



INBALANCE

Spring 2024

Editor: Lindsay Holly, PhD

Associate Editor: Michelle Roley-Roberts

President's Message

By Andrea Chronis-Tuscano, PhD

I am thrilled to serve as your President, during SCCAP's 25th anniversary year! First, I want to thank Past-President Yo Jackson for her service and inspiration. When I decided to run for SCCAP President, I reflected on what I most wanted to contribute to the field of clinical child and adolescent psychology. As a first-generation college student, it is sometimes incredulous that I have had the privilege of earning a Ph.D. and becoming a Full Professor in a field which I am so passionate about—improving trajectories for at-risk youth and disseminating evidence-based practices to diverse youth and families.

Thinking back to when I first applied to graduate school, there were many ways in which I was unprepared, so many unwritten rules I was not privy to. One of my missions, as a Professor and now SCCAP President, is to expose undergraduate students to the many possibilities that a career in clinical child and adolescent psychology affords and to engage them in activities that will make them competitive for graduate programs early in their educational journey if they decide to pursue that path. I like to share that I am a first-gen student, and each time I do, several students come to share with me that they are as well, which creates a connection that can be so impactful for their professional development. I also like to share that I did not get into a doctoral program the first year I applied. Persistence, getting back on my feet, is something that has helped me throughout my career and my life more generally. By telling students my story, I hope to inspire them to do the same.

The power of shared stories has prompted me to initiate this year's theme: **"Lived Experiences of Youth and Families: What we Gain from Listening."** The field of clinical child and adolescent psychology has come a long way in identifying evidence-based assessment and treatment approaches. At the same time, many of the studies validating our diagnostic classifications, assessment tools, and interventions have not reflected the diversity of the youth and families we serve, or the real-world providers delivering care. Moreover, mental health disparities exist for a variety of reasons, including systemic disadvantages, stigma, and access barriers. As we look forward, it is a priority to learn from *listening* to youth and families in our research and clinical practice using qualitative methods.

I will use my own research as an example of why this is so important. For almost two decades, my lab has studied ADHD in families. Considering the strong genetic underpinnings of ADHD, many times when a child has ADHD, their parent(s) have similar characteristics, whether or not they have been formally diagnosed. As early as graduate school, when I administered parent diagnostic interviews to assess child ADHD, parents often joked that they recognized the same symptoms in themselves and/or their partners! In the spirit of the scientist-practitioner model, this clinical experience launched one of my main research foci examining how parent ADHD is

related to parenting behaviors and child developmental and treatment outcomes. Evidence-based ADHD treatments rely on parents' ability to maintain consistent routines, and to override automatic negative reactions to child misbehavior with planned use of behavioral parenting skills. Yet, when parents of children with ADHD struggle with the very same organizational and emotion regulation challenges that their children do, it makes it difficult for them to consistently implement what we behavior therapists ask them to do! We have conducted several successful studies on this topic.

About 5 years ago, we launched an NIMH-funded hybrid effectiveness- implementation study in urban primary care clinics that treat predominantly Black/African-American families, many of whom receive public insurance (R01MH118320). As part of usual care at annual well-child visits, parents are given the option to complete a brief screener assessing their own ADHD symptoms; those that screen positive are contacted by research staff about our study. Parents who meet entry criteria receive 10 weeks of an integrated behavioral parenting intervention (BPI), with or without a parent ADHD medication trial before they begin BPI. We assembled a community partner group consisting of parents, pediatricians, embedded psychologists and office staff to inform every aspect of our research design and interventions.

What we have learned from our community partners has been the most valuable aspect of this study so far! As is often the case, we are left with more questions than answers: At the familial level, how can we best introduce the importance of parent mental health in a manner that is not off-putting for parents from diverse backgrounds? Who is best positioned to start these conversations? How can we do so in a way that expresses our sincere desire to support, rather than blame, parents who may be struggling with their own mental health? How do we address parental stigma around sharing diagnostic information with the school so that children with ADHD can get the educational support they need to be successful? At the practitioner level, how can we increase comfort among pediatricians, pediatric nurse practitioners, and other child health providers to inquire about parent mental health? How can we apply principles of shared decision making to determine when to begin with parent vs. child mental health services? Are our EBTs too complicated and lengthy for delivery by psychologists or other mental health professionals integrated in primary care settings? Given parental concerns about the use of psychiatric medications, what is the best way to proceed when we have concerns about a parent's mental health? At the broader context level, how can we continually diversify our workforce in order to increase comfort among families? These are just a few of the questions that have arisen in our ongoing study and that members of our research team are hoping to address in our future work.

Without hearing from parents from diverse backgrounds, and the professionals working in underresourced communities who grapple with these issues on a daily basis, we will not be able to move the field forward and ultimately reduce disparities in receipt of mental health services for youth and families who need them most.

Mental Health Needs of Children Experiencing Homelessness

By Mary E. Haskett, PhD & Heather Finster, MS
North Carolina State University

We appreciate this opportunity to introduce members of SCCAP to an area of research, practice, and advocacy in which few psychologists are engaged—family and young child homelessness. This is an area in which the research, intervention, and advocacy expertise of members is desperately needed.

Why should we be engaged?

Homelessness among infants, toddlers, and preschool-aged children occurs at alarming rates. According to the most recent US Department of Education report, [Early Childhood Homelessness State Profiles](#) (2021), nearly 1.3 million children under age 6 experienced homelessness during the 2018-19 school year; that is 6% of all young children. National point-in-time data indicate that homelessness among families increased 16% between 2020 and 2023. Nearly three of every 10 people experiencing homelessness (28% or roughly 186,100 people) did so as part of a family with children (U.S. Department of Housing and Urban Development, 2023).

Experts in public health view homelessness as an adverse childhood experience (Mersky, Janczewsko, & Topitzes, 2017; Radcliff, Crouch, & Strompolis, 2019). The developmental risk factors that these children commonly experience include inadequate prenatal care, crowded and unsafe living circumstances, transience and disrupted family routines, food insecurity, poor nutrition, and lack of access to preventive healthcare (Nilan, Rapp, & Haskett, 2023). In addition, homelessness is associated with traumatic experiences such as exposure to family and neighborhood violence (Cowan, 2014). Parent history of adverse childhood experiences and mental health challenges also contributes to children's difficulties (Herbers, et al., 2020). Systemic oppression and long-standing racial inequities and disparities are also at the root of homelessness and related experiences, and these structures exacerbate the long-term impact of homelessness (Benson-Goldsmith et al., 2024; Carter, 2011; Olivet, et al, 2021).

Given the adversity faced by children who experience homelessness, it follows that homelessness in early childhood is associated with developmental delays (Haskett, Armstrong, & Tisdale, 2015), mental health challenges and emotion dysregulation (Herbers et al., 2014), and poor physical health (Cutts et al., 2011). Despite elevated risk for these outcomes, there is strong evidence of resilience among young children who experience homelessness (Cutuli et al., 2013; Herbers, Cutuli, Keane, & Leonard, 2020). Therefore, factors known to be associated with resilient functioning—including

warm & nurturing caregiving and high-quality early childhood services—must be promoted.

How can we be engaged?

Early childhood services can change the trajectory of young children’s lives, especially when those programs use a two-generation approach. Indeed, caregivers are the key to their children’s resilience. The most well-supported protective factor known to mitigate the potential negative impact of homelessness is responsive parenting (Cutuli & Herbers, 2014). One of the mechanisms through which responsive parenting impacts children’s resilience is coregulation that occurs when parents are sensitive and warm. That is, responsive parenting sets up coregulation opportunities for children to acquire self-regulatory skills that are foundational for their social-emotional competence (DePasquale, 2020; Herbers et al., 2011, 2014).

Many parents with unstable housing maintain bonds with their children and engage in sensitive parenting practices (Gewirtz et al., 2009; Holtrop et al., 2015). In fact, using the Five-Minute Speech Sample method, we found positive features of parents’ approach to child rearing that should be respected and used to strengthen their parenting challenges (Owens, Stokes, & Haskett, 2022). Parenting challenges stem from life circumstances that increase stress, erode parenting quality, and negatively impact the parent–child relationship and, ultimately, children’s well-being. Using evidence-based parenting programs would be a reasonable approach to support these parents but there is sparse research in this area (Haskett, Loehman, & Burkhart, 2016). We have seen positive impacts of Triple P-Positive Parenting Program seminars (Haskett, Armstrong, Neal, & Aldianto, 2018) and discussion groups (Armstrong, Owens, & Haskett, 2021) for families residing in shelters. Although parents appreciated Triple P seminars, they also recommended adaptations of the material and presentation mode to accommodate life in shelters. Given their unique living situation, we must listen closely to parents to understand what they need and want in terms of parenting support (Holtrop, et al., 2015). My Baby’s First Teacher, a program designed specifically to meet the needs of families with young children in shelters has been developed and tested (Herbers, et al 2020). This area of research is ripe for investigations and is increasingly important given high rates of homelessness and clear evidence of the protective nature of parental warmth.

As noted above, high-quality early childhood services can change the developmental trajectory of young children who have experienced adversity. Because homelessness creates barriers to accessing and participating in home visiting/parent education programs and high-quality early childhood programs, very few unhoused children benefit from these services (Dworsky, Carreon, Griffin, & McDaniel, 2022). In fact, a recent report by School House Connection (2022) shows that only about 7% of infants and toddlers experiencing homelessness are served by early childhood programs. Understanding the barriers that homeless families face in accessing early childhood programs can help us be stronger advocates and more effective in delivery of services (Finster, Buccelli, Hobbs, & Haskett, 2023). One of the most common barriers is lack of

awareness among service providers that families that are doubled up (i.e., shared living arrangements) meet the definition of homeless; outreach is often restricted to families in shelters and other formal housing programs. High mobility of families in homeless situations is another service barrier; if these families are not given priority, they tend to be “lost” by the time they reach the top of waitlists. Finally, families experiencing homelessness often do not have vehicles or funds to pay for public transportation. Home-based services might be best for these families; of course, their living circumstances can make home-based services challenging. This is where psychologists and early childhood providers apply creativity and flexibility in serving families “on their terms and on their turf” is needed.

The majority of studies conducted to gain understanding of families and young children experiencing homelessness are carried out in shelters or supportive/transitional housing, but most children experiencing homelessness are not living in those settings. Many communities across the country do not even have those resources available. Instead, approximately 75% of children who experience homelessness live temporarily in doubled-up situations with other families. These are crowded, tenuous, highly stressful situations, with the constant threat of being asked to leave on a moment's notice without other options for shelter. Families in doubled-up circumstances are rarely included in research studies because they are difficult to identify and tend to be invisible in our communities. This leaves a huge gap in understanding the experience of homelessness. Because Head Start and Early Head Start programs are required to prioritize enrollment for families that qualify based on homelessness, data sets including children in Head Start can be excellent sources of data on children living doubled-up. One such data set is the [Head Start CARES](#) data. Housing status is available for the children in this rich data set, and it has been productive for our research team (Haskett, Neal, & Norwalk, 2020).

