Item #1 and #2 (Cross Cutting Items 1-16) Require BAPPI Action

1. Review of Items Discussed and Decisions Made During October 2009 Conference Call (ALL) (Notes under separate cover)

2. Review, Discussion and Possible Action on Items in Cross Cutting Agenda (SEPARATE BOOK)

   CC-01 Listing of American Board of Assessment Psychology Diplomats in APA Directory (VAZQUEZ/WYCHE)

   CC-02 Strategic Plan Initiatives (ALL)

   CC-03 BEA Task Force on Classroom Violence Directed Against K-12 Teachers (TURNER/CHUNG)

   CC-04 Call for Comments on CRSPPP Petitions for Recognition or Renewal (MEIER/ZEISS)

   CC-05 National Standards for High School Psychology Curricula (AUSTRIA/HALDEMAN)

   CC-06 Draft Guidelines for Psychological Practice in Health Care Delivery Systems (MONA/HANCOCK)

| CC-08       | Guidelines for the Practice of Parenting Coordination  
|            | *(MONA/HANCOCK)* |
| CC-09       | Revision of Guidelines for Psychological Evaluations in Child Protection Matters  
|            | *(MEIER/ZEISS)* |
| CC-10       | Guidelines Policy Education and Dissemination Project  
|            | *(VAZQUEZ/WYCHE)* |
| CC-11       | APA Input to the American Association for the Advancement of Science and Human Rights Coalition  
|            | *(VAZQUEZ/WYCHE)* |
| CC-12       | Guidelines for the Evaluation of Dementia and Age-Related Cognitive Decline  
|            | *(MEIER/ZEISS)* |
| CC-13       | Guidelines for Psychological Practice with Lesbian, Gay, and Bisexual Clients  
|            | *(MONA/HANCOCK)* |
| CC-14       | Report of the Task Force on the Psychosocial Effects of War on Children and Families Who Are Refugees from Armed Conflict Residing in the United States  
|            | *(AUSTRIA/HALDEMAN)* |
| CC-15       | Resolution on Data about Sexual Orientation and Gender Identity  
|            | *(AUSTRIA/HALDEMAN)* |
| CC-16       | Proposed Revisions to APA Resolution on Homelessness  
|            | *(VAZQUEZ/WYCHE)* |

**CALLS FOR NOMINATIONS**

| CC-17       | APA Fellows Committee |
| CC-18       | Raymond D. Fowler Award for Outstanding Contributions to APA – Member |
| CC-19       | Committee on Lesbian, Gay, Bisexual, & Transgender Concerns |
| CC-20       | Committee on Lesbian, Gay, Bisexual, & Transgender Concerns Outstanding Achievement Awards |

3. 2009 BAPPI and Public Interest Annual Reports  
*DISCUSSION*  
*(ALL) (Exhibits available at meeting)*

4. Preparation of BAPPI Slates  
*ACTION*  
*(ALL) (List of Nominations to be forwarded under Separate cover)*
5. BAPPI Chair’s Report
   (HALDEMAN FOR VAZQUEZ) INFORMATION

6. Public Interest Directorate Update
   (KEITA) INFORMATION

7. BAPPI Convention Programming in 2011
   (HALDEMAN/HANCOCK) ACTION

8. Review of Public Interest Awards Call for Nominations
   (TURNER/CHUNG) INFORMATION

9. Reassignment of BAPPI Member Liaison and Monitor Positions
   (ALL) ACTION

10. APA Membership Category Counts
    INFORMATION

11. Guidelines for Conditions of Employment of Psychologists
    (MEIER/ZEISS) ACTION

12. BAPPI Strategic Planning and Review of Policies and Procedures
    (ALL) (Available at meeting) ACTION

    on the Representation of Diversity on the Council of Representatives
    INFORMATION

14. Meeting with Dr. Wayne Camara Regarding Status of the
    Revision of The Standards for Educational and Psychological Testing
    DISCUSSION

15. Update on Status of Minority Fellowship Program
    POSTPONED UNTIL FALL 2010 INFORMATION

16. New CLGBTC Operating Procedures
    INFORMATION

17. Procedural Safeguards to Ensure Scientific Merit of APA
    (TURNER/CHUNG) ACTION

18. Update on the Center for Workforce Studies
    INFORMATION

19. Public Interest Government Relations Office
    Report on Public Interest Advocacy Initiatives
    (Report from Annie Toro, JD, MPH) INFORMATION/DISCUSSION

20. Board of Directors Draft Minutes, December 2009
    INFORMATION

    INFORMATION
22. Oversight of APA Leadership and Participation in the International INFORMATION
Network On Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology

23. Proposal for Resolution and Initiative for APA Promotion of ACTION
Public Health Communications
(VAZQUEZ/WYCHE)

24. 2009 Advocacy Goals – Public Interest Government Relations Office ACTION
(Toro)

25. Reinstatement of Policy to Reimburse Expenses for Ethnic Minority ACTION
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- Committee on International Relations in Psychology (CIRP)

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- Ethics Committee
- Policy and Planning Board (P&P)
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Luis A. Vazquez, PhD
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- Board of Convention Affairs (BCA)
- Publications and Communications Board (P&C)

Antonette M. Zeiss, PhD
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- Committee on Disability Issues in Psychology (CDIP)
- Board of Educational Affairs (BEA)
APA Core Values

The American Psychological Association commits to its vision through a mission based upon the following values:

Continual Pursuit of Excellence

Knowledge and Application Based on Methods of Science

Outstanding Service to Its Members and to Society

Social Justice, Diversity, and Inclusion

Ethical Action in All That We Do
COMMITTEE ON DISABILITY ISSUES IN PSYCHOLOGY
ROSTER 2010

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AGENDA ITEM #1:

REVIEW OF ITEMS DISCUSSED AND DECISIONS MADE
DURING OCTOBER 2009 CONFERENCE CALL
(AVAILABLE AT MEETING)
I. BAPPI OPERATIONS

Review and Discussion of Items in
Cross Cutting Agenda

Issue

Beginning with the spring 2008 meeting, BAPPI members work in pairs to review and make recommendations for further action regarding each agenda item. Reviewing pairs have been identified and each assigned several agenda items from the Cross Cutting Agenda and from the BAPPI Agenda. Members are paired as follows:

Luis Vazquez and Karen Wyche
Antonette Zeiss and Joan Meier
Kris Hancock and Linda Mona
Sherri Turner and Y. Barry Chung
Asuncion Miteria Austria and Doug Haldeman

Members have been paired, whenever possible, so that a continuing Board member works with a new member. Members of each pair are expected to collaborate with each other as often as needed prior to the meeting to draft a response (if warranted) and/or make recommendations to the Board regarding how each of their assigned items should be handled. Reviewers will lead the Board’s discussion of items to which they have been assigned. The development of written comments/a draft response to each item is strongly encouraged to streamline the review process and support the creation of accurate minutes of the meeting.

BAPPI members should carefully read and become familiar with all agenda items, not only those they have been assigned.

Implementation Plan
None

Fiscal Implications
None

Main Motion
None

Recommendation
None

Exhibits
None

Sue Houston
Public Interest Directorate
I. BAPPI OPERATIONS

2009 BAPPI AND Public Interest Committees Annual Reports

Issue

Copies of the 2009 Annual Reports of BAPPI and all PI committees are provided for the Board’s information.

Background

Annual reports from all APA boards and committees have been distributed to the APA Council of Representatives and are also available on the Public Interest Directorate website.

Implementation Plan

None

Fiscal Implications

None

Main Motion

None

Recommendation

None

Exhibits

1. 2009 Annual Reports of BAPPI and all PI committees

Sue Houston
Public Interest Directorate
Preparation of BAPPI Slates

**Issue**

BAPPI is asked to develop a slate of nominees for election to the 2011-2013 term on the Board. This discussion will take place in executive session on Sunday morning. The members of BAPPI whose terms will end this year are Luis Vazquez, Kristin Hancock and Sherri Turner. Members of BAPPI are urged to review the *Call for Nominations* carefully, identify potential candidates and prepare a justification statement for each potential nominee in advance of the meeting.

During the October 2009 conference call meeting, BAPPI developed the following 2010 *Call for Nominations* designed to maintain the diversity of membership central to its mission.

**BOARD FOR THE ADVANCEMENT OF PSYCHOLOGY IN THE PUBLIC INTEREST (BAPPI)**

**CALL FOR NOMINATIONS**

**2011-2013 Term**

The Board for the Advancement of Psychology in the Public Interest (BAPPI) solicits nominees who have demonstrated a commitment to ensuring that psychology serves the public interest and advances the health and well-being of all people. Candidates should have (1) a history of working actively in public interest areas and substantive knowledge and expertise in integrating and addressing the diverse needs of multiple constituencies; (2) experience in APA governance, defined broadly to include volunteering as a member on boards and/or committees, serving as a member of the Council of Representatives, or holding one or more leadership positions in divisions and/or state associations.

For 2011-2013, BAPPI is seeking (1) a Native American psychologist; (2) a Hispanic psychologist; (3) an individual with experience and knowledge of psychology’s contributions to health and/or public health. Those with expertise in how psychology research informs public policy are particularly encouraged to apply. BAPPI invites early career psychologists who meet the qualifications to apply, and self-nominations are encouraged.

A list of the nominations received by the Elections Office in response to the Call for Nominations and other sources will be made available to BAPPI members prior to the meeting.
Background

The year-long (Oct. 1988 - Oct. 1989) Public Interest Summit Process lead to the agreement to sunset two boards, the Board of Ethnic Minority Affairs (BEMA) and the Board of Social and Ethical Responsibility in Psychology (BSERP) and the creation of a single, unified governance entity for the Public Interest Directorate, the Board for the Advancement of Psychology in the Public Interest (BAPPI). The Summit II final report called for nine slates composed of APA members:

- At least four of whom will be ethnic minorities
- At least four of whom will be women
- At least one of whom will be openly lesbian or gay.

In a memo to BEMA and BSERP, James M. Jones, PhD proposed the following model:

- Two ethnic minority males
- Two white males
- Two ethnic minority women
- Two white women
- One openly gay male or lesbian.

BEMA responded with a set of slates that referred less to gender representation than to more specific ethnic minority designations:

- Latin American Slate
- Asian American Slate
- African American Slate
- Native American Slate
- White Male Slate
- White Female Slate
- Openly Gay/Lesbian

BAPPI's Policies and Procedures states: "Nominations to slates for BAPPI will ensure that BAPPI's composition will include:

- at least four members who are ethnic minorities, including one African-American, one Asian-American, one Hispanic, and one Native American,
- at least four members who are women, and
- at least one member who is openly gay or lesbian.

At the March 1996 meeting, BAPPI revised its Policies and Procedures to add the following requirement for composition to section 3b:
at least one member who is a person with a disability; and/or has expertise in the field of disability; and/or is an identified advocate in the field of disability.

Implementation Plan

Staff will forward the final BAPPI slates to the Governance Affairs Office with detailed justification of the nominees and the rank ordering prepared by members of BAPPI.

Fiscal Implications

None

Main Motion

None

Exhibits

1. Confidential List of Nominations Received by the APA Elections Office (under separate cover).

Sue Houston
Public Interest Directorate
II. BAPPI BUSINESS

BAPPI Chair’s Report

Issue

As Luis Vazquez was unable to attend the meeting, Doug Haldeman will report to BAPPI on his attendance and participation at the February 2009 meeting of the APA Council of Representatives meeting.

Implementation Plan

None

Fiscal Implications

None

Main Motion

None

Recommendation

None

Exhibits

1. Council of Representatives Draft Minutes, February 2010

Sue Houston
Public Interest Directorate
I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its August 5 & 9, 2009, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to approve the following motion regarding dues discounts for members:

APSA members who also are members of the Association for Psychological Science; the Society for Neuroscience; any one of the organizations that are part of the Federation for the Advancement of Behavioral and Brain Sciences; and the state, provincial and territorial psychological associations and the four national ethnic minority psychological associations recognized by APA, will be entitled to a $25 credit against their APA base dues beginning in 2012. The effect of these changes will be studied with a report back to Council in 2014.

B.(3) The item "Dual Membership Dues Discount Program: Request to Include the Society for Neuroscience" was withdrawn as the request was addressed in agenda item #2 as noted above.

C.(4) Council voted to postpone the item “Member Dues Schedule Revision: Amendment to Association Rules” to its February 2013 meeting.

D.(26C) A new business item “APA Campaign Finance Reform” was referred to the Membership Board, the Finance Committee, the Elections Committee, the Policy and Planning Board (P&P) and the Committee on the Structure and Function of Council.

E.(30A) Council received information on changes that were approved by the Board of Directors related to methods for conducting the President-elect nominations and elections.

III. ETHICS

A.(5) Council voted to approve the following amendments to the Ethical Principles of Psychologists and Code of Conduct (2002):

From the Introduction and Applicability section:

If psychologists’ ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. [If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority] in keeping with basic principles of human rights.

From Ethical Standard 1.02:

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists’ ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. [If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.] Under no circumstances may this standard be used to justify or defend violating human rights.
From Ethical Standard 1.03:

1.03 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and [to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.] take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

IV. BOARD OF DIRECTORS

A.(6) Council voted to receive the Final Report of the 2009 Presidential Task Force on the Future of Psychology Practice and direct the Committee for the Advancement of Professional Practice (CAPP) to oversee the collection of feedback from boards and committees related to implementing the recommendations of the report.

B.(7) Council voted to approve the following amendments to Association Rule 210-2.10 (bracketed material to be deleted; underlined material to be added):

210-2.10 Discretionary funds.

The Board of Directors and Council each shall have a discretionary fund to be used at their own discretion [of up to $110,000]. Council shall be responsible for setting the discretionary fund limits. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective discretionary funds shall be approved as follows:

(a) If emerging from Council action, the proposed allocation from the Council discretionary fund shall require approval by a simple majority vote of the Council members voting.

(b) If emerging from Board action, the proposed allocation from the Board discretionary fund shall require approval by a two-thirds majority of Board members voting.

(c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.

(d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

[The President and President-Elect shall each have a special discretionary fund of up to $38,500 and $16,500 respectively. Use of these special discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred within the respective Presidents and President Elects term (calendar year).] A special discretionary fund will be allocated for presidential initiatives and must be spent during the first two years of the three-year cycle of each president. Council shall be responsible for setting the discretionary fund limit. The specific allocation of these funds shall be approved in advance by the Board of Directors.

The Finance Committee [annually] regularly shall review and recommend [increases] as appropriate [[(inflation, etc.)] limits to the discretionary funds which shall be reviewed by the Board of Directors and submitted to Council for approval.
C.(8) Council participated in a diversity training session on the topic of Current Findings on Discrimination: Causes and Interventions which was entitled “Through the Fly’s Eye: An Intersectional View of Inequality” and presented by Lynn Weber, PhD.

D.(31) Council received as information an update on the 2009 Presidential Task Force on the Future of Psychological Science as a STEM Discipline.

E.(32) Council received as information an update on APA’s Initiatives to Enhance Diversity.

V. DIVISIONS AND STATE AND PROVINCIAL AND TERRITORIAL ASSOCIATIONS

A.(39) Council received an update on the new-business-in-progress item “Change in Association Rule 90-6 to Clarify Role of CODAPAR in the Agenda Planning Group.”

VI. ORGANIZATION OF THE APA

A.(9) Council voted to approve the following core values statement as part of APA’s Strategic Plan:

The American Psychological Association commits to its vision through a mission based upon the following values:

Continual Pursuit of Excellence
Knowledge and Its Application Based Upon Methods of Science
Outstanding Service to Its Members and to Society
Social Justice, Diversity, and Inclusion
Ethical Action in All that We Do

B.(10) Council voted to approve the extension of the expiration date for the Principles for the Validation and Use of Personnel Selection Procedures to 2015.

