks very much to all of you!



THE ABPP
Specialist

American Board of Professional Psychology, Inc.
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