The pandemic exacerbated risks to homeless children and their parents. The pandemic also exposed pre-existing problems in access, equity, and quality of both housing and early childhood services systems. We must accelerate efforts to support families and young children experiencing homelessness because the cost of inaction is much too high to tolerate. We hope SCCAP members might be motivated to serve this population, conduct research to contribute to positive outcomes for the children, and advocate for decreased barriers and increased services for families struggling with unstable and unsafe housing. Psychologists interested in advocacy for young children experiencing homelessness can view a recent [Action Plan for an Early Childhood Homelessness Support System](#) we developed with our colleagues for the state of North Carolina. Most of the recommendations in that plan are relevant across the U.S.

References

Benson-Goldsmith, M. E., Gildea, B., Richards, T. N., Roley-Roberts, M. E., Greenberg, P., & Hobbs, A. (2024). An Exploratory Analysis of Domestic and Intimate Partner Violence Victimization Among Persons Experiencing Eviction. *Violence Against Women*, 0(0). <https://doi.org/10.1177/10778012231225231>

- Carter, G. R. (2011). From exclusion to destitution: Race, affordable housing, and homelessness. *Cityscape: A Journal of Policy Development and Research*, 13(1), 33–70. <https://www.jstor.org/stable/20868768>
- Cowan, B. A. (2014). Trauma exposures and mental health outcomes among sheltered children and youth. In M. E. Haskett, S. Perlman, & B. A. Cowan (Eds.) *Supporting families experiencing homelessness: Current practices and future directions*. NY: Springer Science + Business Media pp. 37-55.
- Cutts, D. B., Meyers, A. F., Black, M. M., Casey, P. H., Chilton, M., & Cook, J. T. (2011). US housing insecurity and the health of very young children. *American Journal of Public Health*, 101, 8, 1508-1514. <https://doi.org/10.2105/AJPH.2011.300139>
- Cutuli, J. J., Desjardins, C. D., Herbers, J. E., Long, J. D., Heistad, D., Chan, C. K., ... Masten, A. S. (2013). Academic achievement trajectories of homeless and highly mobile students: Resilience in the context of chronic and acute risk. *Child Development*, 84, 841 – 857. doi:10.1111/cdev.12013
- Cutuli, J. J., & Herbers, J. E. (2014). Promoting resilience for children who experience family homelessness: Opportunities to encourage developmental competence. *Cityscape: A Journal of Policy Development and Research*, 16, 113 – 140.
- Dworsky, A., Carreon, E., Griffin, A. M., & McDaniel, B. (2022). *Home visiting with families experiencing homelessness*. Chapin Hall at the University of Chicago. <https://www.chapinhall.org/wp-content/uploads/HVHF-Evaluation-Final-Report.pdf>
- Finster, H., Buccelli, A., Hobbs, E., & Haskett, M. E. (2023). In parents' words: Reflections on the social-emotional health system for young children experiencing homelessness. *Social and Emotional Learning: Research, Practice, and Policy*, 3, 10023 <https://doi.org/10.1016/j.sel.2023.100023>
- Haskett, M. E., Armstrong, J. M., Neal, S. C., & Aldianto, K. (2018). Perceptions of Triple P—Positive parenting program seminars among parents experiencing homelessness. *Journal of Child and Family Studies*, 27, 1957–1967. <https://doi.org/10.1007/s10826-018-1016-5>
- Haskett, M. E., Armstrong, J., & Tisdale, J. (2015). Developmental status and social-emotional functioning of young children experiencing homelessness. *Early Childhood Education Journal*, 44, 119-125. <https://doi.org/10.1007/s10643-015-0691-8>
- Haskett, M. E., Loehman, J., & Burkhart, K. (2016). Parenting interventions in shelter settings: A qualitative systematic review of the literature. *Child and Family Social Work*, 21, 272-282. <https://doi.org/10.1111/cfs.12147>

- Haskett, M. E., Neal, S. C., & Norwalk, K. (2020). Variability in social and behavioral adjustment among children in Head Start who are unstably housed. *Journal of Education for Students Placed at Risk*. <http://dx.doi.org/10.1080/10824669.2020.1869554>
- Herbers, J. E., Cutuli, J. J., Keane, J. A., & Leonard, J. A. (2020). Childhood homelessness, resilience, and adolescent mental health: A prospective, person-centered approach. *Psychology in the Schools*, 57, 1830-1844. doi:10.1002/pits.22331
- Herbers, J. E., Cutuli, J. J., Lafavor, T. L., Vrieze, D., Leibel, C., Obradovic, J., & Masten, A. S. (2011). Direct and indirect effects of parenting on academic functioning of young homeless children. *Early Education and Development*, 22, 77-104. <https://doi.org/10.1080/10409280903507261>
- Herbers, J. E., Cutuli, J. J., Monn, A. R., Narayan, A. J., & Masten, A. S. (2014). Trauma, adversity, and parent-child relationships among young children experiencing homelessness. *Journal of Abnormal Child Psychology*, 42, 1167-1174. <https://doi.org/10.1007/s10802-014-9868-7>
- Herbers, J. E., Cutuli, J. J., Supkoff, L. M., Narayan, A. J., & Masten, A. S. (2014). Parenting and coregulation: Adaptive systems for competence in children experiencing homelessness. *American Journal of Orthopsychiatry*, 84, 420-430. <https://doi.org/10.1037/h0099843>
- Herbers, J. E., Cutuli, J. J., Fugo, P. B., Nordeen, E. R., & Hartman, M. J. (2020). Promoting parent-infant responsiveness in families experiencing homelessness. *Infant Mental Health Journal*, 41(6), 811-820. doi: 10.1002/imhj.21868
- Herbers, J. E., & Henderson, I. (2019). My Baby's First Teacher: Supporting parent-infant relationships in family shelters. *ZERO TO THREE*, 39 (4), 35-41.
- Holtrop, K., Chaviano, C. L., Scott, J. C., & Smith, S. M. (2015). Identifying relevant components to include in a parenting intervention for homeless families in transitional housing: Using parent input to inform adaptation efforts. *American Journal of Orthopsychiatry*, 85, 600-611. <https://doi.org/10.1037/ort0000111>
- Mersky, J. P., Janczewsko, C. E., & Topitzes, J. (2017). Rethinking the measurement of adversity: Moving toward second-generation research on adverse childhood experiences. *Child Maltreatment*, 22; 58-68. <https://doi.org/10.1177/1077559516679513>
- Nilan, D., Rapp, N. G., & Haskett, M. E. (2023). Family homelessness: The dilemma of invisible families. In R. Denby-Brinson & C. Ingram (Eds), *Compendium of policy and practice: Approaches to child and family protection*. Washington DC: CWLA Press.

Olivet, J., Wilkey, C., Richard, M., Dones, M., Tripp, J., Beit-Arie, M., Yampolskaya, S., & Cannon, R. (2021). Racial Inequity and Homelessness: Findings from the SPARC Study. *The ANNALS of the American Academy of Political and Social Science*, 693(1), 82-100. <https://doi.org/10.1177/0002716221991040>

Owens, C. R., Stokes, M. K. N., & Haskett, M. E. (2022). 'I just want my parenting to be able to be better than what it is': A qualitative exploration of parenting strengths and needs of mothers experiencing homelessness. *Child & Family Social Work*, 1–12. <https://doi.org/10.1111/cfs.12924>

Radcliff, E., Crouch, E., Strompolis, M., & Srivastav, A. (2019). Homelessness in childhood and adverse childhood experiences (ACEs). *Maternal and Child Health Journal* 23, 811–820. <https://doi.org/10.1007/s10995-018-02698-w>

SchoolHouse Connection (2022). *Infants and Toddlers Experiencing Homelessness: Prevalence & Access to Early Learning in Twenty States*. https://schoolhouseconnection.org/wp-content/uploads/2022/11/SHC_Infant-and-Toddler-Homelessness_2022.pdf

U.S. Department of Housing and Urban Development (2023). The 2023 Annual Homelessness Assessment Report (AHAR) to Congress: Part 1: Point-in-Time Estimates of Homelessness. <https://www.huduser.gov/portal/sites/default/files/pdf/2023-AHAR-Part-1.pdf>

SCCAP Elections

SCCAP is pleased to present our slate of candidates—as well as their respective statements—for our upcoming 2024 Board elections. For more information about the election please visit [our website](#).

President-Elect Candidates

Tim Cavell, PhD

It would be an honor to serve as President of SCCAP. If elected, I hope to serve with humility in my role and with pride in my organization's strengths and contributions.

I've had the privilege of being in previous leadership roles, including Director of Clinical Training, Chair of CUDCP, APA Board of Professional Affairs, and APA Board of Educational Affairs. I also had the privilege to Chair the joint BEA/BPA Task Force on competencies expected of graduates with a master's degree in health service psychology. Perhaps most relevant were my two terms on the SCCAP Board as a representative to APA's Council of Representatives.

I believe these experiences have prepared me for the role of SCCAP President-Elect. I learned that Robert Greenleaf had it right when he coined the term *servant leadership*: Servant-leaders do not simply want to lead; they want first to serve. Greenleaf's criteria for evaluating servant-leaders were to ask if those served grow as persons and if, while being served, they become healthier, wiser, freer, more autonomous, and more likely themselves to become servants. I rather like these criteria and see their direct applicability to the work of the SCCAP Board.

I've also been able to witness the excellent work that has long been the hallmark of the SCCAP Board. The colleagues we elect to the SCCAP Board are incredibly competent and earnestly committed to serving all members, regardless of rank, role, or recognition. I have also seen what the Board can accomplish when we work toward a shared mission and operate from a common set of well-delineated goals. If I were to find myself in the role of SCCAP President, I can foresee that my goal would be to facilitate that kind of Board work.

Read Full Biography

Tim Cavell, PhD is a practicing clinical child/adolescent psychologist and Professor in the Department of Psychological Science at the University of Arkansas. He studies how parents, teachers, and mentors can help children who are highly and aggressive or

chronically bullied at school. Tim has authored over 100 journal articles and chapters and has published 4 books, including *Good Enough Parenting* and *Working with Parents of Aggressive Children*. His research has been funded by the Department of Education, the National Institute on Drug Abuse, and the Department of Defense. Tim is a member of the Research Advisory Council for Big Brothers Big Sisters of America and is on the Board of Educational Affairs for the American Psychological Association and the Society for Clinical Child and Adolescent Psychology. He and his wife have 3 children, including a daughter who is a practicing child/adolescent psychologist!

Adam Lewin, PhD

For over two decades, SCCAP has been my professional home. Early in my career, it was my place to network with training programs, to connect with peers, and find mentors. My relationship with SCCAP continued to grow. I was trusted with a chance to serve as SCCAP's Member at Large for Education & Standards. Through this role, I worked collaboratively to develop postdoctoral competencies for our specialty, develop grants and awards, and increase opportunities for student members. My work with SCCAP positioned me to continue to increase my service to our profession: working to write training guidelines, serving on the Commission on Accreditation, and as President of the American Board of Clinical Child and Adolescent Psychology.