C.(11) Council voted to approve the following motions identified through P&P’s 5-year review of the Council Policy Manual:

1) Approved an amendment to the 1980 guidelines for divisions to follow with regard to Fellows nominations (bracketed material to be deleted; underlined material to be added):

Council voted to approve the following guidelines with regard to Fellow nominations by division:

That each division employs orderly procedures for ensuring the nominations of appropriate and deserving potential Fellows;

That divisions be encouraged (but not required) to ask nominees to provide a self-generated written statement setting forth their accomplishments that warrant nomination to Fellow status. That evaluators at the division level submit to the Division Fellows Committee a narrative explanation of their decisions and, when the decision is supportive of the nomination, that all materials reviewed by the Division Committee be forwarded to the APA Membership Committee; and

That the Board of Directors continues to review the APA [Membership] Fellows Committee’s recommendations, prior to making its recommendations to the Council, as specific in the current APA Bylaws.

2) Approved an amendment to the 1992 policy that extends the Membership Committees charge to recruitment and retention activities nominations (bracketed material to be deleted; underlined material to be added):
Council approved having the Membership [Committee] Board oversee Association membership retention and recruitment activities and make annual reports on these activities to Council.

3) Approved an amendment to the 1998 policy regarding the collection of information about representation of women, ethnic minorities, gay men, lesbians, bisexuals, and individuals with disabilities in APA governance (bracketed material to be deleted; underlined material to be added):

Collection of Information about the Representation of Women, Ethnic Minorities, Gay Men, Lesbians, [and] Bisexuals, Transgender Individuals, and Individuals with Disabilities in APA Governance: That staff is directed to 1) annually collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities serving on Council and boards and committees; 2) at least every five years, collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities who have been nominated to boards and committees and/or put on a board/committee slate and to nominees on the Council of Representatives election ballot. The information will be collected by mailing a survey requesting voluntary self disclosure regarding gender, ethnicity, sexual orientation, and disability status from board/committee members and Council members (annually) and board/committee nominees and members running for Council (at least every five years). The results of the survey will be disseminated to APA governance groups and will be used in determining whether further action to increase diversity is warranted based on the results and, if so, at what point in the nomination/election process diversity issues may need to be most vigorously addressed.

Council requested that the APA Research Office be involved in the development of the survey and analysis of the data.

4) Approved an amendment to the 1959 policy: Philosophy for Creating New Divisions (bracketed material to be deleted; underlined material to be added):

The policy of the Council with respect to the admission of new divisions shall be a positive one concerned with the spirit and intent of APA to give full recognition to diversity and to growth in the field of psychology. The Council shall not be overly restrained by considerations of orderliness, by fears of centralization, or by the problems created by a sheer increase in size. Council shall naturally satisfy itself that divisional status is warranted under the criteria established in the Bylaws. But, beyond the letter of these rules, Council shall establish that a proposed division represents a new, vigorous, and demonstrably viable interest; that it has achieved recognition in the literature of psychology and in institutional form within departments of psychology, industry, and government; and that it numbers among its members both established psychologists and [younger persons who are not actively working in other divisions] early career psychologists whose professional interest areas are not represented by the current divisions. When such new interests emerge, Council should be prepared to grant divisional status promptly.

5) Approved an amendment to the 1961 policy that encourages psychologists to join divisions and that Central Office should facilitate the process (underlined material to be added):

Psychologists should be encouraged to join at least one division of their choice. The Association should make it as easy as possible to apply for membership. This might take the form of a blank included with the annual statement of dues which would be filled out by the applicant, returned to the Central Office with the dues, sorted by Central Office personnel, and forwarded to appropriate division secretaries. The Central Office will utilize new and emerging technologies to facilitate membership applications for divisions.

6) Archived the 1985 Policy on Undergraduate Curriculum in Psychology.

8) Archived the 2002 Memorandum of Understanding between the APA and CPA for Concurrent Accreditation of Doctoral Training Programs and Predoctoral Internship Training Programs in Professional Psychology.

D.(12) Council postponed the item "Ensuring All Divisions and State, Provincial and Territorial Psychological Associations a Seat on the Council of Representatives" to its August 2010 meeting.

E.(13) Council voted to request that the CEO and the Board of Directors explore alternative legal and financial models for structuring APA and APAPO activities. This study should be conducted within the constraints of our current fiscal circumstances.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(33) Council received an update on Publications and Communications (P&C) Board activities. The P&C Board met twice in 2009, May 1–3 and October 24–25. The P&C Board reported that sales of the fifth and sixth editions of the APA Publication Manual combined reached $12.6 million in 2009. Concurrent with the release of the sixth edition of the Publication Manual, APA Books also released revised versions of three other style products: The Concise Rules of Style, second edition; Mastering APA Style: Student Workbook and Training Guide, sixth edition; and Mastering APA Style: Instructor’s Resource Guide, sixth edition. In 2009, APA Books also released the APA College Dictionary of Psychology. APA Books released 52 new scholarly titles, 6 other book titles, 12 new psychotherapy videoclips, and 9 new Magination Press titles. More than 100 APA Books titles were licensed for translation in 2009. Ten eBooks were released to Kindle in 2009. APA Journals printed and mailed all 2009 issues in 2009, publishing more than 36,000 pages in 56 journals. In 2009, APA launched a new journal about personality disorders, Personality Disorders: Theory, Research, and Treatment; acquired the Journal of Neuroscience, Psychology, and Economics; and began publishing Division 24’s Journal of Theoretical and Philosophical Psychology. The P&C Board made seven editorial appointments in 2009 to terms to begin in 2010 as the Editor-elect year (and 2011 as the beginning of the masthead year). The following four individuals were appointed to 6-year terms: Journal of Consulting and Clinical Psychology—Arthur M. Nezu, PhD; Developmental Psychology—Jacquelynne S. Eccles, PhD; Psychological Review—John R. Anderson, PhD; and History of Psychology—Wade Pickren, PhD. The following two individuals were appointed to 5-year terms: Psychology of Violence—Sherry Lynne Hamby, PhD, and Journal of Occupational Health Psychology—Joseph Hurrell, PhD. Ronald Roesch, PhD, agreed to extend his term as Editor of Psychology, Public Policy, and Law through 2012. In May, the P&C Board opened searches for the following 12 journals: Emotion; Experimental and Clinical Psychopharmacology; International Perspectives in Psychology: Research, Practice, Consultation; Journal of Abnormal Psychology; Journal of Comparative Psychology; Journal of Counseling Psychology; Journal of Experimental Psychology: General; Journal of Experimental Psychology: Human Perception and Performance; Journal of Neuroscience, Psychology, and Economics; JPSP: Attitudes and Social Cognition; Rehabilitation Psychology; and Sport, Exercise and Performance Psychology. During 2009, PsycINFO added 186,328 new records to the overall database and expanded coverage, bringing the number of journals now covered to 2,456. PsycARTICLES added five new titles and 6,692 full-text articles in 2009. PsycBOOKS contained 1,855 books by the end of 2009. Scanning of books and gray literature for the APA/Akron Archives Project was completed in 2009, and APA and AHAP concluded a contract and began scanning psychological tests for future inclusion in the new PsycTESTS database. PsycEXTRA contained more than 170,000 records by the end of 2009.

VIII. CONVENTION AFFAIRS

A.(13A) Council received an update on the San Diego Convention and the Manchester Grand Hyatt. Council voted to request that Council’s August 2010 meeting be moved from the Manchester Grand Hyatt to another venue.

B.(26F) A new business item “APA Convention and Meeting Facility Contract Procedures and Cancellation Clause” was referred to the Committee on Legal Issues (COLI) and the Board of Convention Affairs.
IX. EDUCATIONAL AFFAIRS

A.(14) Council voted to approve the proposed APA Advertising Policy for APA Publications (bracketed material to be deleted; underlined material to be added):

Advertising of educational programs in APA publications and on the APA Web site will be restricted to those schools or other institutions fully accredited by regional or other institutional accrediting associations recognized by the U.S. Department of Education. In addition, for those areas of professional psychology where APA or Canadian Psychological Association accreditation is currently provided (e.g., clinical, counseling, school, combined), APA will restrict advertising to only APA or Canadian Psychological Association accredited programs. Those [doctoral] programs accredited by the American Psychological Association must state that they are APA-accredited and include contact information for the APA Accreditation Office. [Those doctoral programs not accredited by APA must include the following statement in their advertisements: This program is not accredited by the American Psychological Association. Information concerning whether or not a doctoral program is APA-accredited will be required in all print advertising in APA publications and exhibit space at the APA Convention as well as alternative text in all banner advertising.]

X. PROFESSIONAL AFFAIRS

A.(15) Council voted to adopt as APA policy the revised Model Act for State Licensure of Psychologists as amended by Council.

B.(16) Council voted to instruct the CEO and the Executive Management Group of APA to determine the best way to implement and measure the outcomes of the Public Education Campaign, with objectives to be consistent with APA’s Strategic Plan. The reauthorization for the resulting PEC is for up to $1.5 million per year as previously authorized by Council and adds $117,200 to the 2010 Budget to achieve funding of at least $1 million per year for the next three years. The annual PEC report will include an evaluation of the PEC’s success in meeting Strategic Plan’s goals.

C.(17) Council voted to approve APA’s development of treatment guidelines, including the establishment of a Steering Committee and Guidelines Development Panel(s) to assist in their development.


F.(26D) A new business item “Recognition of Psychotherapy Effectiveness” was referred to the Board of Professional Affairs (BPA), the Board of Scientific Affairs (BSA), and CAPP.

G.(26E) A new business item “The Implications of the Model Licensing Act (MLA) for I/O Psychology” was referred to CAPP, BPA, COLI and the Board of Educational Affairs.

H.(26J) A new business item “Strategies for Education and Training of Psychologists in the Use of ICD-10-CM” was referred to BPA, CAPP, BEA, BSA and the Committee on International Relations in Psychology.

I.(27) Council received an update on the business pending item “Infusing the Association Guidelines in the Public Interest Which Have Been Adopted by Council for Psychologists Throughout APA.”
J.(28) Council received an update on the business pending item “Best Practice Guidelines on Prevention, Practice, Research, Training and Social Advocacy for Psychologist.”

K.(40) Council received an update on the new-business-in-progress item “Structure and Function of an Interdisciplinary Team for Persons with Acquired Brain Injury.”

L.(41) Council received an update on the new-business-in-progress item “Submission of Revised Specialty Guidelines for Forensic Psychology for comment, review and revision, consistent with APA Rule 30.8.”

M. Council discussed the APA Practice Organization Annual Report.

XI. SCIENTIFIC AFFAIRS


B.(26G) A new business item “Affirming, Supporting and Disseminating Research on Global Climate Change” was referred to BSA.

C.(26H) A new business item “Affirming Research on Global Climate Change” was referred to BSA.

XII. PUBLIC INTEREST


B.(26A) A new business item “Revision of APA’s Resolution on Homelessness” was referred to the Committee on Socioeconomic Status.

C.(26B) A new business item “Revision of Guidelines for Psychotherapy with Lesbian, Gay and Bisexual Clients” was referred to the Board for the Advancement of Psychology in the Public Interest, BPA, CAPP and COLI.

D.(29) Council received an update on the business pending item “APA Resolution to Promote Well-Being and Alleviate Psychological Risk Factors for Immigrants.”


XIII. ETHNIC MINORITY AFFAIRS

A.(34) Council received as information an update on CEMRRAT2 Task Force 2009 Activities.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

A.(26l) A new business item “Update Annual Report on Environmental Issues” was referred to the Finance Committee.

B.(35) Council received as information the 2009 Report on Environmental Issues.

C.(35A) Council received as information a Report on APA’s Ongoing Efforts to Implement the Petition Resolution Policy.
XVI. FINANCIAL AFFAIRS

A.(21) Council voted to approve a 2010 Budget with Revenues of $114,424,000 (after recognition of $3.5 cash flow from the buildings), Expenses of $113,524,600 and an Operating Safety Margin of $899,500.

B.(22) Based on the 2010 Budget and the 2010-2012 projections, Council voted to adopt the following Net Asset Allocation Plan including the 2010-2012 Financial Forecast:

1. The goal for attainment of net assets as stated in Association Rule 210-3 is reaffirmed; namely, that the Association strives to maintain net assets equal to at least one year’s operating budget.
2. Consistent with accounting practices, conventional wisdom and comparable financial data from other organizations, the Association should not consider any portion of theoretical building equity toward attainment of the net assets goal mentioned in item 1 above.
3. Currently, rather than specifically set aside funds outside the normal budget process for development of programs deemed to be of high priority to the membership, the Association enthusiastically supports consideration of proposals (in the form of a business plan) for new revenue generating ideas. [Such proposals for new revenue generating ideas should be thoroughly detailed including all direct costs, indirect costs, and staff costs. Such proposals reviewed by the FC, the Board and approved by the Council, will be funded out of ongoing revenues or out of the Association’s net assets, as necessary, assuming that full consideration is also given to the impact of such funding on progress towards the Association’s net assets goal mentioned in item 1 above.]
4. Each year, based on actual results and an analysis of our net assets, future financial forecasts and the net asset allocation plan will be adjusted accordingly.
5. Once the net assets goals are attained, any number of future actions can be taken including the long-term stabilization of dues; the long-term availability of funds for the development of programs deemed to be of high priority to the membership; further apportionment of building and investment proceeds toward operational expenses, etc.
6. The specific financial forecast for 2010 – 2012 is as follows:
   a) Strive to attain a net asset goal equal to at least one year’s operating budget consistent with Association Rule 210-3;
   b) Include $3.5M net cash flow from building operations in the operating budget as a regular source of revenue (consistent with Council’s action of February 2008);
   c) Restrict capital expenditures to no more than $10M over the forecast period;
   d) Continue to reinvest net realized gains/losses from our long-term portfolio activity;
   e) Rather than reinvesting all interest/dividends from our long-term portfolio activity, the forecast assumes that long-term interest/dividends be transferred to supplement operations during the entire forecast period 2010- 2012;
   f) Treat Federal income tax expenses as non-operating activity;
   g) Treat all real estate cash flow in excess of $3.5M annually from building operations as an increase to net assets (increase to investment and/or debt extinguishment) after the operating line of credit has been paid off;
   h) Continue to pay down the long-term debt; no sale of our real estate is anticipated during this forecast period;
   i) To present annual budgets that are consistent with Association Rule 210-2.1 that call for a surplus of between 1% and 2% of budgeted revenues (after consideration of the cash flow from buildings) in order to provide a basis for orderly expansion of operations and services in successive years and to provide a margin of safety against contingencies.

C.(23) Council voted to approve the revised Long-Term Investment Policy.

D.(24) Council voted to approve the revised Selected Spending Policy Guidelines (formerly referred to as the Responsible Spending Policy). Council also voted to extend the suspension of the annual CPI increase for 2010 and request that the 2010 honoraria for all Board members remain at the 2009 levels.
E.(25) In executive session, Council discussed the report of APA employee contracts and staff compensation.

F.(36) Council received as information the 12th Annual Real Estate Report.

G.(37) Council received as information the 2008 IRS Tax Form 990.

H.(38) Council received as information the minutes of the July 23, 2009, and November 20 & 21, 2009, Finance Committee meetings.

On Saturday afternoon, Council met in Executive Session to receive the Recording Secretary’s annual report regarding the CEO performance evaluation and the Treasurer’s annual report regarding CEO compensation. The Treasurer also presented the Report of APA Employee Contracts and Staff Compensation provided every third year as mandated by Council.
VI. CENTRAL OFFICE REPORTS

Public Interest Directorate Update

Issue
Gwendolyn P. Keita, PhD, Executive Director of the Public Interest Directorate will present a brief oral report on current and future activities within the Public Interest Directorate.

Implementation Plan
NA

Fiscal Implications
NA

Main Motion
NA

Recommendations
NA

Exhibits
NA

Sue Houston
Public Interest Directorate
II. BAPPI BUSINESS

BAPPI Convention Programming in 2011

Issue

BAPPI is asked to discuss and develop a theme for its 2011 APA Convention programming. This theme will be introduced to PI committees so that they can begin to develop collaborative programming in accordance with BAPPI’s priorities and the theme selected during this meeting.

During previous discussions of this item, it was stressed that programs sponsored or offered by BAPPI must address the broad issues associated with the Board’s vision, as follows:

- BAPPI assures that psychology serves the public interest and advances social justice, health and well-being for all people.
- BAPPI accomplishes this goal through interactions with the Public Interest committees, BPA, BSA, BEA, and other APA boards, committees, and divisions and through collaboration with like-minded external professional and interest groups.

Programming should also be targeted to address one or more of BAPPI’s priorities, which are psychology and public health and issues of incarceration.

For 2010, BAPPI chose the theme “Public Interest, Health, Psychology” and has planned a two-hour symposium at the 2010 APA convention in San Diego in August.

- BAPPI
  Intersectionality: Implications for Research, Practice and Policy

BAPPI distributed the remaining six hours as follows:

- Committee on Children, Youth, and Families
  Engaging Schools and Communities: Advancing Behavioral, Physical, and Public Health

- Committee on Lesbian, Gay, Bisexual and Transgender Concerns (CLGBTC)
  Intersectionalities and the Future of Lesbian, Gay, Bisexual, and Transgender Health and Well Being (In conjunction with the recognition of the 30 year anniversary of CLGBTC)

- Committee on Socioeconomic Status (CSES)
  (SESRCDF)- Psychology’s Role in Reducing Cancer Health Disparities

- Committee on Women in Psychology (CWP)
  Health Disparities Among Women: Social Science Perspectives
**Background**

At its meetings in October 2001 and October 2002, BAPPI decided that rather than allocating individual Convention hours to public interest committees, time would be allocated to collaborative programming among the public interest committees. Committees were and continue to be asked to plan their Convention programming around topics related to contemporary issues facing psychology, are of importance and concern to public interest constituencies, and in line with BAPPI’s identified priorities.

**Implementation Plan**

To be determined

**Fiscal Implications**

None

**Main Motion**

That BAPPI determine a theme for its 2011 Convention programming.

**Recommendation**

None

**Exhibits**

None

_Sue Houston_  
Public Interest Directorate
VI. CENTRAL OFFICE REPORTS

2011 Public Interest Awards Call for Nominations

Issue

The 2011 Public Interest Awards Call for Nominations and the 2010 Award Winners are provided as information.

The 2010 Public Interest Award Winners:

Distinguished Contributions to Research in Public Policy:

G. Daniel Lassiter, PhD
For more than a quarter century, Dan has spearheaded a systematic, theory-driven, NSF-funded program of scholarship on the camera perspective bias in videotaped interrogations/confessions that unquestionably demonstrates the significance of psychological science for effective public policy development and reform.

Distinguished Contributions to Psychology in the Public Interest (Early Career)

Perry N. Halkitis, PhD
My commitment to the well-being of our local communities and global society is rooted in work that seeks to improve the lives of those affected by the overlapping epidemics of HIV infection, illicit drug use and mental burden. My passion for serving the public is evidenced by my mentoring of the future generation of researchers, my communicating knowledge to the field, my advocating for the underserved, and my commitment to educating the public.

Distinguished Contributions to Psychology in the Public Interest (Senior Career)

Norman Abeles, PhD
For his sustained efforts to increase public awareness and understanding of how psychological principles address social issues, for supporting efforts to promote psychology as a science, and for advancing the practice of psychology. Through his many varied roles as an APA volunteer, including serving as President of the Association in 1997, Dr. Abeles has demonstrated a unique devotion to successfully ensuring that psychological science is used to accomplish important social advances.

Implementation Plan

NA

Fiscal Implications
Main Motion

NA

Exhibits

1. 2011 Public Interest Awards Call for Nominations

Donnie Graham
Public Interest Directorate
The Board for the Advancement of Psychology in the Public Interest (BAPPI) invites nominations for the 2011 APA Public Interest Awards:

- The APA Award for Distinguished Contributions to Psychology in the Public Interest (Senior Career)
- APA Award for Distinguished Contributions to Psychology in the Public Interest (Early Career)
- APA Award for Distinguished Contributions to Research in Public Policy

The Distinguished Contributions to Psychology in the Public Interest Senior Career Award recognizes an individual that earned his or her doctorate degree more than 15 years prior to the date of the nomination and whose single extraordinary achievement or a lifetime of outstanding contributions have met one or more of the following criteria: (a) courageous and distinctive contribution(s) in the science or practice of psychology that significantly supports efforts toward a solution to one of the world's intransigent social problems; (b) distinctive and innovative contribution(s) that makes the science and/or practice of psychology more accessible to a broad and diverse population; and (c) an integration of the science and practice of psychology that serves the public interest and advances social justice and human welfare.

The Distinguished Contributions to Psychology in the Public Interest Early Career Award recognizes an individual that earned his or her doctorate degree 15 or fewer years prior to the date of the nomination and whose single extraordinary achievement or a lifetime of outstanding contributions have met one or more of the following criteria: (a) courageous and distinctive contribution(s) in the science or practice of psychology that significantly supports efforts toward a solution to one of the world's intransigent social problems; (b) distinctive and innovative contribution(s) that makes the science and/or practice of psychology more accessible to a broad and diverse population; and (c) an integration of the science and practice of psychology that serves the public interest and advances social justice and human welfare.

The APA Award for Distinguished Contributions to Research in Public Policy will honor a psychologist who has made a distinguished empirical and/or theoretical contribution to research in public policy, either through a single extraordinary achievement or a lifetime of work dedicated to informing public policy through psychological understanding. Examples of relevant achievements would include research leading others to view specific national policies differently; research demonstrating the importance of the application of psychological methods and theory to public policy; or research clarifying the ways scientific knowledge of human behavior informs public policy.

* * * * *

Each award recipient will receive $1,000 honorarium, an opportunity to present an invited address at the 2011 APA Convention in Washington, DC and an invitation to submit a paper to the American Psychologist on the topic of the address. Honorees will also be granted a waiver
of 2011 convention registration fees and reimbursement of up to $1,500 in expenses related to attendance at the 2011 convention.

* * * * *

The BAPPI Committee on Public Interest Awards will evaluate each nomination based on the extent to which the nominee has exhibited knowledge and/or experience with the criteria identified in the above description of each award.

Submitting Nominations:

Nomination letters for each of these awards must clearly explain in 500 words or less the basis for the nomination, including a description of how and why the candidate is uniquely qualified to receive the award. The letter must be accompanied by a copy of the nominee's current vita, and letters of support from at least 3 people familiar with his or her work. Nominees may also submit 3-5 selected representative reprints, or alternative types of samples of work such as Internet based communications, or legal briefs. Nominations and supporting material should be sent to:

Ms. Donnie Graham
APA Public Interest Directorate
750 First Street, N.E.
Washington, D.C. 20002-4242

The deadline for receipt of this information is June 7, 2010.
Public Interest Award Winners To-Date

Distinguished Contributions to Psychology in the Public Interest

1978  Kenneth B. Clark
1979  Marie Jahoda*, Otto Klineberg
1980  Isidor Chein*, Nicholas Hobbs
1981  Herbert C. Kelman
1982  Edward F. Zigler
1983  James S. Jackson*, Stuart W. Cook
1984  Patrick H. DeLeon*, Seymour B. Sarason
1985  Gary B. Melton*, Jerome D. Frank
1986  Stanley Sue*, John Janeway Conger
1987  Michael J. Saks*, Urie Bronfenbrenner
1988  Ellen Langer*, M. Brewster Smith
1990  Baruch Fischhoff*, David Lykken
1991  Susan T. Fiske*, Evelyn Hooker
1992  Hortensia Amaro*, Florence Denmark
1993  Laura C. Leviton*, Patrick H. DeLeon
1994  Robert Q. Pollard*, Durand F. Jacobs
1995  David A. Riley*, Nancy Felipe Russo
1996  Gregory M. Herek*, Alan I. Leshner
1997  Maria P.P. Root*, James G. Kelly
1998/1999  Bonnie Strickland
2000  Jeannette Ickovics*, Lillian Comas-Diaz
2001  Edward Dunbar*, Martha Bernal
2002  Brian Smedley*, Phyllis Katz and Melba Vasquez**
2003  Claude Steele
2004  Susan Limber*, Dante Cicchetti
2005  Daniel Dodgen*, Margaret Beale Spencer
2006  Rose Clark*, McKay Vernon
2007  Gary Harper*, Larke Huang
2008  Rebecca Campbell*, Philip G. Zimbardo
2009  Keith Humphreys*, Beverly Greene

*Indicates Early Career Award.
**The Senior Career Award was shared. This was not an award for collaboration.

Distinguished Contributions to Research in Public Policy

1988  Sandra Scarr
1989  Charles A. Kiesler
1990  John Monahan
1991  Shari Siedman Diamond
1992  Linda Teplin, Gail Wyatt
1993  Diana Slaughter-Defoe
1994  Thomas Grisso
1995  Marnie E. Rice
1996  Stanley Sue
1997    Ruby Takanishi  
1998/1999  Leonard Bickman  
2000    Mary Koss  
2001    Susan Cochran  
2002    Jeanne Brooks-Gunn  
2003    Louise Fitzgerald  
2004    Thomas Coates  
2005    Gail Goodman  
2006    Mark Cunningham  
2007    Vickie Mays  
2008    Janet E. Helms  
2009    Charlotte Patterson, Laurence Steinberg
2010 BAPPI Liaison and Monitor Assignments
(until Spring 2010 Meeting)

Asuncion Miteria Austria, PhD
- Committee on Socioeconomic Status (CSES)
- Committee on Women in Psychology (CWP)
- Committee on International Relations in Psychology (CIRP)

Douglas C. Haldeman, PhD
- ad hoc Committee on Psychology and AIDS (COPA)
- Ethics Committee
- Policy and Planning Board (P&P)
- Board of Scientific Affairs (BSA)
- Committee for the Advancement of Professional Practice (CAPP)

Kristin A. Hancock, PhD
- Committee on Lesbian, Gay, Bisexual and Transgender Concerns (CLGBTC)
- Board of Professional Affairs (BPA)
- Committee on Legal Issues (COLI)

Sherri L. Turner, PhD
- Committee on Children, Youth and Families (CYF)
- Committee on Structure and Function of Council (CSFC)
- Committee on Psychological Testing and Assessments (CPTA)

Luis A. Vazquez, PhD
- Committee on Ethnic Minority Affairs (CEMA)
- Board of Convention Affairs (BCA)
- Publications and Communications Board (P&C)

Antonette M. Zeiss, PhD
- Committee on Aging (CONA)
- Committee on Disability Issues in Psychology (CDIP)
- Board of Educational Affairs (BEA)
Membership Category Counts: 2008 vs. 2009

<table>
<thead>
<tr>
<th>Category</th>
<th>2008</th>
<th>2009</th>
<th>Variance</th>
<th>Variance %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MEMBERS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fellow</td>
<td>2,931</td>
<td>2,771</td>
<td>-160</td>
<td>-5.5%</td>
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<tr>
<td>Member</td>
<td>49,913</td>
<td>49,023</td>
<td>-890</td>
<td>-1.8%</td>
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<tr>
<td>Early Career</td>
<td>19,481</td>
<td>19,484</td>
<td>3</td>
<td>0.0%</td>
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<tr>
<td>Associates</td>
<td>7,373</td>
<td>7,737</td>
<td>364</td>
<td>4.9%</td>
</tr>
<tr>
<td>CPA Fellow, Members, Associates</td>
<td>1,270</td>
<td>1,234</td>
<td>-36</td>
<td>-2.8%</td>
</tr>
<tr>
<td>Life Status</td>
<td>11,354</td>
<td>11,339</td>
<td>-15</td>
<td>-0.1%</td>
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<tr>
<td><strong>SubTotal</strong></td>
<td>92,322</td>
<td>91,588</td>
<td>-734</td>
<td>-0.8%</td>
</tr>
<tr>
<td><strong>AFFILIATES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undergraduate Student Affiliates*</td>
<td>13,758</td>
<td>14,188</td>
<td>430</td>
<td>3.1%</td>
</tr>
<tr>
<td>Graduate Student Affiliates</td>
<td>37,434</td>
<td>38,395</td>
<td>961</td>
<td>2.6%</td>
</tr>
<tr>
<td>Teacher Affiliates</td>
<td>3,851</td>
<td>4,045</td>
<td>194</td>
<td>5.0%</td>
</tr>
<tr>
<td>International Affiliates</td>
<td>3,898</td>
<td>4,007</td>
<td>109</td>
<td>2.8%</td>
</tr>
<tr>
<td><strong>SubTotal</strong></td>
<td>58,941</td>
<td>60,635</td>
<td>1,694</td>
<td>2.9%</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td>151,263</td>
<td>152,223</td>
<td>960</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

Ref: mb3601302009EOY, mb7001302009EOY
*Includes High School and Community College Students
Guidelines for Conditions of Employment of Psychologists

Issue

BAPPI is asked to review the *Guidelines for Conditions of Employment of Psychologists* (see Exhibit 1) and, since they have been archived by the Board of Directors, decide if such guidelines are no longer needed, or if an alternative should be pursued to address the issues for which the original guidelines were developed. These *Guidelines* were adopted by the Council of Representatives in March of 1986 and the Board of Directors has recommended that they be archived and no longer in effect.

The APA Association Rules require that “The proposing entity (originator of the Guidelines) shall suggest a period, not to exceed 10 years, for which the standard or guideline will be effective if it is approved along with a rationale for the proposed timeframe.” These Guidelines were originally created well before the review requirements had been adopted by Council, and therefore BAPPI’s guidance is being sought at this time.

Background

Records indicate that the Board of Social and Ethical Responsibility (BSERP) had been identified as the “contact” on these guidelines. Since, BSERP was BAPPI’s predecessor, BAPPI is being consulted regarding whether or not there is a need to develop a set of guidelines, or some other mechanism, to address the issues for which these had been developed in 1986.

30-8. STANDARDS AND GUIDELINES

30-8.4 The Policy and Planning Board shall provide notice no less than two years before a standard/guidelines document will expire to the responsible reviewing body or entity. The reviewing body or entity responsible for review of the document shall recommend to Council that the document be extended, amended along with proposed revisions, nullified or placed in the APA archives. Should the responsible reviewing body or entity wish to extend or amend the document, the review process shall be done in accordance with Association Rule 30-8 as delineated for proposed new standards or guidelines, along with a new expiration date and the rationale for that date. If the responsible reviewing body or entity does not bring the standard/guidelines document to the Council of Representatives within this 2-year period, the standard/guidelines document will automatically sunset and the Policy and Planning Board shall notify the Council of such action.
30-8.5 When Council approves standards or guidelines, they will be adopted on behalf of the whole association. When an entity associated with APA wishes to sponsor and/or disseminate a published document that it does not intend to serve as standards or guidelines but which the public may reasonably construe as a set of standards or guidelines, the entity shall consult with APA legal counsel and any other interested boards, committees, divisions or groups to ensure that the language of the document does not imply a standard or guideline and to develop an appropriate statement to include in the document that will make it clear that the contents of the publication are not intended to set a standard or guideline for training, professional practice conduct or any other specialized form of the application of psychological knowledge and that the entity is not speaking on behalf of any other APA board, committee, division or group or on behalf of the APA.

30-9. COUNCIL POLICY MANUAL

30-9.1 All motions, resolutions, standards and guidelines approved by Council and designated as policy shall be recorded in the Council Policy Manual.

30-9.2 Policies that are standards and guidelines shall be reviewed pursuant to Association Rule 30-8.4. With regards to all other policies, every five years the Policy and Planning Board will notify the responsible reviewing body or entity of its obligation to review all of the policies recorded in its section of the Council Policy Manual. All such policies shall remain active unless the responsible reviewing body recommends to amend (with proposed revisions), rescind or place the policy in the APA archives. Such recommendations must be approved by Council.

30-9.3 Rescinded policies shall be removed from the Council Policy Manual. Rescinded policies refer to those that have been previously passed and then rescinded by vote of Council.

30-9.4 All materials published in the active and archived sections of the Council Policy Manual shall be maintained on the website of the Association. Each archived policy shall indicate on each page of the document that it is no longer an active policy of the Association.