SCCAP has been formative to my professional development. It would be my privilege to return to the board with a focus on growing how SCCAP can be equally impactful to others. I am strongly aligned with SCCAP's mission: to promote the science and practice of clinical child and adolescent psychology – research, practice, training, diversity equity, and inclusion and dissemination. If given the opportunity to serve as president, my north star would be for SCCAP to be THE professional home for Clinical Child and Adolescent Psychologists – at all career stages, regardless of practice focus or setting.

My goal is to increase SCCAP's relevance across the career span. SCCAP has worked to attract student members through programming, awards, grants, and mentorship. It is critical that we expand programs and content that is relevant for professionals at later career stages. Further, child psychologists are rapidly transitioning into new settings and roles. I want SCCAP to support our increasingly diverse membership, working to prepare students and early-career psychologists for emerging career opportunities. Moreover, I want SCCAP to be our go-to resource for support, mentorship, learning, and programming – to be child psychology's professional community. If entrusted with the opportunity to serve as your president, I would be honored to work with you to create a professional home for the diverse array of professionals who identify as Clinical Child and Adolescent Psychologists.

[Read Full Biography](#)

Adam B. Lewin, Ph.D., ABPP is a Professor and Division Chief of Pediatric Neuropsychiatry and Interim Rothman Chair of Developmental Pediatrics at the University of South Florida. He runs a multidisciplinary clinical team focused on anxiety, obsessive-compulsive disorder, tic/Tourette, autism, and related disorders. He also directs a postdoctoral residency and an extramurally funded clinical research program. Service and mentorship have been a career priority: He previously served on the SCCAP's Board of Directors (2015-17) as Member at Large for Education and Standards. Dr. Lewin is past president of the American Board of Clinical Child and Adolescent Psychology and has served on the executive board for 9 years. He was recently elected to the Board of Trustees for the American Board of Professional Psychology. He has served on the APA Commission on Accreditation and has represented Child & Adolescent Psychology at the Council of Specialties. He currently serves on the Training Guidelines Taskforce for Clinical Child and Adolescent/Pediatric Psychology. He assisted with the development of APA Level 3 Child Specialty Competencies for postdoctoral residents. He is on the Scientific Advisory Board of the International OCD Foundation and is Chair of the University of South Florida's Appointment Promotion and Tenure Committee for the medical school. In the community, he has volunteered with Florida's Diabetes Camp since 1992 and serves on their volunteer Board of Directors. An avid hiker and traveler, he is also passionate about conservation and animal welfare (and is 'proud papa' to three rescue cats).

Secretary

Michael Meinzer, PhD

As the current SCCAP Secretary, I would be honored to serve a second and final term where I can continue to give back to an organization that has shaped my career in child and adolescent clinical science. Particularly, I am excited to continue as Co-Chair of the Child Action Committee. My experience as a principal investigator on community-based research projects as well as experience serving on review boards for NIH will continue to help in reviewing proposals for programs to advance the dissemination of evidence-based practices, particularly among under-resourced and under-represented communities. In addition to fulfilling the required duties of SCCAP Secretary, I would also continue to aid in increasing the diversity (i.e., by race, ethnicity, sexual orientation, gender identity) of prospective clinicians and researchers entering our field. By raising awareness of training opportunities made available by members of this division of APA, I hope to increase the number underrepresented students pursuing careers in clinical psychology.

Thank you for your time and consideration of my nomination.

[Read Full Biography](#)

I am an Associate Professor at the University of Illinois Chicago (UIC) and Director of the Young Adult and Adolescent ADHD Services Lab as well as the Director of the SUCCEEDS College ADHD Clinic at UIC.

My research seeks to understand ADHD in adolescence through emerging adulthood and developing interventions to reduce negative mental health and academic outcomes. I am also interested in school-based mental health interventions which has resulted in working with both the Baltimore City Public Schools (MH117086; MPI: Meinzer & Chronis-Tuscano) and the Chicago Public Schools. I've been recognized by national organizations for this work (i.e., CHADD's Young Scientist Research Award, NIMH CHIP's Fellow).

In addition to my research, I am actively involved on editorial boards and in leadership positions. I serve on the editorial boards for *Journal of Attention Disorders* and the *Journal of Consulting and Clinical Psychology*. Further, I am a Consulting Editor of APA's *Clinician's Research Digest* where monthly I provide "digestible" summaries of empirical articles to clinicians to help to bridge the research to practice gap. I also serve on the Finance Committee for the *Association of Behavioral and Cognitive Therapies* and as *Associate Head* for the Department of Psychology at UIC.

Member-at-Large (Membership)

Nicole E. Lorenzo, PhD

It is with great interest and enthusiasm that I submit my application for consideration for the Member at Large (MAL): Membership for the Society of Clinical Child and Adolescent Psychology (SCCAP) position. My goals align with SCCAP's mission to "improve the mental health and resilient development of children, adolescents, and families with a full commitment to promoting diversity, equity, and inclusion." Particularly relevant to the MAL-Membership position, I hope to increase representation and opportunities within SCCAP for members from marginalized backgrounds. In line with current initiatives, I would strive to facilitate changes within the organization that would increase benefits for members, support our students, and help identify barriers towards engagements within the organization. As the current Chair for the APA SCCAP programming, I understand the importance of attending board meetings and value the collaborative and collegial nature of all those who strive towards the SCCAP mission. I truly appreciate your consideration and I welcome the opportunity to further discuss my qualifications.

[Read Full Biography](#)

I am a licensed clinical psychologist and tenure track Assistant Professor at American University. I obtained my doctoral degree in Clinical Science in Child and Adolescent Psychology from Florida International University and completed my Clinical Psychology

Predoctoral Internship at the University of Miami Mailman Center for Child Development.

My research focuses on early childhood, from infancy through preschool, as the sensitive and critical developmental period during which caregivers play a significant role in social and emotional development. Of particular importance within this research is the examination of culturally relevant factors at the individual and contextual level that inform the nuances of parenting and parent-child interactions. At the developmental level, I examine the transactional processes involved in parent-child interactions, examining how these processes develop and the impact of factors like temperament and parental psychopathology. At the intervention level, I seek to understand how we can refine and individualize treatment targets to develop early intervention programs that are accessible and scalable for families and providers, particularly those from underserved and underrepresented backgrounds, such as Hispanic/Latine families.

Recognizing the importance of leadership skills in working with families from underserved and marginalized communities, I have been involved in different organizations that share similar goals to SCCAP. As a member of the Coalition for Advancing Culturally Informed EBPs, I collaborate with scholars and practitioners to improve the accessibility of EBPs, provide recommendations for changes practices, and share culturally-sensitive resources. Additionally, I am a member of the SCCAP Infant and Early Childhood SIG. As a newly formed SIG, we are hoping to increase research in infant and early childhood mental health that is more representative and inclusive. At a time when health inequities are rampant and the effects on mental health are staggering, it is imperative to support the advancement of diverse scholars to begin to address the needs of underserved communities.

In Memoriam: Dr. William Pelham (1948-2023)

In Memoriam Written by Yo Jackson, SCCAP Past President

Dr. Pelham was one of the most distinguished and accomplished pioneers and leaders in the field of clinical child and adolescent psychology and his presence in the field will be dearly missed. His work made extraordinary contributions in the areas of clinical psychology, intervention science, evidence-based treatments, cognitive-behavioral practice, children's mental health care, multimodal treatment strategies, treatment sequencing, and dissemination.

He was perhaps most widely renowned as the field's foremost authority on the behavioral treatment of ADHD, especially his Summer Treatment Program – a program that had both a domestic and an international reputation as a model program for evidenced-based treatment. In the field, he played an instrumental role in meaningfully decelerating the role of medication-first treatment regimens with concerning side-effect profiles for child externalizing problems. He authored roughly 500 scientific publications in our field's leading journals and secured over 100 grants, worth collectively more than \$100 million, across his career.

He founded the Niagara Conference, which evolved into the Miami International Child and Adolescent Mental Health (MICAMH) that continues semi-annually to this day. Along with Dr. Brooke Molina, Dr. Pelham conducted one of the largest long-term prospective studies of youth with ADHD—i.e., the Pittsburgh ADHD Longitudinal Study (PALS)—systematically following affected children and adolescents all the way into adulthood. This work has played a critical role in documenting the very unfavorable trajectory and burdens of poorly managed ADHD across time, including increased peer and family dysfunction and increased risky behavior, as well as reduced educational and occupational attainment, and tremendous costs to society. Dr. Pelham was also one of the original principal investigators of the landmark Multimodal Treatment of ADHD (MTA) study and his role on many of the follow-up evaluations of the MTA helped shape the field's understanding of combination treatment strategies that varyingly incorporate medication and behavior therapy components in the management of ADHD symptoms.

His recent work—sequencing of multimodal treatment strategies—used an innovative SMART design and found not only that stimulant medication is most effective when it is used as a supplemental second-line treatment following an adequate course of quality low dose, behavior therapy, rather than as a first-line treatment but also that the behavioral-first treatment strategy was far less expensive for the healthcare system than starting treatment with medication. This one study has the potential to

revolutionize treatment for ADHD children in primary care where medication alone has been by far the most often used treatment with very poor long-term outcomes and high costs.

His dedication to excellence in his work serves as a standard for all professionals. He was a role model in how to serve the public with science. His SCCAP colleagues remember him as a “tireless, fearless clinical researcher, leader, and inspiration for the field.” Many recognized his mentorship as life-changing. Dr. Pelham was the Ph.D. mentor of current SCCAP President, Andrea Chronis-Tuscano, who said, “He was larger-than-life, teaching us that nothing was impossible. Each day that interplay between clinical work and research came to life in the Pelham lab. At the end of the day, it wasn’t about the grants or the papers, it was sincerely about making the lives of children and families better. He helped me and all of his other students and STP staff find our passion!”

The significance of his work and the legacy of knowledge he leaves behind will serve the field for many, many years to come. Children and adolescents with ADHD and their families will continue to be served by Dr. Pelham’s legacy. The field of clinical child psychology is a better place because he was a part of it.

EffectiveChildTherapy.Org:
**A Helpful Resource for Both
Families & Providers**

By William J. Leever, PsyD
Editor, EffectiveChildTherapy.org

We live in an era of misinformation. The American Psychological Association (APA) even highlighted this unfortunate fact as a major trend for 2024 ([APA Monitor on Psychology, 2024 Trends: Fighting Misinformation and Disinformation in an Election Year](#)). Fortunately, we belong to SCCAP, an organization actively delivering science-backed content to both professionals and the public. As a part of this crucial effort, [EffectiveChildTherapy.org](#) (ECT) plays a pivotal role in connecting people with reliable, evidence-based mental health information.