Implementation Plan

To be determined

Fiscal Implications

To be determined

Main Motion

BAPPI should review the Guidelines for Conditions of Employment of Psychologists (see Exhibit 1)
and, since they have been archived by the Board of Directors, decide if such guidelines are no longer needed, or if an alternative should be pursued to address the issues for which these original guidelines were developed

**Recommendation**

None

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**Exhibits**


*Sue Houston*

*Public Interest Directorate*
APPENDIX N
X.1

Revised March, 1986

AMERICAN PSYCHOLOGICAL ASSOCIATION

GUIDELINES FOR CONDITIONS OF EMPLOYMENT OF PSYCHOLOGISTS

INTRODUCTION

The Committee on Academic Freedom and Conditions of Employment (CAFCOE) was established by the American Psychological Association's Board of Directors in 1949 in a climate of concern for employment conditions which precluded free inquiry and adequate professional functioning of psychologists employed in institutional settings. CAFCOE's mission included a directive to formulate policies that would foster equitable relationships between psychologists and their employers and would promote the development of professional competence. The Guidelines for Conditions of Employment of Psychologist (APA, 1972) were developed in 1971 and were adopted as a policy statement of the Association that year.

1. This version of the Guidelines was adopted by the Council of Representatives of the American Psychological Association on

1986. The original Guidelines were written by members of the Task Force on Conditions of Employment of Psychologists, Philip Ash, Jerry W. Carter, Jr. and Robert Reiff (Chair). The Committee on Academic Freedom and Conditions of Employment developed the present revision. Members were Jeanne E. Guilahorn (1986 Chair) Leon H. Levy (Past Chair), Ethel Craven, Laurel Furumoto, and Murray Levine. Former CAFCOE members Helena M. Carlson, June E. Chance (1982 Chair), Gordon Derner, Cherin Silver Ellas (1981 Chair), Erasmus Hoch (Partial 1985 Chair), M. Marlyne Kelby (1980 Chair) Jacqueline Macaulay (1983–84 Chair), Pricilla Meyer (1978–79 Chair), Shirley Sanders, Guy Seymour, Carolyn Wood Sherif, and Allen R. Solomon served on the committee during the time the Guidelines were being revised.

These Guidelines should not be treated as or substituted for the Ethical Principles of Psychologists.

2. Inquiries concerning the Guidelines and requests for reprints should be addressed to the Office of Social and Ethical Responsibility, American Psychological Association, 1200 Seventeenth Street, N.W., Washington, D.C. 20036.
In the decade that followed, CAFCOE acquired a broader understanding of the problems encountered in psychologists' employment relationships. Although changes in the economic and social climate have been associated with changes in the nature of the most common problems brought to CAFCOE's attention, unfair and discriminatory treatment has persisted. APA members continue to call upon their professional association for help in a wide variety of situations, ranging from employment discrimination and unjust dismissal to unprofessional treatment and general unfairness in the structuring of employment relationships. As predicted by the writers of the original Guidelines, CAFCOE's experience made it apparent that revision was needed. The present revision represents the work of CAFCOE members from 1979 to [1984] 1985.

As before, the revised Guidelines set forth both the expectations employed psychologists may properly anticipate will be met by their employers and the obligations that employers may properly expect psychologists to meet. These Guidelines are not intended as an accurate or complete summary of the laws governing the relationship between a psychologist and an employer or prospective employer. The laws governing that relationship may vary from state to state, and may depend upon unusual factual circumstances in each case. Insofar as these Guidelines discuss legal points, the discussion should be understood as reflecting APA's opinion of how legal issues should be resolved. This document is intended both for the institutions, agencies, clinics and businesses that employ psychologists and for the employed psychologists themselves. The focus is on matters that arise in the course of forming

3. The Guidelines are not designed for psychologists who have an independent practice or who are in partnerships or incorporated groups.
and maintaining an employment relationship. Other aspects of psychologists' professional responsibilities are covered in the APA documents that are listed in the appendix at the end of this document.

In promulgating the revised Guidelines for Conditions of Employment of Psychologists, the American Psychological Association seeks to promote a working environment of mutual respect and shared responsibility between psychologists and their employers. Some of these guidelines (standards) are ones which all employers and employees should observe simply to preserve the dignity of the working environment. Others reflect unique aspects of psychologists' roles and the problems sometimes encountered in achieving and maintaining academic freedom and the professional standards set forth in other APA guidelines.\(^4\) APA urges psychologists and their employers, as they structure their employment relationship, to consider explicitly each of the matters covered in these Guidelines. Even where the terms of an employment contract are set by civil service regulations or union negotiation, the Guidelines can serve as signposts [to] for development[s] of model working relationships.\(^5\)

ENTRY INTO THE PROFESSION

In addition to the relevant educational background, which generally requires the possession of the doctoral degree earned in a program primarily psychological in content, entry into the profession of psychology typically requires supervised experience. For those entering teaching and research,

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5. APA recognizes the right of psychologists who choose to do so to engage in collective bargaining.
supervised experience in teaching and conducting research is generally expected. For those entering practice in human services or in certain other organizational settings, an internship, practicum training or other experience supervised, at least in part, by a psychologist is generally expected. Those who provide services to culturally or linguistically diverse populations, or to sexual minorities, or diverse age groups should have appropriate training and experience and/or access to consultation and supervision as they develop broader competency.

Psychologists who offer their services for a fee, either as independent practitioners or as salaried employees of a clinic, other institution, or organization, must also have the appropriate certification or license as required by the laws of the state in which they practice.

RECRUITMENT

Non-Discrimination and Affirmative Action

APA supports equal opportunity employment practices. Recruitment, hiring, reappointments and promotions should be made without regard to color, sex, race, age, religion, national origin, political persuasion, physical handicap, sexual orientation and marital or parental status. Exceptions to this principle may be made in order to meet a bona fide professional requirement or where a religious institution has announced a preference for members of the same or similar religious denominations or where selection is made in compliance with affirmative action goals designed to implement national and state fair employment policies.

6. The APA Criteria for Accreditation of Doctoral Training Programs and Internships in Professional Psychology requires that institutions with religious criteria for employment carefully document their selection procedures in order to insure that the required creelial allegiance does not result in violations of academic freedom or faculty and student rights or affect the quality of training, teaching or research.
Employers should be aware that asking a job candidate about marital status, family plans, or a spouse's employment plans or basing an employment decision on such factors is, in APA's view, discriminatory. Candidates with handicaps or family responsibilities which might curtail performance flexibility should initiate any necessary job-relevant discussion of such matters.

APA urges all employers to develop effective affirmative action programs to correct underrepresentation of protected groups at all levels and in all areas where psychologists are employed, and encourages all employed psychologists to take an active part in promoting such affirmative action by their employers whenever possible.

**Recruiting Procedures**

1. **APA recommends that** all open positions [should] be publicly advertised except those that are to be filled from within the organization. Positions that are unofficially already filled, and so not really open, should not be advertised; applicants for such positions should be notified of the situation.

2. **APA recommends that** advertisements [should] conform to the standards established by APA, which are published monthly in the *APA Monitor* advertising section. A copy of these standards [are] is available from APA, 1200 Seventeenth St., NW, Washington, D.C. 20036.

3. **APA recommends that** positions [should] be advertised in such manner and in such places that members of groups for whom affirmative action is appropriate are notified of the opening and encouraged to apply. APA can assist employers who need information on how and where to advertise for underrepresented group members.
4. APA recommends that employers should allow ample time for receiving and seriously considering applications submitted in response to advertisements before employment decisions are made.

5. APA recommends that employers should acknowledge receipt of materials from applicants in a timely manner and inform applicants of the next stages in the review and selection process.

6. APA recommends that employers [should] notify applicants of the termination of the search process.

Part-Time, Temporary and Non-Standard Positions

1. Temporary, nontenure-track academic, limited term, and part-time employment opportunities should be identified clearly as such, both in advertisements and in discussion with applicants. Employers should indicate under what conditions part-time employees are offered proportional fringe benefits, such as retirement benefits and partial medical insurance, with the option of making payments themselves to achieve full coverage.

2. APA encourages employers to provide permanent or tenure-track part-time employment and alternative work patterns such as job-sharing for those who want them. Employers should consider offering alternatives to the usual full-time schedule as part of their affirmative action plan.

THE INTERVIEW

Employment interviews should be conducted in a professional manner with the goal of creating an atmosphere of mutual respect in which frankness and honesty prevail. The following guidelines are designed to promote achievement of this goal:
1. Employers should answer openly and honestly all questions pertaining to job duties, performance evaluation, promotion practices and any other career-related matters that are of importance to the applicant.

2. Job candidates, in turn, should furnish open and honest answers to questions about their ability to do the job and their expectations and career plans.

3. When a candidate is invited for an interview, the employer should clearly specify the extent of reimbursement allowed for expenses.

**JOB OFFERS AND EMPLOYMENT AGREEMENTS**

Open, explicit communication between employer and employee concerning rights and responsibilities throughout the entire relationship is the best means of preventing employment disputes. From the beginning of job negotiations, both employer and candidate should work toward arriving at a clear, mutual understanding on such matters as job duties, professional prerogatives, salaries, promotion opportunities and evaluation procedures.

**Job Offers**

Job offers should be made in writing by a person with authority to communicate firm offers from the employer. The letter should include the [all] information needed for an informed choice by the candidate. Whether the letter is intended to serve as a formal employment contract or not, it should cover the matters listed below or refer to amplifying documents, such as union contracts, that are enclosed with the letter or available upon request.

1. Level and/or title of the job, full or part-time status, length of initial appointment and possibilities for reappointment and promotion.
2. A job description or summary of the major responsibilities of the position to be filled. This should include such details as experience and/or credential requirements, supervisory or administrative duties, privileges and access to institutional resources and, for academic jobs, course load and expected teaching areas and student advising responsibilities. Many details can be left to amplifying documents but what is unique to the position should be covered specifically.

3. Whether the offer is fully approved or whether some additional approval remains to be sought.

4. Conditions attached to appointment. Requirements of certification or completion of a degree, adjustments in title and salary to be made on fulfillment of such conditions and consequences of failure to fulfill them by a certain date should be specified.

5. Salary and benefits, including reimbursement of moving expenses. Any known uncertainty about the reliability of funding for the entire period of an appointment should be clearly described, including the probable effect of funding loss. Where fringe benefits are limited after specific ages, such limitations should be clearly stated.

6. Any restrictions the employer may have on such matters as leaves of absence, outside consulting and applying for research funds.

7. Performance criteria that must be met for continuation of employment and promotion.

8. If there is an age of mandatory retirement, it should be specified.

9. Notice requirements for termination, and conditions under which termination may take place, should be specified as clearly as possible.
Amplifying documents that accompany an offer letter might cover general matters such as fringe benefits, vacations, sick leave, grievance procedures, organizational structure and lines of authority, career ladders, rules and policies for conduct of research and availability of supplies, secretarial services, research resources and travel money. These amplifying documents should accurately reflect actual practices and policies existing at the time of the offer. As long as this is so and the documents are clear and readable, reference to them in the contract or offer letter makes them part of the employer-employee understanding. If there are later changes, they should be fully disclosed, in writing, to all employees.

In addition, there are some special situations in which the conditions of employment should be spelled out in particular detail at the time of making an offer.

If a part-time or alternative-schedule appointment is offered, the full conditions of employment should be specified rather than left to oral understandings that modify usual practices and policies. These conditions include the precise time obligation, rights to request or refuse future full-time status, how time will be calculated for purposes of performance evaluation, promotion, and salary decisions, and what benefits, rights and responsibilities (such as paid vacation time, use of resources, committee service and voting privileges) are curtailed.

If there are specific expectations for the new employee, such as counseling of minority or women students, administration of special programs, community liaison work or service on committees or advisory bodies, the nature of these expectations and their weight in the evaluation of the employee's performance should be explicitly stated. Employers should ensure that special responsibilities do not place undue and unrecognized service demands on women and minorities.
Employment Contracts

APA recommends that all psychologists and employers of psychologists put their employment agreement in writing and agree to be bound by its terms. Creation of a contractual relationship not only affords legal protection for both employer and employee in case of later disputes, it also helps develop mutual understanding in areas important to good working relationships. The contract may take the form of a letter with a job offer rather than a formal, standardized document, but such a letter should be comprehensive and should acknowledge the binding nature of its terms on both parties if the offer is accepted.

EVALUATION, RENEWAL, PROMOTION, TENURE AND SALARY INCREASES

APA urges employers to formulate written policies, procedures and timetables for renewal of appointments, promotion, and salary and merit adjustments. Clear communication of these should be made to new employees, both orally and in writing. All employees should be informed promptly of any changes in employment policy or procedures that affect them, preferably in writing. If a change adds new performance requirements for employees, the time limits for meeting them should be extended or consideration given to exempting [exemplifying] those already employed from meeting the new requirements.

As a form of insurance against misunderstanding, APA recommends that both employee and employer [should] keep written records of all employment related communications.

Evaluation

In the interests of basic fairness and of avoiding litigation, evaluation criteria should be spelled out in meaningful detail well in advance of employment related decisions. For example, employers should let
employees know who will evaluate their performance, how and for what purpose. Employees in applied settings should know whether they are encouraged to do some research, and, if so, whether publications will be given positive weight in performance evaluation. An academic employer should describe not only the relative importance of teaching, research and service but also the methods and criteria used in evaluating each. Many new faculty need to be told with some specificity such things as how various journals are ranked, how co-authored work is evaluated and whether success in securing outside research support is important.

It is good practice in all employment settings to evaluate performance at regular intervals. The evaluation process should start with a request to the employee to provide relevant information. The evaluators should be competent to judge the employee’s work; when necessary, evaluation by colleagues should be supplemented by judgments solicited from competent outside evaluators. Only those matters directly related to job performance should be taken into consideration. [Care should be taken to ensure that] Evaluation should be [is] based on valid information about performance [and is not distorted by biased or stereotypic judgments of the employee]. Ordinarily, psychologists in their clinical[/professional] activities should be supervised only by other psychologists.

The outcome of the evaluation process should be reported to the employee in a constructive manner and with specificity. It is sometimes important that the employee have a written report of the evaluation outcome in order to avoid future disputes over adequacy of performance and expectations. It is also usually helpful to the employee to be able to discuss the results with the evaluator(s) in a face-to-face meeting.
Termination

Employees should be informed from the beginning about what is likely to lead to termination of their job. This includes termination for poor performance, funding problems, and gross misconduct.

Employees should be told what notice the employer will give, what grievance procedures are available, and what rights they have on dismissal. Principles of fairness require that employees dismissed for any reason be entitled to a review of the dismissal decision. In academic settings, termination procedures should adhere to the guidelines of the American Association of University Professors.

Even if dismissal is for good cause, notice should be given sufficiently in advance of the termination date to allow the employee reasonable time to find a new position. Only in cases of dismissal for gross misconduct should the employer expect a dismissed employee to leave immediately.

RIGHTS AND RESPONSIBILITIES OF EMPLOYEES AND EMPLOYERS

The development of good working relationships between psychologists and their employers and the maintenance of dignity and mutual respect in the workplace usually depend on the achievement of some basic conditions of employment. The following list of such conditions is not exhaustive but rather reflects frequently-voiced dissatisfactions and complaints. Some job situations will call for special measures to develop and maintain adequate working relationships. Employers and employees in unusual situations should give explicit consideration to special needs, using the conditions discussed here as examples of what promotes harmony of goals and fair exchanges of effort and reward.
Job Security

APA believes that job security is fundamental to development of the trust and responsibility that characterize a healthy working relationship. Job security is usually achieved through written contracts, negotiation or advance in a civil service position. However, many psychologists are in positions where funding conditions or institutional rules preclude granting of full job security. It is nonetheless important to try to grant some measure of at least conditional job security to employees whose performance has met the employer's standards over a period of time. This can sometimes be accomplished through granting rights to continue in a position as long as funds are available, priority in applying for consecutive limited term positions, and other assurances appropriate to the situation. Employers are urged to grant such rights and assurances.

The psychological benefits of job security depend on employees' trust in the employer's willingness to deal fairly. Employers should adhere to contractual arrangements for their full term and should abide by rules that offer some measure of job security. Should changes be necessary, they should be renegotiated rather than imposed.

An employee should be accepting of reasonable changes in organizational policies and practices. Economic and social changes may mean that all expectations cannot be met, and some flexibility in adjusting to changed circumstances and renegotiating expectations on the part of both employer and employee is of benefit to all concerned.