Growth and Development of EffectiveChildTherapy.org

EffectiveChildTherapy.org was initially established in 2008 through a collaboration between SCCAP and the Association for Behavioral and Cognitive Therapies (ABCT). Under the guidance of outgoing editor and founding member, John Guerry, Ph.D., the website developed into a valued resource for evidence-based treatment recommendations. Designed to educate families and mental health professionals about intervention options, the site continues to serve as a “clearinghouse” of information. Over the years, the website has given families useful information about the entire mental health treatment process, including providing free assessment links to the *HGAPS Assessment Center*, highlighting levels of scientific support for specific interventions, and offering advice on selecting a provider. ECT also serves as an educational tool for practitioners, educators, and students, promoting the dissemination of research published in the *Journal of Clinical Child and Adolescent Psychology* (JCCAP) and *Evidence-Based Practice in Child and Adolescent Mental Health* (EPCAMH).

Attracting between 7,000 and 12,000 users each month, with peaks during the school year, ECT demonstrates its significant impact through the popularity of pages on behavior therapy, cognitive-behavioral therapy (CBT), and other evidence-based treatment approaches. This engagement highlights ECT’s critical role in guiding the public and professionals toward the best therapeutic selections.

Proactive Updates for the Future

To ensure ECT remains a relevant resource for our members, we have launched a few strategic updates to enhance the site’s content. As the editor, I am dedicated to maintaining the content’s accuracy and relevance. We have also enlisted SCCAP’s

committees to annually review and refresh relevant sections of the site. Over the course of the year, the Science Committee will scrutinize evidence-based treatments; the Practice Committee will enhance the “Tips & Tools” section; and the Diversity Committee will create new content for minority youth. All will incorporate the latest findings from JCCAP and EPCAMH. The Education & Standards committee has already added helpful video content for parents and families.

As psychological treatments evolves, ECT will also try to keep pace. For example, we will highlight evidence-based insights into task sharing options for non-specialist providers as well as the rise of digital therapies. These efforts are essential for navigating the evolving mental health treatment landscape.

Ultimately, [EffectiveChildTherapy.org](https://www.effectivechildtherapy.org) aims to reflect the latest scientific developments and recommendations in child and adolescent mental health care. By focusing on updating content and exploring new research domains, we reaffirm our dedication to being an essential resource in an era challenged by misinformation.

Happy 25th Anniversary to SCCAP!

by Mary A. Fristad, PhD, ABPP, History Committee Chair

The “room where it happened” was in Boston, August 1999. The esteemed Dr. Bill Pelham presided over the final board meeting of Division 12, Section I as we became Division 53. We celebrated in style later at a reception with swan-shaped cream puffs and champagne.

This year, we celebrate our 25th anniversary. Watch for *A Walk Down Memory Lane* on the listserv the 25th day of each month. Our flagship journal, *Journal of Clinical Child and Adolescent Psychology*, is publishing reflections on how our field has grown and developed through a series of tributes to our past presidents, beginning with Dr. Alan Ross, who was president of Division 12, Section I in 1962. [In Seattle this August](#), we will host a Past-Presidents’ Panel, with a president from each decade (Dr. Elizabeth McCauley, 2007; Dr. Joan Asarnow, 2014; Dr. Steven Hinshaw, 2020) interviewed by our current Past-President, Dr. Yo Jackson. They will reflect on the challenges and opportunities experienced during their presidencies, and their views of current challenges and opportunities in our field. Come to this historic event, then join us for a Silver Jubilee Celebration!

The Student View

Introducing Hong Bui and a Focus on Lived Experiences of Youth and Families

By Hong Bui, MS
SCCAP Student Representative

I am grateful to join the Society of Clinical Child and Adolescent Psychology (SCCAP) leadership team and introduce myself as the new SCCAP Student Representative for the 2024-2026 term. I received my B.S. in Psychology and certificate in Education Studies from Yale University. Currently, I am pursuing my Ph.D. in Clinical Psychology at the University of Maryland-College Park, under the mentorship of Dr. Andrea Chronis-Tuscano.

I am a proud Vietnamese-American, first generation, low-income, college graduate. My journey, as well as the framework with which I approach my research, starts with my parents. As their language broker, I learned from a young age the in's and out's of paying bills, scheduling appointments, and navigating life in a new country alongside my parents. Where my parents could not contribute their English, they contributed their time. My father tutored me in mathematics until the content went over his head and my mother taught me Vietnamese, reminding me the importance of retaining my "mother tongue." Their approach to education acknowledged what was lacking but also focused on what was available at the time. I maintained this mentality throughout school; took advantage of available educational opportunities, earned recognition by QuestBridge (an organization dedicated to supporting high-achieving, low-income high school students), and earned a full scholarship to Yale University. Despite this, I often hesitated to speak up in small seminars, or ask questions in undergraduate classes, for fear that my comments might reveal that I did not belong. As one might suspect, this strategy was incredibly isolating. It was not until I met other students from similar backgrounds that I realized the strength of sharing our common experiences.

In my professional work, I have also had the privilege of witnessing the power of shared lived experiences as a group intervention leader in two different settings targeting management of chronic disorders (i.e., college students with ADHD, teens with celiac and their parents). Although participants do, of course, appreciate the content and skills, time and time again, they cite the opportunity to develop a sense of community through shared experiences as one of the most valuable aspects of group skills training.

My research focuses on parent-child relationships, parenting, and parent psychopathology and the impact of these factors on children's socioemotional development across the lifespan, specifically within the areas of ADHD and anxiety. Our lab has started to incorporate community-based participatory approaches in our

research to better understand barriers to parent and child screening of ADHD within primary care settings, navigating the parent-child dynamic at the transition to adulthood, and adapting evidence-based interventions to better address familial needs across the lifespan. Although we will not always be able to fully understand the lived experiences of the families with whom we work, we aim to provide spaces where their perspectives can be heard and affirmed. Furthermore, we seek opportunities to involve community partners at each stage of our work. We continue to be inspired by and to draw from the work of researchers and clinicians who have been diligently doing this work for far longer than we have.

I am thrilled to join SCCAP, an organization committed to improving the mental health and resilient development of children, adolescents, and families with full commitment to promoting diversity, equity, and inclusion. This year, I look forward to working with my fellow Student Representative, Amanda Bennett, to continue efforts to make SCCAP the go-to professional home for students in clinical child and adolescent psychology. We also hope to highlight work in line with the SCCAP's Presidential Theme: "Lived Experiences of Youth and Families: What we Gain from Listening."

We cannot do this work without the dedication of our fantastic student committee members who advance mentorship, professional development, and student achievement through our committees and award opportunities. Student members, be on the lookout for opportunities to get involved with the Student Development Committee, catch us at the APA Convention's SCCAP Social Hour, and more! As always, we encourage student members to contact the student representatives (StudentListserv@sccap53.org) with any suggestions or ideas for improving existing initiatives or new programming!

Graduating Students – Get Your SCCAP Graduation Cord!

SCCAP is proud when our members reach a graduation milestone whether it is an undergraduate, master's, doctoral, or professional degree. As a gift to honor your achievement, the SCCAP Board of Directors is offering special SCCAP Graduation Cords to serve as a reminder that we value your membership and hope that you will continue on as a member to further your professional identity. More information on receiving your cord can be found [here](#).

We hope that you will think of SCCAP as your professional home and help us with our mission as we strive to enhance the science and practice of clinical child and adolescent psychology by supporting its membership, and the field's workforce, in the domains of (a) research; (b) evidence-based practice; (c) training and career development; (d) diversity, equity, and inclusion; and (e) dissemination.

SCCAP AT APA 2024

August 8-10 | Seattle, WA

Come join us in Seattle, Washington as we celebrate our 25th anniversary as a division!

Our excitement for the upcoming 2024 APA Convention this August in Seattle, Washington is growing! We recently finished reviewing an incredible set of thought-provoking and stimulating proposals from our members. Similar to the last two conventions, this year's programming will include both in-person and virtual presentations. We hope this opportunity continues to provide members with the chance to engage, even if you are unable to attend in-person. To include you in the excitement of our program, we hope to offer an insider's glance at the history of SCCAP and some hints at what is to come at the upcoming convention!

Our symposia and skill building sessions this year will include topics related to our conference theme of "*Lived Experiences of Youth and Families: What we Gain from Listening.*" The field of clinical child and adolescent psychology has come a long way in identifying evidence-based assessment and treatment approaches. At the same time, many of the studies validating our diagnostic classifications, assessment tools, and interventions have not reflected the diversity of the youth and families we serve, or the real-world providers delivering their care. As we look forward, it is a priority to learn from **listening** to youth and families in our research and clinical practice.

We will have a special presentation honoring our 25th Anniversary—see details in the [25th Anniversary story](#) in this newsletter. Plan to attend, then join in the Silver Jubilee Celebration following the panel.

We received an unprecedented number of posters, symposia, and skill-building submissions this year. A few examples include incorporating family feedback in pediatric primary care, using implementation science to incorporate care in schools, personalization of therapy, and addressing mental health care barriers. Several of our skill-building sessions are expected to offer continuing education credits by APA.

While we wish we could share more about the upcoming SCCAP presentations for APA 2024, we are still in the process of finalizing our division's programming. It is clear from the quality, depth, and breadth of submissions we have received that members of our division have engaged in highly relevant and impactful research and clinical work. Decisions on submissions will be sent out by APA in March and our program schedule will be finalized by mid-April. Please check in at either the APA website or the SCCAP website (www.sccap53.org) or follow us on Twitter/X (@SCCAP53) for additional updates! We will also include information about SCCAP programming at APA in the Summer InBalance Newsletter.

Lastly, we would like to express our gratitude for the service of the reviewers who contributed their time and expertise to reviewing all proposals for inclusion in SCCAP's APA 2024 programming: Amanda Acevedo, Amy Mikolajewski, April Harris-Britt, Barbara Mowder, Ed Christophersen, Karim Ibrahim, Laura Nabors, Michael Silverstein, Metzli Augustina Lombera, Rosanna Breaux, Wei-Siong Neo, and Yuko Okado. Your careful and thorough reviews enabled us to highlight the tremendous work of our colleagues, which together will provide an interesting and inspiring program of presentations for this 2024 convention.

The Future Directions Forum

Showcase Your Work, Get “Hidden Curriculum” Advice, &
Discover Strategies for Staying Human

July 25-27, 2024 | Nationwide Children’s Hospital (Columbus, Ohio)

*In Partnership With: Society of Clinical Child and Adolescent
Psychology & Taylor and Francis*

By Andres De Los Reyes, PhD, Future Directions Forum Founder & Chair

I think a lot about learning. I find that I get a lot of practice creating learning opportunities on campus at the University of Maryland (**Go Terps!**). But, I also know that as an institution of higher learning, campuses like my own want me to focus on creating learning opportunities about content—about “the curriculum.” Don’t get me wrong, that’s an important space to cover! It’s also not the only space that needs coverage. We all know that when it comes to research, the curriculum doesn’t reveal the whole story. We also need to build skills to do our jobs, and to learn how to do our jobs in a healthy way. If these skills don’t get covered in class, then they are, at best, provided in a “hidden curriculum” to which only a few privileged folks have access. That’s why the **Future Directions Forum** exists!