Academic Freedom, Freedom of Speech and the Right to Advocate

Psychologists, like any other employees, should be protected from threats to their job security or other sanctions because of efforts to maintain the standards of their profession or because of activities not
related to their job. Psychologists have the rights any citizen has to speak out on issues of social and moral concern. Client and community advocacy is a legitimate role for psychologists. Advocacy should be carried out openly, at appropriate times and in appropriate places. Employed psychologists should make it clear that they are not speaking for their employer and they may have some obligation to discuss the implications of their activity with their employer, but they should not thereby incur employer sanctions. APA endorses the 1940 Statement of Principles on Academic Freedom and Tenure of the American Association of University Professors (Policy Documents and Reports, AAUP, 1984) and recommends to nonacademic employers that they adopt the principles in that Statement.

APA opposes the practice of requiring loyalty oaths as a requirement for taking or keeping a position. Such oaths, by their nature, impute guilt and serve to restrict the constitutional right of an individual to espouse unpopular views and join with others to take unpopular stands.

Professional Development

Both employers and psychologist employees benefit from employee participation in educational programs that enable psychologists to keep abreast of developments in their field and to advance professionally. Psychologists should encourage institutions and agencies that employ them to sponsor or conduct programs that enhance professional development. Employers are encouraged to support employees' independent professional development activities and to reward achievement through promotion and salary increases.

7. The term "loyalty oath" does not refer to normal oaths of office which are required by law for acceptance of positions in public employment. Examples of such "acceptable" oaths are those taken by military officers and federal civil servants. The term "loyalty oath" also does not refer to vows taken by members of religious orders. The American Psychological Association does not object to these oaths of office.
Employment Equity

APA supports efforts of psychologists to eliminate the effects of past discrimination in professional training and employment and urges all employed psychologists to take an active part in promoting affirmative action by their employers whenever possible.

APA supports efforts of psychologists to achieve equity in professional salaries. This includes efforts to achieve salary equity for all psychologists in equivalent positions. Salary equity should extend to compensation in retirement and other benefits.

The Employment Environment

The employer should provide a physical and psychological environment that is conducive to good job performance and that allows psychologist employees to meet the standards and guidelines that APA has set for their work (see list at end of this document). Changes in policies and practices that affect employees should be promptly communicated to them.

The Employed Psychologist's Role and Responsibilities

Psychologists are responsible for carrying out the full functions and obligations of their positions. Psychologists have the responsibility to make clear and explicit to themselves, their colleagues and their coworkers the nature of their role and responsibilities and to prepare themselves adequately for new and emerging roles.

The primary responsibility of the psychologist in a professional role is to the client. The psychologist must resolve conflicts of interest between the employer agency and the client on the basis of this responsibility.

As stated in the APA Code of Ethics, psychologists must recognize their responsibility to render only those psychological services which they are competent, by reason of education, training and experience, to deliver.
The individual psychologist, whether practitioner, teacher or researcher, is professionally accountable for the consequences and effects of his or her services. This responsibility cannot be shared, delegated or reduced.

It is the psychologist's responsibility to be aware of and adhere to APA standards and guidelines governing the conduct of his or her work (see references at the end of this document). Employers should neither request nor expect that these standards be violated. Psychologists' efforts to reach and maintain these professional standards should not be met with punitive employer responses. Psychologists should refuse to participate in professional, research or educational activities that run counter to the promotion of human welfare.

APA opposes attempts of other professions to define the roles and responsibilities of psychologists. It is the policy of APA that psychology, as an independent profession, is entitled to parity with other health and human service professions in institutional practice. Psychologists should work toward this goal in their own places of employment and should support other psychologists' efforts toward these ends.

Psychologists are committed to the development of the highest possible quality in teaching, research, and the delivery of psychological services. Psychologists encourage and support cooperation and integrated efforts by all those involved in promoting the science, art, and practice of psychology.

[Psychologists should not support or submit to use of invalid or irrelevant "suitability" criteria in decisions involving training, hiring, promotions, research awards or other grants of resources].

Psychologists should resist the encroachment of influences on their work that would distort or prevent the scientific and professional development of psychology.
APA opposes the extension of security classifications in nonsecret work and urges psychologists to attempt to remove such classification when it is unjustifiable. Psychologists must decide for themselves whether to undertake classified research or professional tasks. Since such work is shielded from professional scrutiny or supervision, it is the individual psychologist's responsibility to consider carefully the effect of such work on individuals and on society and to avoid engaging in activities which he or she could not, for ethical reasons, engage in if the work were not classified.
REFERENCES

American Association of University Professors. (1984). 1940 Statement of principles on academic freedom and tenure. Policy Documents and Reports (pp.3-8)


Appendix

Psychologists are responsible for knowing about and acting in accord with the standards and positions of the APA, as represented in such official documents, as the following:


AGENDA ITEM #12:

BAPPI STRATEGIC PLANNING AND
REVIEW OF POLICIES AND PROCEDURES
(AVAILABLE AT MEETING)
Council of Representatives Request for Input Regarding Ethnic Minority Psychological Associations Representation

**Issue**

This is to inform BAPPI that CSFC, P&P and CEMA are being asked to provide input and guidance regarding next steps in addressing issues related to seating a representative from each of the four Ethnic Minority Psychological Associations (Association of Black Psychologists, National Latino/a Psychological Association, Association of Asian/Pacific Psychologists, and the Society of Indian Psychologists) on the APA Council of Representatives. This request comes from Council in conjunction with its August 2009 receipt of the *Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives* (Exhibit 1).

Following is the minute from Council’s August 2009 meeting regarding this issue:


*Council also voted to request that one non-voting delegate from each of the four National Ethnic Minority Psychological Associations be invited to continue to attend Council meetings for an additional three years (2010-2012) with the understanding that the delegates will serve as consultants to the process of developing next steps based on the recommendations of the Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives. Furthermore, the delegates will continue to receive full reimbursement for their attendance at the February and August meetings. Council affirms that in 2007 and 2008 it voted in support of a Bylaw amendment to be voted upon by the membership to seat representatives of the four National Ethnic Minority Psychological Associations.*

*Council also requested that the Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives be referred to the Committee on Ethnic Minority Affairs, the Committee on Structure and Function of Council and the Policy and Planning Board.*

**Background**

Background information on this issue is included in the *Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives.*

**Implementation Plan**

To be determined
**Fiscal Implications**

To be determined

**Main Motion**

To be determined

**Recommendation**

None

**Exhibits**


*Sue Houston*

*Public Interest Directorate*
REPORT OF THE PRESIDENTIAL WORKING GROUP ON THE REPRESENTATION OF DIVERSITY ON THE COUNCIL OF REPRESENTATIVES

Background

In 2006, then President Ron Levant petitioned the Council of Representatives (COR) to seat a delegate from each of the four national ethnic minority psychological associations (EMPAs) as observers without vote in the Council of Representatives. The aims of the initiative included promoting the representation of ethnic minority psychologists in Council and the integration of ethnic minority issues and points of view into the agenda of the Council of Representatives. The APA absorbed the costs of the delegates’ attendance at a level equivalent to funding provided to ethnic minority members of Council. These costs are estimated to be $15,000 per year. The perceived success experienced in seating the four observers prompted Council to propose seating the four EMPA delegates as members of Council with a vote. Consequently, in 2007 the Council of Representatives sent a proposed bylaws amendment to the general membership that would provide a seat with a vote to delegates representing each of the four EMPAs. The amendment did not pass. Believing it had failed to educate the general membership sufficiently and believing that such education would result in the adoption of the amendment, the COR sent the amendment a second time to the membership in 2008. The amendment did not pass a second time. Two-thirds of all members voting in an election is required for a Bylaws amendment to take effect.

The votes were as follows:
2007: 6628 (63.29%) approved the amendment; 3844 (36.71%) did not approve. 10,472 votes total.

2008: 6,749 (65.45%) approved the amendment; 3,563 (34.55%) did not approve. 10,312 votes total.

In February 2009 President James Bray appointed a working group to explore factors contributing to the defeats of the By-laws amendment to seat the four national ethnic minority association representations with a vote on Council and to make recommendations to the Council of Representatives regarding representation of diversity in the Council of Representatives. Given that no rationales were requested or received with individual member’s votes, it became important to understand factors that may have affected their votes, not assuming that only one factor determined a member’s vote.

**Charge to the work group:**

The charge given to the Working Group was:

To examine issues related to the vote by APA members not to amend the APA Bylaws to create a voting seat for each of the four Ethnic Minority Psychological Associations (EMPAs). According to the proposal, each of the four EMPAs (Association of Black Psychologists, National Latino/a Psychological Association, Association of Asian/Pacific Psychologists, and the Society of Indian Psychologists) would designate one of its members to sit on the Council of Representatives.
The Working Group is to provide its report to the Council of Representatives for its meetings at the Annual Convention in Toronto in August 2009.

**Group Membership**

President James Bray appointed the following members to the Working Group:

Jean A Carter, Ph.D. and Armand R. Cerbone, PhD, co-chairs; M. Lynne Cooper, Ph.D.; John N. Moritsugu, Ph.D.; Robert J. Resnick, Ph.D.; Dianne S. Salter, PhD, JD; Kenneth J. Sher, Ph.D.; and Thomas J. Vaughn, PhD.

**Process and nature of the dialogue**

*Transparency and confidentiality.* In order to achieve free, open and frank discussion and thus maximize the benefit of the work group, the Working Group attempted to balance the importance of transparency with the importance of confidentiality. While the outcome of the discussions will be available to the Board of Directors, Council and other interested parties, confidentiality regarding the particular comments of speakers will be maintained.

*Consultations.* The Working Group recognized the importance of consulting with groups with significant investment and history in the issue, including the four EMPAs, the Committee on Ethnic Minority Affairs (CEMA), and Division 45 [the constituent groups of the Council of National Psychological Associations for the Advancement of Ethnic Minority Interests (CNPAAEMI)]. The co-chairs invited dialogue with these stakeholder groups. To date, the co-chairs have consulted with J. Manuel Casas, Ph.D.,
President of the Society for the Psychological Study of Ethnic Minority Issues (Division 45), with the Committee on Ethnic Minority Affairs, and with the staff of the Office for Ethnic Minority Affairs (OEMA). CNPAAEMI responded to a request for dialogue in a letter to President James Bray (Exhibit A).

Meetings. With the exception of its first meeting in at the February 2009 Council of Representatives meeting, the Working Group has met exclusively via teleconferencing. Beyond the costs of the conference calls, no costs were incurred.

Historical Considerations

To understand accurately the circumstances and passions related to the initiatives to seat the four EMPAs on Council with a vote, it is important to recognize and appreciate the history that resulted in the withdrawal of ethnic minority psychologists from the APA and the establishment of four separate EMPAs. Briefly, that history cites a tradition of disenfranchisement and discrimination that marginalized ethnic minority members of governance.

Historically, the discipline of psychology has not included the participation of psychologists of color. In the 1960’s, with the evolution of social justice concerns and increased funding, an increasing number of ethnic minority psychologists entered the field of psychology. However, the concerns they raised and the issues they championed were not on the agenda of APA. The distress felt by ethnic minority psychologists was evident when a group of ethnic minority psychologists formed the Association of Black Psychologists (ABPsi) and walked out of the APA Board of Directors meeting in San Francisco 1968. Subsequently, the Asian American Psychological Association, the
National Latina/o Psychological Association, and the Society of Indian Psychologists were formed to address the issues and concerns of their members and ethnic minority communities. The need for the existence of these ethnic minority psychological associations has to be understood in this historical context.

Unfortunately, racism and exclusion has been an integral part of the cultural and societal reality of the United States of America, and members of all ethnic minority groups have experienced discrimination and its impact. It should be emphasized that the discipline of psychology was neither a main proponent of nor the only segment of society affected by prejudice and discrimination. However, with the wide spread influence of institutional discrimination, almost no organization escaped the impact. There has not been a constant mechanism for ensuring representation of ethnic minority concerns, issues or perspectives on COR throughout the Association’s history.

Differentiating representation/integration of EM psychologists, which can serve a positive function by creating a welcoming environment and improving pipeline issues, is not the same as integrating ethnic minority issues within psychology’s larger agenda. Such integration of EM issues can serve a positive function of ensuring that COR attend to issues of relevance to ethnic minority colleagues, clients and societal needs (e.g., funding of the Ethnic Minority Fellowship Program). Both strategies are relevant; opting for one or the other may be insufficient to achieving the desired goals of representation and inclusion. Through its invitation to the EMPAs to serve as observers in Council, with funding, COR has made a commitment to the role of the EMPAs in dealing with these issues within the environment of COR.
APA’s awareness of the effects of stigma and discrimination against people of color has improved through years of research and policy-making. Further, APA has adopted many policies based on that research which have mandated active opposition to discrimination on the basis of race and ethnicity. The positive results of research and policies may be evidenced in such developments as the establishment of the OEMA, CEMA, Division 45, diversity training in COR, and the Multicultural Guidelines, among others. Yet it is equally evident that much remains to be done. Thus, the need for ethnic minority psychologists to have an active voice in the organizations that represent them and their professional concerns is paramount.

While its progress in combating prejudice may bode well for the future, the APA still faces resolving a legacy of discrimination against psychologists of color. It was this conviction that motivated the invitation to seat EMPA observers on COR and subsequently to seat them with a vote.

**Positions of the Observers and Presidents of the EMPAs.**

The Working Group identified the following stakeholders to consult regarding their reactions to the defeat of the Bylaws amendments and regarding the effectiveness of the observer program:

- The National Latina/o Psychological Association (NLPA)
- The Society of Indian Psychologists (SIP)
- Association of Black Psychologists (ABPs)
- The Asian American Psychological Association (AAPA)
- Division 45
- CEMA
There is insufficient information available about the ethnic minority associations and their composition to assist us with our deliberations. In particular, questions are raised as to how many are members of APA, of divisions and of their state associations. How many are academics and how many are practitioners? How many students in these associations? What are the membership requirements to join the EMPA? In the absence of this information, it is difficult to gain adequate understanding of the associations, their membership, potential roles in the Council, or the extent of overlap with APA and its members.

The following are questions were addressed to the four observers and the presidents of the EMPAs:

1. What has been the impact of the defeat of the bylaws amendment twice?
2. Is there a time when another bylaws amendment would be desirable? What are the conditions that would make that desirable?
3. Would the group like to continue observer status without a vote?
4. What has been the experience of observer status?
5. What recommendations for further rapprochement do you think would be helpful to your organization and to your members that APA should consider?

The response of the CNPAAEMI is attached in Exhibit A.

Issues Related to and Affecting the Outcomes of the Bylaws Referenda

From discussions among the Working Group members and their consultations with stakeholders, the Working Group identified several factors and questions that may
have affected the general membership in voting against the amendment. Though not derived from a scientific sampling of the membership, these issues resonated positively as likely, if not probable, concerns and questions for APA members and for members of Council in particular. The general categories of issues included a) persistent evidence and impact of racism, b) the influence of pressures to be politically correct around issues of diversity, c) financial and structural issues related to Council, its size and composition, and d) issues around representation. The Working Group believes that the effectiveness of COR and other governance bodies in resolving the challenges identified in this list will be critical to diversity representation and other issues of great sensitivity that come before Council and other governance groups. There was disagreement among the members of the Working Group whether the goals to be achieved with seating the four ethnic minority psychological associations can be achieved by other means. One group believes that only groups like the ethnic minority psychological associations have the means to present and represent the issues and concerns that deeply affect ethnic minority psychologists and the ethnic minority community. Another group believes that there are groups within APA, such as Division 45, that can achieve the same goals as those that can be achieved by seating the four ethnic minority psychological associations.

Issues Identified by the Working Group

A. Persistent evidence and impact of racism:

- **Addressing the legacy of institutional prejudice and discrimination.**

  What are appropriate ways to mend a history of institutional prejudice and discrimination, i.e., how does APA today address the downstream effects
of this legacy? Is there a need to make up for past transgressions? How do we do this realistically and respectfully?

- *Continuation of observer status in COR or other forms of rapprochement and inclusion.* While APA has developed organs to research and be aware of ethnic minority concerns, APA has no mechanism to guarantee consistent, reliable and on-going representation of ethnic minority issues on the Council of Representatives (COR). Although there have been ethnic minority representatives on COR, they typically have been elected to represent other constituencies, with only the Division 45 representatives specifically attending to issues of ethnic minorities. There needs to be consistent representation of the concerns that affect both ethnic minority psychologists and the ethnic minority community. These concerns may be different. Many majority psychologists on COR work with ethnic minority populations but do not have the cultural or social context to fully represent the concerns that affect them.

B. The influence of pressures to be politically correct around issues of diversity,

- *Pressures to be “politically correct.”* Some COR members report being reluctant to speak against proposals on politically sensitive issues. They remain silent in public lest they be perceived as socially or culturally insensitive or prejudiced or fear risk of recrimination and reprisal. Candidates for governance positions feel acutely vulnerable. This constriction of discussion because of concern over political correctness
and sensitivity to diversity can lead to debate on critical issues becoming restricted with negative implications for the welfare of the membership and psychology, and in turn, to an overestimation of the membership’s support for the amendments. The pressure to be politically correct can also increase resistance to this and other diversity issues.

C. Financial and Structural Issues Related to Council

  o Structure, size, and composition of COR

  • Increasing size of COR. The size of COR is large and unwieldy, and many feel it is already suboptimal for hosting in depth discussions with broad participation of the representatives. Adding more representatives only serves to exacerbate this problem.

  • Disproportional representation. There are a number of ongoing concerns about disproportionate and unbalanced representation on COR. These issues remain unresolved and adding additional representatives at this time may serve to further complicate the current efforts to achieve better representation.

  • Electoral rights and prerogatives. Issues related to the role of Council in electing members of Boards and Committees and of standing for and/or voting in elections for APA Board, Recording Secretary and Treasurer are unaddressed.

  • Electoral issues and status. Unlike the case for other representatives to Council, the amendment to seat the representatives of the EMPAs does not call for these
representatives to be elected by their constituents, creating a different level of responsibility of these representatives to both their constituents and to APA.

- **Seating these organizations.** If we do, why not others that may also represent underrepresented groups or groups that bring a perspective that may be deemed important for APA to have represented? How do we prioritize which other perspectives should be included within COR that are not already seated? The issue revolves around the various perspectives on what areas, interests or perspectives are important to have represented on COR and how best to ensure that they are seated on the floor of Council.

- **Memberships of other Independent Organizations.** Seating additional independent organizations and representing a new category of affiliation with APA could further complicate the already byzantine structure of Council and create precedent for organizations that may wish to be granted similar special status. This raises concerns about the responsibility of groups with votes on COR without responsibilities and participation within the full APA. Further, seating organizations that have no reciprocal affiliation and/or offer no reciprocal affiliation to the APA sets a questionable precedence for including other external groups. What criteria would be used to include or exclude other external organizations? With what repercussions for APA?
Financial costs and benefits to APA of observer status. In a climate of extreme economic hardship and ongoing budgetary constraints, the cost of seating additional representatives, including those from the EMPAs, is important to consider. Current costs for the four observers are approximately $6,400 for the February meeting, and $8,600 for the August meeting, with a total for both meetings of $15,000 (Note: Ethnic minority COR members and the EMPA observers receive four additional hotel nights at convention and $500 toward transportation; non-ethnic minority COR members receive 2 hotel nights and no transportation expenses). Can APA continue to assume these costs indefinitely? Is the expense warranted by the benefits accrued? In addition, seating delegates of the four EMPAs was initiated for a three-year trial period. Is it in the interests of the APA, the EMPAs, and the APA’s diversity initiatives to renew the program for another three years? How and by whom shall such decisions be made? How shall the program be evaluated?

D. Issues related to Representation.

Adequacy of present structures. Are the present organizations within governance sufficient to achieve the objectives that seating the 4 EMA’s is meant to achieve; if not, why not, and can the same goals be achieved by other means? Current mechanisms include a division representing ethnic minority issues, designated divisional seats for ethnic minority representatives, Ethnic Minority Caucus, and CEMA. Other models exist besides seating external groups, including creation of new divisions and/or
divisional sections, which can increase representation on COR. A
significant question is: Are there issues that would be heard by COR only
if EMPAs had a vote?

- Continuation of observer status in COR or other forms of
  rapprochement and inclusion (See above; this item is included here as it
  is also relevant in this section)

Recommendations

In all of our discussions of the issues, there was a certain and steady
appreciation for the contribution of the ethnic minority perspectives to council
deliberations. There also was a sense that the concerns over bylaws changes had to do
with the mechanics of seating of the ethnic minority associations and the importance of a
clear understanding of the particulars regarding who may be seated and how. Pursuant to
these two principle themes to our deliberations our recommendations are clearly and
strongly for continued contacts, improvement in contacts and further deliberations
regarding the manner in which the APA might effectively bring ethnic minority
association perspectives and issues to bear on Council considerations. Toward this end
the follow recommendations are made.

- Recommendation 1:
  - APA should invite the EMPAs to continue in observer status for
    the next three years, with the following conditions:
    - Council should consider most effective ways of addressing
      1) Inclusion and support of ethnic minority psychologists,
2) Inclusion and support of ethnic minority associations, and

3) Inclusion and support of the collective issues that are not better addressed in other ways.

- APA should continue to fund the four observers at the same level as other ethnic minority representatives on COR, since this is an initiative of the APA for the primary benefit of the APA. In recognition of the current financial crisis and the impact of differential funding for different representatives to Council however, the Working Group recognizes the importance of Council’s fiduciary responsibility as it relates to funding for the EMPA representatives.

- The observers should enjoy the same access to speaking on the floor of COR as COR representatives; that is, the observers should be welcome to speak on any item and without requiring express invitation or permission to speak each time. This may be accomplished either by having the current President extend this prerogative at the opening session of COR meetings for the duration of the meetings or through other means.

- Council and the EMPAs should establish goals and mechanisms for assessing the outcomes of the continued observer status.

- COR should consider changing the designation of “observer” to “delegate” to describe the status of the “observers” more
accurately. Since Council meetings, like other APA meetings are open meetings, any observer is welcome and has a right to attend. Our goal in these actions is to designate individuals who have particular rights, roles and responsibilities within the COR.

- **Recommendation 2:** The Working Group recommends that Council not send a third vote on a bylaws change at this time. At such time as a third bylaws vote may become appropriate, the Working Group strongly recommends exploration of the related factors in the list above in order to frame the vote more positively in the minds of the voters. It also recommends that the four EMPA’s be invited to participate in discussions any future Bylaws amendment. Until there is more reliable information regarding the defeat of the two bylaws votes, the Working Group believes that an immediate third vote may have a negative outcome with consequent damage to any future vote and may be generalized to other diversity initiatives.

- **Recommendation 3:** The Working Group recommends continued commitment by APA to increase the representation of ethnic minority psychologists and ethnic minority issues. It also recommends sustained efforts to identify, implement and institutionalize the most effective ways to address these issues appropriately and meaningfully.

**Implications/Consequences to Consider**

The Working Group recognizes that each recommendation is likely to have both negative and positive consequences if implemented. Consequently, the Working Group recommends that, when considering implementation of any measure related to diversity,
COR be guided by its commitment to integrate diversity, both in representation of ethnic minorities in governance bodies and in the representation of ethnic minority issues in APA agenda. The APA should seek and sustain regular contacts with the EMPA’s so as to better coordinate actions of mutual interest to all the associations.

The Working Group believes that the defeat of the bylaws amendments puts APA once again at a crossroads where it can move its commitment to ethnic minority psychologists and ethnic minority issues beyond inclusion to full integration or it can risk further disenfranchisement and alienation of its ethnic minority members.

The Working Group proposes the following motions:


2. That COR continue the invitation to seat the delegate observers of the four ethnic minority associations for an additional three years at the present level of funding.
June 10, 2009

Dr. James Bray, President
American Psychological Association
750 First St., NW
Washington, DC 20002

Dear Dr. Bray:

On behalf of the Council of National Psychological Associations for the Advancement of Ethnic Minority Interests (CNPAAEMI), I am writing to convey CNPAAEMI's position on the APA Bylaws Amendment to seat the four ethnic minority psychological associations in the Council of Representatives. We understand that you have appointed a Working Group to make recommendations on this issue and will receive their report at the June Board of Director's meeting. At this time we want to make our position clear as well.

First, we would like to express our appreciation for the past and current support of the Board of Directors and the Council of Representatives for the Bylaws Amendment to seat the ethnic minority psychological associations. We share the dismay and perplexity about the failure of this Amendment to pass the vote of the Association members but are encouraged that the most recent vote came so close to passing (within 126 votes).

CNPAAEMI wants you to know that we are still very much committed to acquiring permanent seats for the ethnic minority psychological associations on the Council of Representatives. We strongly believe that the inclusion of the four ethnic minority associations in APA governance will result in the development and/or strengthening of collaborations that will benefit all of the associations and their members. CNPAAEMI is, however, deeply concerned about pursuing the process without a substantive change in strategy for passing the Bylaws Amendment. We feel it could be quite devastating to simply put another vote to the membership without additional strategies in place that would reduce the possibility of suffering a detrimental defeat for the third time. Although it makes sense to understand the reasons for the failure of this Amendment in the past, we wholeheartedly believe that our time and energy would be better spent on developing and implementing the strategies that are needed to ensure the passage of the Amendment the next time that it is put to a vote.

For example, in the previous two Bylaws Amendment votes, public education efforts were targeted towards the State Psychological Associations and the Divisions. However, as over 50% of APA members are not members of either the State Associations or the Divisions, other strategies are warranted to educate voters who are not associated with either of these groups. One strategy might be a prominent Monitor article outlining the history and issues which led to the formation of the four ethnic minority psychological associations, their current activities, and rationale for adding the seats to the Council of Representatives. Other strategies might include meetings at Convention and public education materials (similar to those disseminated to the State Psychological Associations and the Divisions) on the APA website. In other words, we would encourage a focus on strategies for success, as opposed to focusing on understanding or addressing the resistance. Education efforts might also include information about the importance of voting on this initiative, in order to increase voting participation.
There are likely to be many more members who are "on the fence" or uneducated about the issues than there are those who are resolute in their opposition. Although we may never be able to change the minds of those who are adamantly opposed, we can make valuable inroads with those who are undecided or unaware.

In conclusion, we would like to underscore our determination to succeed and as such ask you to take action on the following:

- Implement new strategies to educate members who may not be affiliated with State Psychological Associations or Divisions;
- After developing sound strategies, put the Bylaws Amendment forward to the membership for a third vote;
- Ensure that the ethnic minority psychological association observers to Council continue to be funded until the goal of permanent voting seats is achieved (beyond the end of the August 2009 meeting as currently authorized).

Thank you, once again, for the support given to our previous efforts to get the Amendment passed and by so doing also giving impetus to increasing the participation of ethnic minority APA members at all levels of the organization. We would welcome the opportunity to meet with you or representatives of the Working Group at Convention to discuss steps in getting the Amendment passed in a timely manner. We currently have space in the Wentworth Room at the Intercontinental Toronto Centre Hotel at 9:00 am on Thursday, August 6, 2009.

We look forward to your response.

Respectfully,

Beth Boyd

Beth Boyd, Chairperson
Council of National Psychological Associations for the Advancement of Ethnic Minority Interests
APA Society for the Psychological Study of Ethnic Minority Issues (Division 45)

Karen L. Suyemoto, President
Asian American Psychological Association
Robert Atwell, Past President
Association of Black Psychologists

Edward A. Delgado-Romero, President
National Latina/o Psychological Association

Pamela B. Deters, President-Elect
Society of Indian Psychologists

J. Manuel Casas, President
Division 45, Society for the Psychological Study of
Ethnic Minority Issues

cc: APA Board of Directors
APA Council of Representatives
The Working Group on Diversity in the Council of Representatives
Committee on Ethnic Minority Affairs
Update on the Working Group on Seating of the Four Ethnic Minority Psychological Associations

August-December 2009

At Council’s meeting in August 2009, Council received the Report of the Working Group that was appointed by 2009 President James Bray, and referred the report to CSFC, CEMA and P&P for their review and possible action.

Council also voted to continue funding the observers from the four ethnic minority psychological associations for an additional three years.

Also at the Council meeting, Drs. Carter, Cerbone and William Parham (Division 45 Representative to Council) reported an update following a meeting of Drs. Carter and Cerbone with representatives of CNPAEEMI at which an agreement was reached to continue joint efforts to achieve Council’s goal of seating the ethnic minority associations. At that meeting, the report from the first WG was discussed. That report listed a number of suggested barriers to integration of ethnic minority concerns and representation on COR...and by implication in all of APA, as well as a successful future ballot. The larger goal of effective and real integration of EM persons into leadership, EM issues into the agenda and the seating of the 4 EMPAs need to be considered in light of APA’s newly-developed Strategic Plan. The ballot to seat the 4 EMPA's is seen as a critical step toward that goal.

The Board of Directors of APA reviewed the report and referral at its September meeting and asked Armand Cerbone and Jean Carter to continue as the Board liaisons for follow-up.

January-February 2010

Dr. Goodheart asked Drs. Melba Vasquez, Rosie Phillips Bingham, Carter and Cerbone to continue working with CNPAEEMI, as well as CSFC, P&P, CEMA and the representatives of the four ethnic minority associations.

2010 President Carol Goodheart invited the representatives of the four ethnic minority psychological associations to attend the Council meeting as delegates and extended an invitation for the February 2010 meeting to approach the microphone as issues of relevance to their members or their associations were open for discussion.

Drs. Vasquez, Bingham, Carter and Cerbone met with Drs. Azara Santiago-Rivera, Douglas McDonald and Alvin Alvarez to review the current status and plan next steps. The following activities were noted:

1. Dr. Goodheart’s use of the term “delegate”, invitation to the microphone, and expansion of the working group.
2. Renewal of the funding for an additional 3 year term
3. Referral to CSFC, P&P and CEMA for action, along with continuing Board of Directors involvement.
The following activities were discussed; some were implemented (as noted below):

1. Importance of inclusion in the APA strategic plan review of governance, which will include ensuring that the members of the TF for implementation of the strategic plan are kept informed of initiatives in this area.

2. The importance of informing Council of the delegates’ role [NOTE: Dr. Alvarez presented this during discussion of the Manchester Hyatt issue], the delegates taking the opportunity to speak at the microphone at least once during this meeting, and introducing the delegates and their role to new Council members [NOTE: Drs. Carter, Cerbone, Alvarez, and Santiago-Rivera attended the CSFC sponsored orientation for new Council members to introduce the delegates and their role at Council. It was very well-received.]

3. Importance of proceeding with a shared plan to support Council’s commitment to seating the EMPAs, including timelines, mobilization of Council members, and an educational plan for members. This will include development of the shared work group (EMPAs and APA); and development of guidance for CSFC, CEMA and P&P.

4. Importance of bridge-building goals and strengthening other partnerships for support.

The following action steps were outlined:

1. The Board of Directors members will ask Dr. Goodheart to extend an invitation to the four ethnic minority psychological associations (with copy to CNPAEEMI) to participate in a continuing workgroup.

2. The continuing workgroup needs to develop timelines and plans for next steps

3. The continuing workgroup needs to develop guidance for CSFC, CEMA and P&P and have developed the following recommendations

4. The continuing workgroup should begin development of an ongoing educational plan about the four EMPAs and their roles. E.g., Monitor articles; inclusion of information about the EMPAs in “News and Notes” and Awards type columns; inclusion of references to representatives of the EMPAs in articles as appropriate and not only around ethnic minority issues (as, “According to Dr. McDonald of the Society of Indian Psychologists, …”)

5. A potential next meeting of the continuing workgroup could happen at the Division 45 conference in June in Ann Arbor, MI. The representatives of the EMPAs will be in attendance, as will Drs. Bingham and Vasquez. Dr. Cerbone will not be able to attend. Dr. Carter will review her schedule to determine feasibility. The Board will be asked to review the possibility of funding as needed for this meeting to occur.
Recommendations for Guidance to CEMA, CSFC and P&P

Regarding the Report of the Working Group on Council Seats for Ethnic Minority Psychological Associations

1. Review prior Committee documents and recommendations regarding the issue of Council Seats for the National Ethnic Minority Associations.
2. Provide recommendations for the Working Group that will support a successful vote from APA members for a Bylaws change regarding the Council Seats for the National Ethnic Minority Associations.
3. Recommend specific strategies for the CEO, President, Council and Representatives, Boards and Committees, Divisions and SPTAs that will support a successful vote from APA members for a Bylaws change regarding the Council Seats for the National Ethnic Minority Associations.
Review of the Revision of
the Standards for Educational and Psychological Testing

Issue

In October 2005, the management agreement for the Standards for Educational and Psychological Testing, 1999 (the Standards), was signed by all relevant parties representing the Standards’ three sponsoring organizations, the American Educational Research Association (AERA), the American Psychological Association (APA), and the National Council on Measurement in Education (NCME). The agreement stipulates the formation of a management committee to oversee various on-going administrative and fiscal functions related to the Standards. Also, per the agreement, the management committee is responsible for determining when a revision of the Standards should be initiated (every five years) and the appointment of a Joint Committee to conduct such a revision.