At the *Future Directions Forum*, we have a conceptual framework for the hidden curriculum that we call **Casual Mentoring**. My colleague and friend **Lucina Uddin** and I described the framework a few years ago in a paper in **Trends in Cognitive Sciences**. Basically, we get some of the hidden curriculum passed down to us by members of our “research families” and in particular, our mentors. Of course, no mentor is perfect. Maybe you are looking for a job, but your mentor hasn’t been on the market in decades. Or, you want to learn a new technique for a project you’re working on, but your mentor doesn’t know it, and you don’t know anyone who does. Perhaps you just want to talk about something sensitive (e.g., career plans) and you want advice from someone who maybe has a perspective that your mentor does not share. Each year, the **Future Directions Forum** recruits a stellar group of scholars who serve as casual mentors for our attendees. This **Professional Development Team** prepares an innovative array of workshops, addresses, and small-group and one-on-one consultations that cover hidden curriculum topics, and in a way that caters to not only those who want to “get to know” a topic, but also have specific questions about it and wish to meet one-on-one to talk some more. Interested in learning about programming for 2024, including the titles and learning objectives of our workshops? **Then click on this link!**

OK, now let’s talk about your work. Maybe you have presented at conferences before or maybe the **Future Directions Forum** will be your first time presenting. In either

case, at the ***Future Directions Forum*** we “ruin” presenting at conferences for you, but in a good way. Our poster session, the ***Forum Science Social***, is an exclusive slot on our programming. Nothing else is going on when we hold it. There’s free food so people show up. And, get this, 100% digital. That’s right. No poster tube. Leave it at home. The session feels like a mashup between the talk you give at a symposium and showing your poster in the wing of a museum. There’s a buzz during the session because everyone is engaged, and the poster session “slots” change every 15-20 minutes using Powerpoint’s timed slideshow feature. Poster presenters even do neat things with the presentations, like have their figures and tables scroll through via GIF (i.e., one space on poster for all images and tables) or include 3D rendering of figures or images.

While we are on the topic of talking about your work, here’s a neat thing we rolled out last year, our ***Talks-to-Tales Series***! If you know me, **then you know that I “heart” storytelling**. So, we have an option for presenting your work orally at the meeting, and it’s a mix of you letting the audience know what you are up to in terms of works in progress, and the audience giving you advice on the “story” behind your work. Maybe you presented your work at a recent conference, and now you are looking to prepare a manuscript and submit it for publication. Or, you are looking to do the same thing, but treat the work as pilot data for a grant submission. Perhaps you are going on the market soon or going up for tenure next year. In each of those cases, you must tell a compelling story about your work. To get the paper published. To get the grant funded. To get the job but also keep the job. The Talks-to-Tales Series is about you telling us what you are working on, and members of our Professional Development Team working with the audience to “crowdsource” advice on your storytelling! The talks are short (5-10 minutes), and they each get a 30-minute slot on our schedule. The crowd is both intimate in size and supportive in their approach to feedback (think: rehearsal dinner for the wedding). After the talk, the audience spends roughly 20 minutes reacting to your story and ways to improve it!

[Learn more about submitting an abstract for our Forum Science Social!](#)

[Learn more about submitting an abstract for our Talks-to-Tales Series!](#)

Deadline for both of our Calls for Abstracts is Friday, April 5th—and registration opens that same day.

Are you excited to attend? I am excited to see you! After all, your work is another neat excuse for me to learn about what’s in store for the future of research in mental health!

Journal Update:

Evidence-Based Practice in Child and Adolescent Mental Health

By **Mary A. Fristad, PhD, ABPP**
Editor, *EPCAMH*

EPCAMH welcomes Dr. Andres Viana as our Associate Editor and thanks Dr. Jill Ehrenreich-May for her three years of service as Associate Editor.

EPCAMH continues to show impressive growth, with a 15% increase in downloads from 2022 to 2023. We have nearly quadrupled our downloads since 2020!

We have several special issues on the way- Volume 9 Issue 2 will focus on Tic and Tourette Disorder, with thanks to special guest editors Drs. Adam Lewin, Michael Himle, and Tara Peris.

As always, I encourage our members to ***read, cite, and submit*** EPCAMH articles, as we strive to become the ***#1 clinical resource for our members.***

Special Issue Alert!

Journal of Clinical Child & Adolescent Psychology

By José M. Causadias, PhD & Enrique W. Neblett, Jr., PhD
Guest Editors

Latinx children, youth, and families in the United States have been disproportionately affected by the COVID-19 pandemic compared to non-Latinx populations. At the same time, Latinx children, youth, and families in the United States have rich cultural and community resources that serve as a source of protection and promotion. But no special issue has been devoted to addressing the impact of the pandemic on this population.

To examine the implications of the pandemic for Latinx families, *Journal of Clinical Child and Adolescent Psychology* recently published [the special issue](#) “Understanding the impact of the COVID-19 pandemic on the mental health of Latinx children, youth, and families: Clinical challenges and opportunities”, edited by Drs. José M. Causadias and Enrique W. Neblett, Jr.

This collection of articles written by Latinx scholars address themes such as immigration and family separation; the impact of family economic adversity; school and family contexts of mental health; the pandemic experience of Latinx LGBTQ and AfroLatinx youth; and the need to imagine the future of Latinx children, youth, and families. All articles are Open Access and include summaries in Spanish.

Congratulations to SCCAP's Top Downloaded Journal Articles!

Here's your chance to read the most popular contributions to child and adolescent mental health research and clinical practice published in SCCAP's two journals (*Journal of Clinical Child & Adolescent Psychology* and *Evidence-Based Practice in Child & Adolescent Mental Health*). Below are the Top 10 most downloaded articles compared to articles published in the last 3 years and 11 years, respectively.

Top 10 Articles Published in EPCAMH in the Last 3 Years (2021-2023)

1. Lee, V., Roudbarani, F., Tablon Modica, P., Pouyandeh, A., & Weiss, J. A. (2022). Adaptation of Cognitive Behavior Therapy for Autistic Children During the Pandemic: A Mixed-Methods Program Evaluation. *Evidence-Based Practice in Child and Adolescent Mental Health*, 7(1), 76–93. <https://doi.org/10.1080/23794925.2021.1941432>
2. Jenness, J. L., DeLonga, K., Lewandowski, R. E., Spiro, C., Crowe, K., Martell, C. R., Towbin, K. E., Stringaris, A., & McCauley, E. (2023). Behavioral activation as a principle-based treatment: Developments from a multi-site collaboration to advance adolescent depression treatment. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(1), 55–72. <https://doi.org/10.1080/23794925.2022.2042871>
3. Calhoun, C. D., Nick, E. A., Gurtovenko, K., Vaughn, A. J., Simmons, S. W., Taylor, R., Twohy, E., Flannery, J., & Thompson, A. D. (2022). Child and Adolescent Psychiatric Inpatient Care: Contemporary Practices and Introduction of the 5S Model. *Evidence-Based Practice in Child & Adolescent Mental Health*, 7(4), 477–492. <https://doi.org/10.1080/23794925.2022.2034551>
4. Luis Sanchez, B. E., Klein, C. C., Corcoran, F., & Barnett, M. L. (2023). A Mixed-Methods Study of Clinician Adaptations to Parent-Child Interaction Therapy – What about Culture? *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(2), 269–285. <https://doi.org/10.1080/23794925.2022.2070883>
5. DeLuca, J. S., Novacek, D. M., Adery, L. H., Herrera, S. N., Landa, Y., Corcoran, C. M., & Walker, E. F. (2022). Equity in Mental Health Services for Youth at Clinical High Risk for Psychosis: Considering Marginalized Identities and Stressors. *Evidence-based practice in child and adolescent mental health*, 7(2), 176–197. <https://doi.org/10.1080/23794925.2022.2042874>
6. Klein, C. C., Gonzalez, J. C., Tremblay, M., & Barnett, M. L. (2023). Father participation in parent-child interaction therapy: Predictors and therapist perspectives. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(3), 393–407. <https://doi.org/10.1080/23794925.2022.2051213>

7. Otterson, S. E., Fristad, M. A., Bruns, E., Chen, J., Schellhause, Z., Murphy, M. A., Bridge, J., & McBee-Strayer, S. (2021). Length of Stay and Readmission Data for Adolescents Psychiatrically Treated on a Youth Crisis Stabilization Unit versus a Traditional Inpatient Unit. *Evidence-Based Practice in Child and Adolescent Mental Health*, 6(4), 484–489. <https://doi.org/10.1080/23794925.2021.1986868>
8. Xin, R., Fitzpatrick, O., Lai, P. H. L., Weisz, J., & Price, M. (2022). A Systematic Narrative Review of Cognitive-behavioral Therapies with Asian American Youth. *Evidence-Based Practice in Child and Adolescent Mental Health*, 7, 198–212. <https://doi.org/10.1080/23794925.2022.2042872>
9. Hong, N., Herrera, A., Furr, J. M., Georgiadis, C., Cristello, J., Heymann, P., Dale, C. F., Heflin, B., Silva, K., Conroy, K., Cornacchio, D., & Comer, J. S. (2023). Remote intensive group behavioral treatment for families of children with selective mutism. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(4), 439–458. <https://doi.org/10.1080/23794925.2022.2062688>
10. Zullo, L., Ollen, E., Ramos, N., Asarnow, J., Miranda, J., & Seager van Dyk, I. (2021). Treatment Recommendations and Barriers to Care for Suicidal LGBTQ Youth: A Quality Improvement Study. *Evidence-Based Practice in Child and Adolescent Mental Health*, 6(3), 393–409. <https://doi.org/10.1080/23794925.2021.1950079>

Top 10 Articles Published in EPCAMH in the Last 11 Years (2013-2023):

1. Lee, V., Roudbarani, F., Tablon Modica, P., Pouyandeh, A., & Weiss, J. A. (2022). Adaptation of Cognitive Behavior Therapy for Autistic Children During the Pandemic: A Mixed-Methods Program Evaluation. *Evidence-Based Practice in Child and Adolescent Mental Health*, 7(1), 76–93. <https://doi.org/10.1080/23794925.2021.1941432>
2. Telman, L. G. E., Van Steensel, F. J. A., Bögels, S. M., Verveen, A. J. C., & Maric, M. (2020). Modular CBT for Youth Social Anxiety Disorder: A Case Series Examining Initial Effectiveness. *Evidence-Based Practice in Child and Adolescent Mental Health*, 5(1), 16–27. <https://doi.org/10.1080/23794925.2020.1727791>
3. Jenness, J. L., DeLonga, K., Lewandowski, R. E., Spiro, C., Crowe, K., Martell, C. R., Towbin, K. E., Stringaris, A., & McCauley, E. (2023). Behavioral activation as a principle-based treatment: Developments from a multi-site collaboration to advance adolescent depression treatment. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(1), 55–72. <https://doi.org/10.1080/23794925.2022.2042871>
4. Luis Sanchez, B. E., Klein, C. C., Corcoran, F., & Barnett, M. L. (2023). A Mixed-Methods Study of Clinician Adaptations to Parent-Child Interaction Therapy – What about Culture? *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(2), 269–285. <https://doi.org/10.1080/23794925.2022.2070883>