In order to fulfill the requirements of the Standards management agreement, the Management Committee for the Standards for Educational and Psychological Testing (Management Committee) was formed late in 2005. It is composed of three members who represent the Standards’ sponsoring organizations: AERA, APA, and NCME. Dr. Wayne Camara, chair is APA’s representative to the Management Committee; Dr. Suzanne Lane represents AERA; and Dr. David Frisbie represents NCME.

In early 2006, members of the Management Committee noted that nearly seven years had passed since the Standards had last been revised. Consequently, they decided that the appropriate testing and assessment related governance groups within their respective associations should be consulted to determine whether a revision of the document was warranted. After conducting a thorough review of the Standards, and consulting with other APA constituencies involved with testing and assessment related issues, APA’s Committee on Psychological Tests and Assessment, CPTA determined that a revision of the document would be desirable. In providing a rationale for their recommendation, CPTA noted that issues related to accessible testing, technology, and educational testing, had all arisen since the last Standards revision in 1999. The Committee stressed that these issues were central to the educational and psychological community, and should be addressed in a revised document. During their meeting in August 2006, the APA Board of Directors approved CPTA’s recommendation that the 1999 Standards be revised.
Implementation

Activities of the Standards Management Committee and the Joint Committee for the Revision of the Standards for Educational and Psychological Testing are detailed below by year. In 2007 and 2008 activities of the Management Committee are highlighted because the Joint Committee was not appointed until late 2008. In 2009, the activities of the Joint Committee began. Those activities are organized by meeting date.

2007
In order to craft a relevant scope of work to direct the revision of the Standards, the Management Committee issued a general call for comments to the public and the constituents of the Standards’ sponsoring organizations in 2007. Specifically, the Management Committee was looking for input regarding those areas of the Standards most in need of revision and/or modification. A website, www.teststandards.org was developed to facilitate the collection of comments. The website is still functional and currently serves as the general information site for all activities related to the Standards revision.

The Management Committee took the first steps in selecting individuals to serve on the committee responsible for the actual revision of the Standards document – the Joint Committee. Drs. Lauress Wise and Barbara Plake were appointed co-chairs for the Joint Committee for the Revision of the Standards for Educational and Psychological Testing late in 2007.

2008
The Management Committee together with the co-chairs of the Joint Committee, analyzed input received from all sources in response to the 2007 call for comments (see above). Four key topic areas were identified as being of concern to constituents. They included: technology, accountability, access, and workplace issues. It was determined that in order to effectively address key topic area issues, members of the Joint Committee should be selected based on their expertise in a key topic area. The Management Committee also determined that the membership of the Joint Committee should represent a comprehensive range of specialty areas within the educational and psychological assessment communities. At their summer 2008 meeting, members of the Management Committee appointed the members of the Joint Committee (Exhibit 1).

2009
In 2009, the Management Committee held two meetings in June and November. Both meetings were devoted to the discussion of administrative issues including: the development and support of the general Standards website; review of financial reports; discussion of future publication options for the revised Standards; and procedures for association governance approval of the revised Standards.

In 2009, the Joint Committee held four meetings in January, April, July, and November. All meetings took place at APA headquarters in Washington, D.C. with the exception of the July meeting which took place at the CRESST Center at the University of California, Los Angeles, UCLA.
January Meeting: The Joint Committee held its initial meeting January 9-11, 2009. Individual chapters from the 1999 Standards were reviewed and revision plans for each chapter were discussed. “Theme teams” were configured to address the key topic areas of concern (access, accountability, technology, and workplace testing) identified by the Management Committee.

April Meeting: The Joint Committee held its second meeting April 7-9, 2009. At the meeting members of the Joint Committee talked more extensively about how the restructured Standards might emerge. The Committee reiterated that their task was not a major overhaul of the document, but more one of reordering and better linking standards between chapters, while addressing changes that have emerged in the field since 1999. As a model, the Committee considered draft revisions of several chapters that contained overarching themes and a “clustering” proposal with individual standards reorganized topically within each chapter. The co-chairs drafted a 3 year schedule delineating Committee assignments and corresponding deadlines. It was anticipated that the current schedule (which was subject to change) would have an outside review of the revised Standards taking place during the first half of 2011.

July Meeting: The Joint Committee held it third meeting July 24-26, 2009 at the CRESST Center, UCLA. Committee members reviewed several of the Foundation chapters (1 through 6) and noted that they were on track to have the Foundation section completed in late 2010. All chapter leaders attempted to cluster the standards within major themes discussed in the introduction. The Committee devoted several hours for breakout group meetings for the 4 “theme teams”: Access, Accountability, Technology and Workplace. Afterward, the breakout groups reported back to the full Committee. Committee member, Dr. Frank Worrell led a research-based presentation on Stereotype Threat.

November Meeting: The Committee held its fourth meeting November 6-8, 2009. At the meeting, the Joint Committee continued chapter reviews and also discussed the use of thematic clusters to organize the standards within each chapter.

The Committee devoted the afternoon of November 7th to a Technology panel discussion. Participants included: Drs. Randy Bennett, Brian Clauser, Dean Delis, Peter Foltz, and Bob Mislevy. Dr. Dick DeVore participated via conference call. Committee member, Dr. Walter “Denny” Way began the discussion by asking the panel members to share their ideas on the impact of: 1. new item formats and more innovative ways of assessing students online; and 2. computerized scoring algorithms and the scoring of complex simulations and other assessments. He asked them to forecast future trends as well as to discuss current practices. Following each member’s slide presentation, time was allotted for questions from the Joint Committee and general group discussion.

Members of the Management Committee attended part of the meeting on Sunday, November 8, 2009. The Management Committee and Joint Committee discussed plans for release of the revised draft Standards document. Both Committees acknowledged
that the Management Committee will assume full responsibility for soliciting comments on the revised *Standards*. It was noted that the comment period would probably take around 6 months, as it would need to take into account the various governance meeting dates for the *Standards*’ sponsoring associations. It was proposed that the Joint Committee would go on hiatus during the extended comment period.

**2010**

Four meetings of the Joint Committee are planned for 2010: January 15-17 at the CRESST Center, UCLA; April 23-25 at APA Headquarters in Washington, D.C.; July 23-25 in the Denver, CO area; and December 3-5 at APA. The Committee also reserved September 24-26, 2010 should an additional meeting be needed to prepare the draft release document. Some meetings might be cancelled, depending on the final plans for the draft release. Dates for four 2011 meetings have also been confirmed.

Dr. Wayne Camara, chair of the *Standards* Management Committee will be available at the meeting to provide an update on *Standards* revision activities that have taken place in 2010, as well as those that are planned for the remainder of the year.

**Fiscal Implications**

None

**Main Motion**

None

**Recommendation**

None

**Exhibits**

(1) Roster – Joint Committee for the Revision of the *Standards for Educational and Psychological Testing*

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Science Directorate
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AGENDA ITEM #15:

UPDATE ON MINORITY FELLOWSHIP PROGRAM
(POSTPONED UNTIL FALL 2010)
I. BAPPI COMMITTEE BUSINESS

New CLGBTC Operating Procedures

Issue

BAPPI is provided as information the new operating procedures that CLGBTC has adopted:

7.2 In addition to considering the expertise of prospective members, the Committee bears the onus of responsibility, to the extent possible and practicable, for maintaining diversity within its membership among an array of demographic variables. These variables include, but are not limited to, sex, gender identity and expression, transgender status, sexual orientation, ethnicity, and career seniority. To that end, in making nominations to BAPPI for new members, the Committee attempts to achieve and maintain gender balance as well as representation from bisexual and transgender individuals, ethnic minorities and early-career psychologists.

When developing its nomination slates, the Committee considers the demographics of those members whose terms will continue into the following year and selects nominees who will complement the existing membership to meet the expectation of balance and diversity. To achieve gender balance, the Committee ensures that the resulting composition of the membership will include at least two members who self-identify as women, at least two members who self-identify as men, and that there are no more than three members of either sex. In this way, the Committee allows for the election of up to two individuals who do not self-identify within the gender binary.

Implementation Plan

None.

Fiscal Implications

None.

Main Motion

None.

Recommendation

None.

Exhibits

1. None

Clinton W. Anderson, PhD, Associate Executive Director, & Director, Lesbian, Gay, & Bisexual Concerns Office
Public Interest Directorate
At its February 2010 meeting, the Board of Directors reviewed and discussed the memo from the Committee on Legal Issues (COLI) regarding procedural safeguards to ensure scientific merit of APA (Exhibit 1). The Board decided that a working group was needed to address the issues outlined in COLI’s memo, but not to be limited to COLI’s proposed solutions, and to report back to the Board with a formal proposal. The working group would be composed of representatives of the four major APA boards (BSA, BPA, BAPPI, BEA), along with a representative from the Policy and Planning Board (P&P) as well as a COLI representative serving as a liaison to the group. The Task Force would be chaired by Dr. Rosie Bingham, a member of the Board of Directors. Your group is being asked to appoint a representative to the working group.

During the past year, COLI has reviewed many proposed APA statements, resolutions, task force reports and policies in an effort to identify possible legal issues for referral to the General Counsel and to provide its thoughts on the broader psycho-legal implications. In the course of conducting those reviews, COLI has sometimes noted that some documents appear to advance without adequate scientific review. In Exhibit 1, COLI presents its concerns, possible consequences, and proposed solutions.

The Policy and Planning Board (P&P) also discussed similar issues and the minute from their October 2008 meeting is below:

**Council Policy Statements and Resolutions (Item CC#6)**

Beginning in June 2007, P&P has been working on a proposal that it hoped would provide additional guidance beyond the Guidelines on Council Resolutions for groups drafting public policy statements/resolutions that will be proposed for adoption as APA policy. P&P’s goal is to improve the quality and increase the research base of Council policy statements and resolutions. Over the past year, P&P continued to make modifications in response to concerns raised by various groups. P&P attempted to fashion a policy that would not hinder the development of Council policy statements/resolutions and would be flexible enough to allow groups to pursue issues that do not have a significant amount of psychological research available. P&P’s original proposal was offered as an Association Rule and, at the request of the Board of Directors, P&P also offered a revised version of the Guidelines for Council Resolutions as an alternative. Item CC#6 on the Fall 2008 cross cutting agenda offers a Model 1 (the rule) and Model 2 (the guidelines). Comments from several committees that met in Round 1 of Fall 2008 were reviewed by P&P at this meeting.

P&P saw that governance groups showed little support for either Model 1 or Model 2. A majority of the groups indicated that, in their estimation, the extant Guidelines for Council Resolutions were sufficient. P&P members still believe that there are significant procedural shortcomings in the current development and review process but it decided not to move forward with its proposal. A motion was made to drop the proposal and it passed (5 for, 2 opposed).
Implementation Plan

To be determined

Fiscal Implications

None

Main Motion

To be determined

Exhibit

1. Memorandum to the APA Board of Directors from the Committee on Legal Issues (December 3, 2009)

Suzanne Wandersman
Science Directorate
MEMORANDUM

TO: APA Board of Directors

FROM: Committee on Legal Issues

DATE: December 3, 2009

RE: Procedural Safeguards to Ensure Scientific Merit of APA

Specific Aim

Since its inception, the American Psychological Association (APA) has grown into the largest organization of psychologists in the world and has enjoyed considerable influence in matters of practice, policy, and everyday life. The members of the Committee on Legal Issues (COLI) believe that the key to APA’s continued and improved success lies in a firm commitment to science as the foundation on which effective practice and policy are built. This memo will highlight the need for procedural safeguards to ensure the scientific merit of APA and its efforts.

Cause for Concern

APA governance is comprised of a “complex system of checks and balances” intended to assure a high level of fairness and shared responsibility” (see http://www.apa.org/about/governance/index.aspx). Committees and council members can propose motions that will be reviewed by legal counsel, relevant committees, and boards. The purpose of the review process is to ensure that the motions are fully vetted before final consideration by APA’s Board of Directors and Council of Representatives. Unfortunately, it has been COLI’s experience that motions sometimes advance without adequate scientific support. Others have cited research that is marginally relevant, severely outdated, or poor in scientific quality.

1 We use the term “motion” to encompass new business items, APA statements, resolutions, task force reports, policies, and other related activities. We acknowledge that not all motions are scientific in nature (i.e., motion to formally commend a member), but use this term for the sake of parsimony and to avoid unnecessary repetition.

2 We are not suggesting that all motions lack scientific merit. As one example, the Committee on Psychology and AIDS developed a proposed Resolution on Drug Abuse Treatment to Prevent HIV among Injecting Drug Users that was well-supported by empirical research (see http://www.apa.org/about/governance/council/policy/drug-treatment.pdf).
This is not to say that APA’s system of checks and balances is entirely ineffective. Having a larger, more diverse group of members from several committees and boards involved in reviewing motions should, and often does, improve the quality of those items. Moreover, many of these committees are comprised of accomplished scientists and practitioners who are capable of evaluating the scientific merit of each item. In this sense, each member reviews not only as a representative of his or her specific committee, but also as an ad hoc scientific peer reviewer.

Despite this potential for extemporaneous scientific review, no single committee is charged with the responsibility of evaluating and commenting on the scientific merits of the motions. In fact, just the opposite is true; each committee has its own separate and unique responsibility (e.g., COLI reviews motions for potential legal issues, the Ethics Committee focuses on potential ethical issues). Classic research on diffusion of responsibility has demonstrated that the absence of a clearly defined task and low individual accountability can decrease task performance both within and between groups. Therefore, despite being reviewed by multiple groups, motions may escape rigorous scientific scrutiny entirely or until late in the process, after APA already has invested a significant amount of time and resources.

Consequences

In addition to wasting APA resources, the absence of a procedural safeguard to ensure the scientific merit of APA motions increases the likelihood that the Board of Directors and Council of Representatives will confront (and perhaps approve) motions that lack scientific merit. In doing so, APA abandons the solid footing of empirical evidence and ventures into the morass of arguments and positions that are often based on moral grounds alone. This threatens APA’s reputation as a scientifically-based organization and discounts its voice on future issues for which an adequate body of scientific research exists. Ultimately, motions that are not sufficiently grounded in science undermine APA’s goal to “advance psychology as a science . . . as a means of promoting health, education, and human welfare” (see http://www.apa.org/about/governance/bylaws/article-1.aspx)

The current APA process also creates an ironic paradox: motions, which have the potential to reach and affect a vast public audience, receive less rigorous scientific review than the empirical articles published by APA, which have a more limited audience. Scientifically-based motions are critical because they often serve as the basis for determining APA’s position on a given issue, and informing the public, perhaps even more so than published journal articles. One example that COLI has encountered directly is the Board of Director’s procedures for making a decision on whether to file an amicus curiae (“friend of the court”) brief in a legal case. One of the various factors that COLI and the Office of General Counsel consider in making a recommendation to the Board is whether the argument in a proposed brief is consistent

with APA policy. A brief based on a resolution that includes non-empirically based arguments may adversely affect the perceived legitimacy and impact of an amicus brief in court.  