5. Hong, N., Herrera, A., Furr, J. M., Georgiadis, C., Cristello, J., Heymann, P., Dale, C. F., Heflin, B., Silva, K., Conroy, K., Cornacchio, D., & Comer, J. S. (2023). Remote intensive group behavioral treatment for families of children with selective mutism. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(4), 439–458. <https://doi.org/10.1080/23794925.2022.2062688>
6. Calhoun, C. D., Nick, E. A., Gurtovenko, K., Vaughn, A. J., Simmons, S. W., Taylor, R., Twohy, E., Flannery, J., & Thompson, A. D. (2022). Child and Adolescent Psychiatric Inpatient Care: Contemporary Practices and Introduction of the 5S Model. *Evidence-Based Practice in Child & Adolescent Mental Health*, 7(4), 477–492. <https://doi.org/10.1080/23794925.2022.2034551>
7. Klein, C. C., Gonzalez, J. C., Tremblay, M., & Barnett, M. L. (2023). Father participation in parent-child interaction therapy: Predictors and therapist perspectives. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(3), 393–407. <https://doi.org/10.1080/23794925.2022.2051213>
8. Otterson, S. E., Fristad, M. A., Bruns, E., Chen, J., Schellhause, Z., Murphy, M. A., Bridge, J., & McBee-Strayer, S. (2021). Length of Stay and Readmission Data for Adolescents Psychiatrically Treated on a Youth Crisis Stabilization Unit versus a Traditional Inpatient Unit. *Evidence-Based Practice in Child and Adolescent Mental Health*, 6(4), 484–489. <https://doi.org/10.1080/23794925.2021.1986868>
9. DeLuca, J. S., Novacek, D. M., Adery, L. H., Herrera, S. N., Landa, Y., Corcoran, C. M., & Walker, E. F. (2022). Equity in Mental Health Services for Youth at Clinical High Risk for Psychosis: Considering Marginalized Identities and Stressors. *Evidence-Based Practice in Child and Adolescent Mental Health* 7(2), 176–197. <https://doi.org/10.1080/23794925.2022.2042874>
10. Ofonedu, M. E., Turner, E. A., Franklin, A. J., & Breland-Noble, A. (2023). Promoting positive mental health outcomes for Black youth of African descent: Applying the family as host model for culturally responsive practice. *Evidence-Based Practice in Child and Adolescent Mental Health*, 8(2), 166–180. <https://doi.org/10.1080/23794925.2023.2169969>

Top 10 Articles Published in JCCAP in the Last 3 Years (2021-2023):

1. Datta, N., Matheson, B. E., Citron, K., Van Wye, E. M., & Lock, J. D. (2023). Evidence based update on psychosocial treatments for eating disorders in children and adolescents. *Journal of Clinical Child and Adolescent Psychology*, 52(2), 159–170. <https://doi.org/10.1080/15374416.2022.2109650>
2. Dedousis-Wallace, A., Drysdale, S. A. O., Murrphy, R. C., Greene, R. W., Ollendick, T. H., & McAloon, J. (2022). Predictors and Moderators Two Treatments of Oppositional Defiant Disorder in Children. *Journal of Clinical Child and Adolescent Psychology*. <https://doi.org/10.1080/15374416.2022.2127102>

3. Garandeau, C. F., Laninga-Wijnen, L., & Salmivalli, C. (2022). Effects of the KiVa Anti-Bullying Program on Affective and Cognitive Empathy in Children and Adolescents. *Journal of Clinical Child & Adolescent Psychology, 51*(4), 515–529. <https://doi.org/10.1080/15374416.2020.1846541>
4. Staff, A. I., van den Hoofdakker, B. J., van der Oord, S., Hornstra, R., Hoekstra, P. J., Twisk, J. W. R., Oosterlaan, J., & Luman, M. (2021). Effectiveness of Specific Techniques in Behavioral Teacher Training for Childhood ADHD: A Randomized Controlled Microtrial. *Journal of Clinical Child & Adolescent Psychology, 50*(6), 763–779. <https://doi.org/10.1080/15374416.2020.1846542>
5. Sanchez, A. L., Jent, J., Aggarwal, N. K., Chavira, D., Coxe, S., Garcia, D., La Roche, M., & Comer, J. S. (2022). Person-Centered Cultural Assessment Can Improve Child Mental Health Service Engagement and Outcomes. *Journal of Clinical Child & Adolescent Psychology, 51*(1), 1–22. <https://doi.org/10.1080/15374416.2021.1981340>
6. Bernard, D. L., Gaskin-Wasson, A. L., Jones, S. C. T., Lee, D. B., Neal, A. J., Sosoo, E. E., Willis, H. A., & Neblett, E. W., Jr. (2023). Diversifying clinical child and adolescent psychology: A Change Gonna Come. *Journal of Clinical Child and Adolescent Psychology, 52*(3), 396–410. <https://doi.org/10.1080/15374416.2023.2191284>
7. Fish, J. N. (2020). Future Directions in Understanding and Addressing Mental Health among LGBTQ Youth. *Journal of Clinical Child & Adolescent Psychology, 49*(6), 943–956. <https://doi.org/10.1080/15374416.2020.1815207>
8. Hornstra, R., van der Oord, S., Staff, A. I., Hoekstra, P. J., Oosterlaan, J., van der Veen-Mulders, L., Luman, M., & van den Hoofdakker, B. J. (2021). Which Techniques Work in Behavioral Parent Training for Children with ADHD? A Randomized Controlled Microtrial. *Journal of Clinical Child & Adolescent Psychology, 50*(6), 888–903. <https://doi.org/10.1080/15374416.2021.1955368>
9. Causadias, J. M., Alcalá, L., Morris, K. S., Yaylaci, F. T., & Zhang, N. (2022). Future Directions on BIPOC Youth Mental Health: The Importance of Cultural Rituals in the COVID-19 Pandemic. *Journal of Clinical Child & Adolescent Psychology, 51*(4), 577–592. <https://doi.org/10.1080/15374416.2022.2084744>
10. De Los Reyes, A., Wang, M., Lerner, M. D., Makol, B. A., Fitzpatrick, O. M., & Weisz, J. R. (2023). The Operations Triad Model and Youth Mental Health Assessments: Catalyzing a Paradigm Shift in Measurement Validation. *Journal of Clinical Child & Adolescent Psychology, 52*(1), 19–54. <https://doi.org/10.1080/15374416.2022.2111684>

Top 10 Articles Published in JCCAP in the Last 11 Years (2013-2023):

1. Xerxa, Y., Rescorla, L. A., Serdarevic, F., Van IJzendorp, M. H., Jaddoe, V. W., Verhulst, F. C., Luijk, M. P. C. M., & Tiemeier, H. (2020). The Complex Role of Parental Separation in the Association between Family Conflict and Child Problem Behavior. *Journal of Clinical Child & Adolescent Psychology, 49*(1), 79–93. <https://doi.org/10.1080/15374416.2018.1520118>
2. Strang, J. F., Meagher, H., Kenworthy, L., de Vries, A. L. C., Menvielle, E., Leibowitz, S., Janssen, A., Cohen-Kettenis, P., Shumer, D. E., Edwards-Leeper, L., Pleak, R. R., Spack, N., Karasic, D. H., Schreier, H., Balleur, A., Tishelman, A., Ehrensaft, D., Rodnan, L., Kuschner, E. S., & Mandel, F. (2018). Initial Clinical Guidelines for Co-Occurring Autism Spectrum Disorder and Gender Dysphoria or Incongruence in Adolescents. *Journal of Clinical Child & Adolescent Psychology, 47*(1), 105–115. <https://doi.org/10.1080/15374416.2016.1228462>
3. DuPaul, G. J., Evans, S. W., Mautone, J. A., Owens, J. S., & Power, T. J. (2020). Future Directions for Psychosocial Interventions for Children and Adolescents with ADHD. *Journal of Clinical Child & Adolescent Psychology, 49*(1), 134–145. <https://doi.org/10.1080/15374416.2019.1689825>
4. Datta, N., Matheson, B. E., Citron, K., Van Wye, E. M., & Lock, J. D. (2023). Evidence based update on psychosocial treatments for eating disorders in children and adolescents. *Journal of Clinical Child and Adolescent Psychology, 52*(2), 159–170. <https://doi.org/10.1080/15374416.2022.2109650>
5. Foa, E. B., Asnaani, A., Zang, Y., Capaldi, S., & Yeh, R. (2018). Psychometrics of the Child PTSD Symptom Scale for DSM-5 for Trauma-Exposed Children and Adolescents. *Journal of Clinical Child & Adolescent Psychology, 47*(1), 38–46. <https://doi.org/10.1080/15374416.2017.1350962>
6. Schleider, J. L., Dobias, M. L., Sung, J. Y., & Mullarkey, M. C. (2020). Future Directions in Single-Session Youth Mental Health Interventions. *Journal of Clinical Child & Adolescent Psychology, 49*(2), 264–278. <https://doi.org/10.1080/15374416.2019.1683852>
7. Kaminski, J. W., & Claussen, A. H. (2017). Evidence Base Update for Psychosocial Treatments for Disruptive Behaviors in Children. *Journal of Clinical Child & Adolescent Psychology, 46*(4), 477–499. <https://doi.org/10.1080/15374416.2017.1310044>
8. Rogers, S., & Vismara, L. (2008). Evidence-Based Comprehensive Treatments for Early Autism. *Journal of Clinical Child & Adolescent Psychology, 37*(1), 8–38. <https://doi.org/10.1080/15374410701817808>
9. Jensen, T., Holt, T., Ormhaug, S., Egeland, K., Granly, L., Hoaas, L., Hukkelberg, S., Indregard, T., Stormyren, S., & Wentzel-Larsen, T. (2014). A Randomized

Effectiveness Study Comparing Trauma-Focused Cognitive Behavioral Therapy With Therapy as Usual for Youth. *Journal of Clinical Child & Adolescent Psychology*, 43(3), 356–369. <https://doi.org/10.1080/15374416.2013.822307>

10. Strang, J. F., Knauss, M., van der Miesen, A., McGuire, J. K., Kenworthy, L., Caplan, R., Freeman, A., Sadikova, E., Zaks, Z., Pervez, N., Balleur, A., Rowlands, D. W., Sibarium, E., Willing, L., McCool, M. A., Ehrbar, R. D., Wyss, S. E., Wimms, H., Tobing, J., & Thomas, J. (2021). A Clinical Program for Transgender and Gender-Diverse Neurodiverse/Autistic Adolescents Developed through Community-Based Participatory Design. *Journal of Clinical Child & Adolescent Psychology*, 50(6), 730–745. <https://doi.org/10.1080/15374416.2020.1731817>

Acute, Intensive, & Residential Services SIG Update

By Alysha Thompson, PhD
AIRS Special Interest Group Chair

It's been a busy few months for the AIRS SIG! We've hosted two coffee hours, topics including Navigating Virtual Care for Adolescents and a Panel on Postdoctoral Fellowships in Acute, Intensive, and Residential Services. We also have created an awards committee and are planning for our first AIRS awards, to be awarded this August at APA. Given this new committee, we created a new position on our executive board, the Awards Committee Co-Chair, and we welcomed Dr. Kimberly Schubert into that role. In addition, we re-elected our Trainee Member at Large, and Patricia Garibaldi will serve a second term on the AIRS SIG Executive Board.

We had a great presence at the Association for Behavioral and Cognitive Therapies Annual Convention, with lots of excellent presentations and attendance by AIRS SIG members. Highlights included multiple presentations from folks at Bradley Hospital/ Brown University and Boston University regarding positive psychology interventions on inpatient units!

We also have an active listserv discussion with topics including dress code on inpatient units, social work on inpatient units, psych-safe furniture recommendations, acuity tools to measure patient acuity, programming for high acuity units, one to one staffing policies, physical interactions and boundaries on inpatient units, and problematic sexual behaviors. Our listserv continues to be a great way for AIRS SIG members to connect with one another to discuss topics that are relevant to AIRS and hear how other institutions are managing ongoing challenges in these settings.

We are continuing to expand our membership, and know that there are still psychologists working in Acute, Intensive, and Residential settings that could benefit from the AIRS SIG community and don't know about us yet! If you know a psychologist who works in inpatient psychiatry, emergency department mental health, partial hospital programs, intensive outpatient programs, or residential treatment, please let them know about the AIRS SIG! Our mission has been to connect psychologists around the country who work in these settings, knowing that we are often the only psychology representation in our smaller units, and we can do that with your help to spread the word. We also want to remind AIRS SIG members to take our membership survey, found [here](#).

Our early career consultation group continues to meet monthly. If you identify as an early career psychologist working in AIRS settings, please come and join our group for community and consultation! More information regarding dates can be found in our flier, which is included in this article.

Lastly, we have a few things upcoming. Dr. Leyla Erguder will be presenting in an upcoming coffee hour "*Microaggressions in Acute Care Settings: Implications for Clinical Practice and Workplace Culture*," scheduled for May 16th at 5 pm EST. Look out for the zoom link on the AIRS SIG listserv. In addition, Dr. Erguder will also be hosting a *drop-in diversity and equity consultation group* where folks can discuss their specific health equity concerns in AIRS settings. The first drop-in session will be April 3 at 4pm EST, and Zoom link will be sent through the AIRS SIG list serv. Please join us for a great discussion about these important topics.

Bilingual Psychologists SIG Update

By Hannah Jones, PhD
Bilingual Psychologists SIG Co-Chair

The Bilingual Psychologists Special Interest Group has been hard at work planning for a great 2024! We have identified the following goals for this upcoming year: creating a consistent networking space for bilingual students and clinicians, increasing advocacy efforts for bilingual students and clinicians, and improving access to bilingual resources.

The SIG hosted its first virtual networking event of 2024 on Monday, February 26th. Our Special Interest Group is looking to host monthly virtual networking events. Look to the listserv for information about our next event. Grab a coffee or tea and come meet, network, and strategize with other bilingual providers from across the United States!

We also wanted to introduce our Executive Board for 2024!

- **Co-Chair 1:** Dr. Hannah Jones – Child Clinical and Adolescent Psychologist, Children’s Healthcare of Atlanta
- **Co-Chair 2:** Erika Garcia-Rocha, PsyD – Integrated Pediatric Psychologist, Children’s Hospital of Colorado
- **Listserv Manager:** Dr. Kelly Banneyer, PhD – Clinical Psychologist, Texas Children’s Hospital

We are still looking to fill the Secretary, Treasurer, and Student Representative positions on our Executive Board! See below for a list of roles and responsibilities:

Secretary

- Take meeting minutes for executive board and events
- Create the event announcement emails
- Monitor SIG email and track RSVPs for SIG events

Treasurer

- Manage financial stipend received annually for the SIG and allocate funds accordingly
- Manage SIG Zoom account
- Create zoom link for board meetings and events

- Take meeting minutes when secretary is not available

Student Representative

- Host virtual networking events for students twice a year
- Amplify student/trainee voices for event planning, SIG improvement, etc.
- Active participation in committee meetings

Interested applicants for the open Executive Board positions or to learn more about the Bilingual Psychologists Special Interest Group, please email Hannah.jones@choa.org and Erika.Garcia-Rocha@childrenscolorado.org

Clinical Child & Adolescent Practice SIG Update

By Jill Thurber, PhD, ABPP
Chair, Clinical Child and Adolescent Practice SIG

The Clinical Child and Adolescent Practice Special Interest Group has grown to 185 members since its beginning three years ago. The board continues to meet monthly for in-person case consultation, while the larger membership participates in quarterly webinars and case conferences via telehealth services.

On April 26, 2024 the Practice SIG will host a lunchtime case conference on assessing autism presented by Megan Lawson, PsyD, ABPP, and Allison Sallee, Ph.D. Please join the SCCAP SIG to participate in these types of learning opportunities with the larger community of clinicians who treat children and adolescents.

We look forward to future opportunities for child and adolescent clinicians to collaborate on complex cases in practice.

Infant & Early Childhood SIG Update

By Miller Shivers, PhD
IEC Special Interest Group Co-Chair

On December 8th, the Infant and Early Childhood (IEC) SIG's Education and Training Committee hosted an "Ask the Expert" Webinar. The panel of presenters represented a range of career settings and experiences, including academic medicine, private practice, consulting, colleges and universities, and the non-profit sector. Attendees had the opportunity to attend two breakout sessions each with at least two experienced professionals to learn about their work and role within the field of early childhood mental health specific to their setting. The majority of attendees were psychology graduate students, though several psychologists currently in the workforce attended as well. Feedback on the webinar was uniformly positive from the attendees, and they expressed appreciation for the opportunity to ask questions, learn how the presenters obtained their jobs, receive guidance and mentorship, and network with others in the field. The IEC SIG will host additional webinars in the future and will be holding elections for new SIG chairs and committee chairs in the Summer. If you are interested in a leadership position or you'd like more information about the SIG, please contact the co-chairs Caroline Kerns, PhD at ckerns@Luriechildrens.org or Miller Shivers, PhD at mshivers@luriechildrens.org.

Emerging Adulthood SIG Update

By Kelly Schloredt, PhD, ABPP
Vice Chair, Emerging Adult SIG

We are now a full year into the relaunch of the Emerging Adult SIG. Over the course of the past year, our executive leadership group has been meeting monthly and working diligently to move forward a variety of projects. While our attention in the past year has first and foremost been devoted to building our membership, we have also been focused on developing a listserv, putting together a potential symposium for APA, and conceptualizing some scholarly writing activities highlighting why emerging adulthood is an important competency area for clinical child and adolescent psychologists. We look forward to building on these activities in 2024 and the opportunity to hold a membership outreach event at the 2024 APA Convention in Seattle, WA. Until then, if you would like more information about the EA SIG and/or are interested in joining, please visit [our webpage](#). We would welcome your participation!

Introducing the Latest Special Interest Group (SIG) at
SCCAP:

The Professional Development and Mentoring SIG (PDM SIG)

By **Hannah Ades, BA & Andres De Los Reyes, PhD**
Co-Chairs, PDM SIG

The Society of Clinical Child and Adolescent Psychology (SCCAP) enjoys a long history of efforts at outreach, dedication, and programming relevant to its Early Career Members (ECMs). SCCAP thrives when it fosters the development of ECMs, as they represent the next generation of mentors who will train the generation of ECMs that follow them. We are excited about the recent approval of a new **Special Interest Group devoted to Professional Development and Mentoring (PDM SIG)**, with a specific emphasis on SCCAP's ECMs. Through a partnership with an annual meeting devoted to the professional development and mentoring of ECMs (i.e., *Future Directions Forum*), the PDM SIG advocates for ECM interests, provides a means for established SCCAP members to consult and provide guidance, and solicits information from ECMs on professional development programming and mentoring opportunities of interest to them.

The PDM SIG's mission is of relevance to the SCCAP membership broadly. As such, we welcome all of you, regardless of your career stage, particularly because our mission and activities dovetail with anyone interested in professional development and mentoring. That said, the PDM SIG's mission is of particular relevance to any of you who identify as an ECM, or identify as an ally and/or mentor of ECMs. Per APA's definition of an *Early Career Psychologist (ECP)*, this includes any of you who are in the first 10 years of your career post-Ph.D. Among those of you who have yet to receive a Ph.D., are you a Student Member of SCCAP? If so, then we also see you as a core member of the PDM SIG! And why not join the only SIG at SCCAP that explicitly centers your interests and needs?

Beyond ECMs, we also welcome mid-career and senior-level SCCAP Members. Do you have expertise or interests in the mentoring and professional development of ECMs? If so, then we expect you to also comprise a core segment of PDM SIG members! **In fact, take a look at our list of Founding Members on our SIG home page.** We have founding members who traverse career stages!

We close this piece by highlighting the two things that excite us most about where the PDM SIG goes from here. First, to encourage accountability and representation, we expect the rich diversity of membership in the PDM SIG to inform its leadership structure. At our initial planning meetings, our goal is to have Student Members and

Members of SCCAP build consensus on how to share leadership roles. We expect to build a SIG Board that includes positions for members at various career stages (e.g., student, ECP, mid-career, senior). Beyond career stages, we expect to include board roles for ECMs at various stages of training (e.g., undergraduate, post-baccalaureate, master's, doctoral, post-doctoral). Governing members will work together to produce professional development and mentoring opportunities that center SCCAP's ECMs. At the PDM SIG, we will make decisions where everyone will not only have a stake in the outcome but will also have the power and responsibility to ensure that the outcome serves the best interests of ECMs and their needs.

Here is the second thing that excites us: The PDM SIG's annual meeting, the *Future Directions Forum*, is where we expect to hold our annual board meetings! The value of this infrastructure is that the *Future Directions Forum* will serve as a capstone for the PDM SIG's year-round activities. We expect to hold monthly board meetings virtually, at which a member of our Executive Board, the Community Manager, will lead discussions surrounding virtual programming offered throughout the year, and collaborate with the board to design social events for the APA Convention. Collectively, these activities will serve to engage PDM SIG members year-round, and create an outlet for attendees who have yet to become SCCAP members to learn more about the society and see the value of becoming a member.

Join us in this exciting initiative, and we welcome all your feedback, questions, comments, and insights about where the PDM SIG goes from here!

Diversity Committee Update

By Juventino Hernandez Rodriguez, PhD
Member-at-Large: Diversity

Hola / Hello! I am delighted to serve SCCAP as your newest Member-at-Large: Diversity representative. I am eager to help SCCAP with DEI initiatives, develop and advance diversity training opportunities, establish and maintain diversity awards, and help create pathways to increase diverse representation in leadership. My aim is to work closely with leadership and members to best support our shared goals. If you have any suggestions or recommendations on diversity-related trainings or other offerings that SCCAP can provide, please feel free to contact me at juventino.hernandezrodriguez@utrgv.edu.

The SCCAP Diversity Committee is currently reviewing submissions for the Diversity Professional Development Award (DPDA). DPDAs are open to SCCAP graduate students and early career psychologist members and help members attend professional conferences to enhance skills and expand professional networks. Awardees will soon be announced, so stay tuned!

Education & Standards Committee Update

By Meghan Miller, PhD
Member-at-Large: Education & Standards

I'm happy to provide the SCCAP membership my inaugural update as your Member at Large for Education and Standards! In this role, I hope to build upon the Professional Development webinar series and other CE programs, support SCCAP's student and early career award programs, and represent SCCAP's interests and members in the development of training guidelines for clinical child and adolescent psychology as a specialty discipline.

Members of SCCAP have been working tirelessly over the last year to help develop training guidelines for clinical child and adolescent psychology as part of the Clinical Child and Pediatric Psychology Training Council's (CCaPPTC) Training Guidelines Steering Committee and Task Force. Thanks in particular to SCCAP Education and Standards committee member Dr. Sunny Bai for her work on this important project, as well as all other SCCAP members who are involved. We will be providing updates on our progress in future newsletters and will be soliciting input from the SCCAP membership along the way.

We've also been busy reviewing an impressive bunch of applications for the Routh Dissertation Grant, which provides support for student research that shows promise to add significantly to the clinical child and adolescent psychology literature. Thank you to the reviewers who volunteered their time to carefully evaluate these applications, including Dr. Ed Christophersen, Dr. Michelle Rozenman, Dr. Joaquin Borrego, Dr. Sunny Bai, and Dr. Emily Ricketts.

Finally, we have an exciting webinar series in the works for this year. Thanks to all who attended the webinars so far. First, we had the *President's Webinar: When the Apple Doesn't Fall Far From the Tree: Treating Children with ADHD When the Parent Has ADHD Too* by Andrea Chronis Tuscano, Ph.D. (University of Maryland, College Park). It was a great way to kick off the series! Next, Miya Barnett, Ph.D. (University of California, Santa Barbara) gave an inspiring talk titled "How Psychologists Can Partner with Lay Health Workers to Promote Equity in Children's Mental Health" on March 18th. We have two more webinars scheduled for this spring and early summer. We look forward to seeing you there—keep an eye out on your inbox for more details soon!

Upcoming Webinars:

- May 2024: Alayna Park, Ph.D. (University of Oregon and Ballmer Institute; details TBD)

- June 12, 2024, 1-2pm EST: Henry Willis, Ph.D. (University of Maryland, College Park)

Membership Committee Update

By Chrissy Cammaratta, PhD, ABPP

Member-At-Large: Membership and Public Interest

Welcome new 2024 members!!! SCCAP is busy preparing for the exciting programs we have coming to the APA convention in Seattle this August. I hope to see many of you there!

We had several new members, so I would like to take this opportunity to introduce you to your membership committee:

- William Benson, PhD, Child Mind
- Traci Kennedy, PhD, University of Pittsburgh
- Mary Kathryn Cancilliere, PhD, Hasbro Children's Hospital
- Jodi Litfin, PhD, Rocky Mountain Human Services
- Monica Whitehead, PhD, Cincinnati Children's Hospital
- Kimberly Schubert, PhD, Nationwide Children's Hospital

I also would like to shout out to Ambassador Program Chair, Ana Ugueto, PhD on her new role in SCCAP as Listserv Manager. Thanks for all of your support on the committee and congratulations on your new role!

Check out our most recently created SIGs:

- Professional Development and Mentoring: Andy De Los Reyes & Hannah Ades, Co-Chairs
- Summer Treatment Program: Sarah Tannenbaum and Katie Hart, Co-Chairs

Thinking about your own SIG? Or, to learn more about our SIGs visit [our website](#). Finally, there is still time to renew or join before APA. Visit SCCAP53.org to renew or join and get access to our listserv, journals, and SIG programming.

See you in Seattle!

Science & Practice Committee Update

By Jennifer L. Hughes, PhD, MPH
Member-at-Large: Science & Practice

I'd like to start by highlighting the great success of our second SCCAP Clinical Practice Institute (CPI), "**Navigating Technology and Social Media Use with Children, Adolescents, and Families: Clinical Implications of APA Guidance on Social Media Use**". SCCAP hosted 3 monthly sessions in the Fall of 2023 with a fantastic group of speakers, including Dr. Sophia Choukas-Bradley, Dr. Jessica Hamilton, Dr. Candice Biernesser, and Dr. Sarah Domoff (<https://sccap53.org/the-clinical-practice-institute-cpi/>). Session participation ranged from 30-45 SCCAP members, and attendees were active and engaged, discussing ideas about how to support parents who are concerned about their teen's technology use, especially how to do so in a collaborative way, and about best practices for assessing and treating problematic media use. SCCAP CPI was designed to be a series of three, 3-hour interactive seminars, with a focus on tangible, evidence-based practices and recommendations to take straight to clinical practice, and we received feedback that this year's offering met this goal!

- "Excellent webinar with a great balance of lecture and discussion, with very helpful resources for clinical practice."
- "An informative training that provided useful information and concrete tools that will be very helpful in practice. Thank you!"
- "Excellent presentation; cannot recommend it enough. Very nicely done. Great speakers who are definitely on top of their field."

Members, we want to hear from you! Are you interested in us continuing CPI? Are there topics that you hope CPI will explore? Please contact me if you have ideas. Also, let me know if you would like to serve on the 2024 CPI Sub-Committee, forming now!

I want to highlight a few specific science and practice resources from APA. If you have not already, please sign up for the APA Science Spotlight, available at: <https://www.apa.org/news/science-spotlight>. Additionally, the APA Practice Directorate has an email list for Practitioners, available at: <https://www.apa.org/practice/resources/listserv>.

If you would like to become more involved in SCCAP and are interested in contributing to the Science or Practice Committees, please contact me at Jennifer.Hughes@nationwidechildrens.org

SCCAP Fellows Committee Update

By Martha C. (Marcy) Tompson, PhD
Chair, SCCAP Fellows Committee

I am the Chairperson for the SCCAP Fellows Committee and am honored to be joined by my colleagues and committee members – Joaquin Borrego, PhD and Rhonda Boyd, PhD. Your service to SCCAP is highly appreciated.

SCCAP Fellow status is a valued honor and recognizes outstanding contributions, with national impact, to Psychology overall and to SCCAP specifically. The SCCAP Fellows Committee considers both SCCAP Fellows (already an APA Fellow through another division and applying for SCCAP Fellow status) and Initial Fellows (applying for both APA and SCCAP Fellow status concurrently). For the 2024 cycle (Fellow Status for 2025), we have completed our review of the initial Fellows and forwarded our endorsement of 5 exceptional candidates with national impact. We will continue with our review of the SCCAP Fellow applicants in the coming month.

If you are interested in becoming an SCCAP Fellow, you are encouraged to apply! Applications for the 2025 cycle are not due until December 1, 2024, so you have plenty of time. Please be aware that your APA dues must be up-to-date and membership current at the time of application. For information on requirements, please visit [the SCCAP website](#).

Update from SCCAP Representatives to APA Council

By Mary Louise Cashel, PhD & Stephen Hupp, PhD
SCCAP Representatives to APA Council

We are pleased to welcome Dr. Stephen Hupp as our new member of the APA Council of Representatives (COR) for Division 53, SCCAP. Stephen is a professor in the Clinical Child and School Psychology Master's program at Southern Illinois University Edwardsville.

Stephen Hupp and Mary Louise Cashel attended the spring COR meeting in late February. Mary Louise Cashel also participated in Capitol Hill Day and met with members of Congress to discuss current APA priorities and initiatives.

An update about these events will appear in the summer issue of *InBalance*—stay tuned!

American Board of Clinical Child & Adolescent Psychology Update

By Adam B. Lewin, PhD, ABPP
President, ABCCAP

ABCCAP is Twenty!!!

Tempus fugit! ABCCAP is celebrating our 20th year as a specialty board. Around the same time Child & Adolescent Psychology transitioned from Section 1 of Division 12 (Clinical) to form Division 53, our specialty took a giant step forward in 2003 with the launch of this ABPP specialty board. I'm grateful to leaders in Pediatric and Clinical Child Psychology who went through **considerable efforts** to establish our own specialty board: Dr. Al Finch, Phil Kendall, John Lochman, Jim Johnson, Mike Nelson and Michael Roberts (with Drs. John Piacentini, Mary Fristad, Ric Steele and Lynn Covitz joining the leadership in the first 5 years). Twenty years later we not only have two child divisions, but we have a child/pediatric training council, an APA Level 3 Child/Pediatric specialty competencies and... yes..., ABCCAP. Establishing our specialty board was crucial to the advancement of Pediatric and Clinical Child Psychology. My gratitude to our early leaders (including anyone whom I inadvertently omitted) – several of whom I am grateful to call a mentor!

My time as ABCCAP President has also flown by. Among my aims this year were increasing applications for boarding, increasing support to candidates and improving our processes. We set new records in applications (including early applicants), and we markedly increased our informational programming. We established monthly “office hours” and grew mentor programs to support candidates. We also launched our National Examiner Board, a group of experienced exam chairs who agreed to multiple examinations (akin to a journal's editorial board). I am hopeful for continued growth and that we will further demonstrate the critical role boarding plays in advancing our specialty and increasing parity with physicians and other health professionals.

I am also pleased to announce that we will launch our **Diversity Award in 2024** as well as an **ABCCAP Scholarship** to support boarding costs. Details will be announced in early 2024.

Our work is just beginning. We need boarding to be main stream among health service psychologists. Child and Pediatric Psychology is specialized – peer review can help us distinguish individuals and protect the profession. I hope psychologists will seek boarding EARLY in their careers. Physicians have a board-eligibility window: highly proximal to specialty fellowship training. I hope we will be able to make applying for boarding the next logical step following licensure/completion of supervised specialty hours. We also have work to do to improve our efficiency. We rely on considerable

volunteer time (from our peers – up to 9 hours per exam). To grow, we will need to increase our examiner and mentor pools. These service roles benefit the advancement of child and pediatric psychology, and also provide service leadership roles to psychologists. Board examiners and mentors are therapists, clinicians, consultants, hospitalists, supervisors, and educators – mentoring and examining is a way to give back, earn continuing education credits, and network with other child/pediatric psychologists devoted to promoting our specialty.

Twenty years ago, I was a Ph.D. student in the Child-Pediatric Major Area at the University of Florida – Clinical and Health Psychology (Go Gators!). I would have never believed that one day I would have the honor to lead ABCCAP. I'm deeply appreciative to my fellow board members for countless hours of volunteer time – making the boarding process happen is a ton of work! I'm excited to hand things off to Dr. David Langer – 2024 President (and SCCAP Treasurer!). Looking back, there's legacy in this organization (see the many names above). Looking forward, the ascending leadership of ABCCAP over the next 4 years (Dr. Langer, Dr. Dan Cheron, Dr. Anna Egan and Dr. Sara Gould) is outstanding. I hope you will consider volunteer service (if boarded) or if not, applying for specialist designation as part of your New Year's Resolution 2024. Please visit [our website](#) for more information.