In addition to subverting APA’s goals and efforts, the absence of a procedural safeguard to ensure the scientific merit promotes organizational inefficiency. To the extent that committees focus on the scientific merit of motions, they are less able to focus on the actual tasks their committee is assigned to perform. Moreover, when a committee comments on a lack of scientific support, the motion is returned to its author(s) and science is often added in a post hoc fashion. This wastes valuable time and resources because it necessitates additional rounds of review that could be avoided if the motion had been scientifically-based from the outset. It is especially important in the current economic climate to have policies and practices in place that maximize organizational efficiency.

Finally, motions that rely exclusively on moral arguments (e.g., “APA should do X because it is the right thing to do…”) are impossible to evaluate in an objective, dispassionate manner. In our experience, committees are sometimes marginalized as lacking moral integrity or sensitivity when they take issue with the non-empirical foundation of a morally-driven motion (e.g., torture or slavery). As a scientific organization, APA must not create or support a process in which concern for scientific merit is twisted into immorality. Likewise, regard for scientific bases cannot be diminished because an issue is one of morality.

**Proposed Solutions**

Our discussion of this matter would be incomplete if we did not include some potential solutions for the Board of Directors to consider. Perhaps the most natural, logical place to start would be the creation of a Presidential Task Force charged with the responsibility of clearly defining the scope of the problem and brainstorming potential procedural safeguards that would ensure the scientific merit of APA.

Even without the benefits of a Presidential Task Force, the members of COLI have developed two potential solutions. One possibility is for the Board of Directors to work with Dr. Steven Breckler and the Board of Scientific Affairs to implement a process requiring that proposed motions be submitted to journal editors in the relevant sub-disciplines. In turn, the editors would rely on their editorial boards to perform peer-reviews of the scientific content of the motions, much like they do for empirical articles submitted for publication consideration in APA journals. A second possibility is to create a committee expressly charged with the sole responsibility of reviewing motions for scientific merit. Just like COLI reviews motions to

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4 COLI and General Counsel have been careful not to advance *amicus* briefs based on APA policies that are not grounded in psychological science. This process is more risky and taxing than it would be if scientific evidence were consistently foundational to APA motions.

5 As an example, the *Proposed Resolution on Families of Incarcerated Offenders* languished in the review process for approximately six years.
identify potential legal issues, the Committee for Scientific Merit would scrutinize the scientific foundation of relevant motions.

Irrespective of whether a Presidential Task Force is created or a new review procedure is implemented, we want to be extremely clear on the following point: these potential solutions are necessary, but not alone sufficient, to ensure the scientific merit of APA and its efforts. It is imperative that APA formulate a set of criteria to evaluate the scientific merit of motions. Once developed and disseminated to all APA boards and committees, authors of motions will be better able to assess the scientific merit of their motions and more cognizant of science in the initial drafting of their motions.

Conclusion

The members of COLI consider it a privilege to serve the APA. We bring this issue to the Board of Director’s attention because we value and hold dear APA’s goal of using psychological science to promote health, education, and human welfare. It is not our desire for APA to simply add another box to the organizational flowchart, but to seriously consider whether APA’s stated purpose is accurately reflected and effectuated in its day-to-day operations.

In this memo, we have argued that the lack of deliberate and specific scientific review in APA governance may result in motions that are not firmly rooted in science. This undermines our organization’s credibility and wastes valuable and limited resources. As psychologists, our positions may not always be popular; however, the APA must reaffirm its commitment to the sound principles of peer-reviewed, replicable science. We urge the Board to do so by taking the action requested in this memo.

6 While not all matters are of legal consequence, it is instructive to note that in Daubert v. Merrell-Dow Pharmaceuticals (1993) the United States Supreme Court held that expert evidence must be scientifically valid to be admitted in court and enumerated the following nonexclusive criteria for evaluating scientific validity: whether the theory or methodology is (1) is falsifiable or subject to hypothesis testing, (2) possesses a known or potential rate of error, (3) has been peer-reviewed and published, and (4) is generally accepted within the relevant scientific community.
IV. OTHER APA BOARDS AND COMMITTEES

2009 Activities Update: Center for Workforce Studies

Issue
An update on the Center for Workforce Studies (CWS) is provided for the Board’s information (Exhibit 1).

Implementation Plan
None

Fiscal Implications
None

Main Motion
None

Recommendation
None

Exhibits

1. Center for Workforce Studies (CWS): 2009 Activities Update

Sue Houston
Public Interest Directorate
The staff count is currently eight. CWS staff continue to work with other APA offices on projects related to their missions akin to Institutional Research efforts. In 2009 this comprised 54 separate efforts and approximately 50% of CWS staff time. CWS solicits input from staff in other directorates to get input on data needs.

CWS staff are completing a report on a national survey of health service provider psychologists - selected data tables and “module” reports have been released from this effort and are available on the CWS website; analyzing NSF data via a special license for profiles and an article on the psychology workforce; fielding data from the 2009 Doctorate Employment Survey and the 2009 Faculty Salary Survey. Staff are involved with analyzing data from the 2010 Graduate Study in Psychology. CWS will deploy the Member Employment Update in March.

CWS staff will present at the 2010 Convention and will staff the CWS booth. APA Boards donated hours to be used at the 2010 Convention for sessions revolving around workforce questions. CWS staff will be presenting at 4 regionals in 2010 and are supporting BEA efforts with respect the Master’s-level working group. CWS staff is part of efforts by Executive Office to design measures to determine whether the APA is meeting its strategic goals. CWS provided data to the APA Psychology as a STEM Field taskforce.

CWS is responsible for an externally funded evaluation of the SPINES program at the marine biological lab at Woods Hole (program designed for increasing/improving retention of minorities in neuroscience careers)(2001-2011). The final report was submitted. CWS is working with the Minority Fellowship Program at APA to pool data and look at the various programs and outcomes.

Individuals can receive periodic updates from CWS about new releases/data by sending an email to CWS@apa.org.
VI. CENTRAL OFFICE REPORTS

Report on Current Initiatives of the Public Interest Government Relations Office

Issue

Annie Toro, JD, Associate Executive Director will present the Board with information about the current initiatives and areas of focus within the Public Interest Government Relations Office.

Implementation Plan

NA

Fiscal Implications

NA

Main Motion

NA

Recommendation

Exhibits


Sue Houston
Public Interest Directorate
VI. CENTRAL OFFICE REPORTS

Board of Directors DRAFT Minutes, December, 2009

Issue
The Draft Minutes of the December 2009 meeting of the Board of Directors are provided as information.

Implementation Plan
NA

Fiscal Implications
NA

Main Motion
NA

Exhibits
1. Board of Directors Draft Minutes, December 2009

Sue Houston
Public Interest Directorate
Present: James H. Bray, PhD; Alan E. Kazdin, PhD; Carol D. Goodheart, EdD; Barry S. Anton, PhD; Paul L. Craig, PhD; Norman B. Anderson, PhD; Rosie Phillips Bingham, PhD; Jean A. Carter, PhD; Armand R. Cerrone, PhD; Suzanne Bennett Johnson, PhD; Konjit V. Page, MS; Melba J. T. Vasquez, PhD; Michael Wertheimer, PhD; and Rachel N. Casas, BA; Nadine J. Kaslow, PhD, and Jennifer F. Kelly, PhD (incoming Board members)

Absent: None.

I. MINUTES OF MEETING

A.(1) The Board voted to approve the minutes of the August 4 & 8, 2009, and September 11-13, 2009, Board of Directors meetings.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) The Board postponed the item “Election of Recording Secretary and Treasurer” to a January 2010 conference call of the Board.

B.(3) The Board voted to approve the following changes to the method for the conduct of the President-Elect Nomination and Election Ballots:

Beginning in 2011, the President-elect Nomination Ballot will only be available to members online. Members who have email addresses on file with APA will be sent a link to the voting website. An announcement will also be made in the APA Monitor on Psychology and on the APA website providing the link to the voting website. The site will contain statements of those members who are interested in being nominated as information to the membership. No paper ballots will be printed.

Beginning in 2010, members who have an email address on file with APA will be sent a link to the President-Elect Election voting website. The candidates’ statements will be included on the site. Those members who do not have an email on file with APA will be sent a paper ballot including the candidates’ statements. The paper ballot will provide space for the members to write in their email address and will notify members that paper ballots will be phased out in the coming years.

Over the next several months, the Election Office will provide members with information about these changes in the Monitor on Psychology and on the APA website.

C.(23) The Board received as information an update on the item “Dual Members Dues Discount Program: Request to Include the Society for Neuroscience.”

D. In executive session, the Board took action on the following appointments:

1. Appointed Barney Beins, PhD, to serve a three-year term (1/1/2010-12/31/2012) on the History Oversight Committee.
2. Appointed Nancy Molitor, PhD, to serve a two-year term (1/1/2010-12/31/2011) to replace Jana Martin, PhD, on the APA Insurance Trust.
3. Appointed Michelle Braun, PhD, and Allison Ponce, PhD to serve three-year terms (1/1/2010-12/31/2012) on the Committee on Early Career Psychologists.
4. Appointed Michael J. Jenuwine, JD, PhD, Charlotte J. Patterson, PhD, and Lisa Piechowski, PhD, to three-year terms (1/1/2010-12/31/2012) on the Committee on Legal Issues.
Committee. Appointed Steven F. Stanton to serve a three-year term (1/1/2010-12/31/2012) as the non-voting audit/finance community member on the Finance Committee.

6. Approved Mathilda B. Canter, PhD, as the recipient of the 2009 Raymond D. Fowler Award for Outstanding Contributions to APA – Member.


8. Approved the continuing committee appointments.

III. ETHICS

In executive session, the Board took action on six ethics cases.

IV. BOARD OF DIRECTORS

A.(4) The Board voted to recommend that Council receive the Final Report of the 2009 Presidential Task Force on the Future of Psychology Practice and direct the Committee for the Advancement of Professional Practice to oversee the collection of feedback from boards and committees related to implementing the recommendations of the report.

B.(5) The Board voted to allocate $38,500 from the President’s discretionary fund to support Dr. Goodheart’s 2010 presidential initiatives. Her two initiatives are: The Presidential Task Force on Advancing Practice and the Presidential Task Force on Caregivers

C.(6) The Board voted to approve the following meeting dates in 2011: February 16 & 17, April 8-10, June 10-12, August 2 & 6, October 14-16, December 9-11.

D.(7) The Board voted to recommend that Council approve the following amendments to Association Rule 210-2.10 (bracketed material to be deleted; underlined material to be added):

**210-2.10 Discretionary funds.**

The Board of Directors and Council each shall have a discretionary fund to be used at their own discretion [of up to $110,000]. Council shall be responsible for setting the discretionary fund limits. After APA Council and Board have adopted a budget, new unbudgeted expenditures to be made from their respective discretionary funds shall be approved as follows:

(a) If emerging from Council action, the proposed allocation from the Council discretionary fund shall require approval by a simple majority vote of the Council members voting.

(b) If emerging from Board action, the proposed allocation from the Board discretionary fund shall require approval by a two-thirds majority of Board members voting.

(c) If either action involves the support of a task force and/or ad hoc committee, the authorization would be for one year only and assigned to the appropriate office/program. If the mission of the task force or committee is to continue beyond one year, it must be reauthorized and funded on a year-to-year basis.

(d) All allocations other than those described in (c) will be sent to Council for review if authorized for an additional period of time.

[The President and President-Elect shall each have a special discretionary fund of up to $38,500 and $16,500 respectively. Use of these special discretionary funds must be approved in advance by the Board of Directors and be limited exclusively to presidential initiatives. Costs related to each initiative must be incurred within the respective Presidents and President Elects term (calendar year).] A special discretionary fund will be allocated for presidential initiatives and must be spent during the first two years of the three-year cycle of each president. Council shall be
responsible for setting the discretionary fund limit. The specific allocation of these funds shall be approved in advance by the Board of Directors.

The Finance Committee [annually] regularly shall review and recommend [increases] as appropriate [(inflation, etc.)] limits to the discretionary funds which shall be reviewed by the Board of Directors and submitted to Council for approval.

E.(8) The Board voted to postpone the item “Addressing Diversity Issues in Agenda Items” to a January 2010 conference call of the Board.

F.(8A) The Board voted to allocate two hours of 2010 convention programming to support a symposium at the 2010 Convention in San Diego that will discuss the recommendations made by the 2009 Presidential Task Force on the Future of Psychology Practice.

G.(8B) The Board voted to postpone the item “Procedural Safeguards to Ensure Scientific Integrity of APA” to its February 2010 meeting.

H.(24) The Board received as information an update on the 2009 Presidential Task Force on the Future of Psychological Science as a STEM Discipline.

I. In executive session, the Board took action on the following Psychology Defense Fund Case:

Petition # 2009-002: On recommendation of the Executive Management Group, the Board voted to grant $15,000 to the New York State Association of Neuropsychology to assist its continued efforts to reverse state restrictions on the use of neuropsychology technicians.

V. DIVISIONS AND STATE AND PROVINCIAL ASSOCIATIONS

No items.

VI. ORGANIZATION OF THE APA

A.(9) The Board discussed and voted to forward to Council the following values statement as part of APA’s Strategic Plan:

The American Psychological Association commits to its vision through a mission based upon the following values:

- The Continual Pursuit of Excellence
- Science-Based Knowledge and Application
- Outstanding Service to Its Members and to Society
- Social Justice including Diversity and Inclusion
- Acting Ethically in All that We Do

The Board voted to recommend a full discussion by Council prior to finalizing the core values statement as part of APA’s Strategic Plan. The Board commended the members of the Ad Hoc APA Values Committee for their work. The Board also provided feedback regarding APA’s Strategic Plan Measures.

B.(10) The Board voted to postpone the item “Ensuring All Divisions and State, Provincial and Territorial Psychological Associations a Seat on the Council of Representatives” to a January 2010 conference call of the Board.

C.(11) The Board voted to recommend that Council approve the extension of the expiration date for the Principles for the Validation and Use of Personnel Selection Procedures to 2015.
D.(12) The Board voted to recommend that Council approve the following housekeeping changes to APA policies that have been identified through P&P’s 5-year review of the Council Policy Manual (bracketed material to be deleted; underlined material to be added):

1) That Council approves an amendment to the 1980 guidelines for divisions to follow with regard to Fellows nominations:

Council voted to approve the following guidelines with regard to Fellow nominations by division:

That each division employs orderly procedures for ensuring the nominations of appropriate and deserving potential Fellows;

That divisions be encouraged (but not required) to ask nominees to provide a self-generated written statement setting forth their accomplishments that warrant nomination to Fellow status.

That evaluators at the division level submit to the Division Fellows Committee a narrative explanation of their decisions and, when the decision is supportive of the nomination, that all materials reviewed by the Division Committee be forwarded to the APA Membership Committee; and

That the Board of Directors continues to review the APA [Membership] Fellows Committee’s recommendations, prior to making its recommendations to the Council, as specific in the current APA Bylaws.

2) That Council approves an amendment to the 1992 policy that extends the Membership Committees charge to recruitment and retention activities nominations:

Council approved having the Membership [Committee] Board oversee Association membership retention and recruitment activities and make annual reports on these activities to Council.

3) That Council approves an amendment to the 1998 policy regarding the collection of information about representation of women, ethnic minorities, gay men, lesbians, bisexuals, and individuals with disabilities in APA governance:

Collection of Information about the Representation of Women, Ethnic Minorities, Gay Men, Lesbians, [and] Bisexuals, Transgender Individuals, and Individuals with Disabilities in APA Governance: That staff is directed to 1) annually collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities serving on Council and boards and committees; 2) at least every five years, collect and disseminate information on the number of women, ethnic minorities, gay men, lesbians, bisexuals, transgender individuals and individuals with disabilities who have been nominated to boards and committees and/or put on a board/committee election slate and to nominees on the Council of Representatives election ballot. The information will be collected by mailing a survey requesting voluntary self disclosure regarding gender, ethnicity, sexual orientation, and disability status from board/committee members and Council members (annually) and board/committee nominees and members running for Council (at least every five years). The results of the survey will be disseminated to APA governance groups and will be used in determining whether further action to increase diversity is warranted based on the results and, if
so, at what point in the nomination/election process diversity issues may need to be most vigorously addressed.

Council requested that the APA Research Office be involved in the development of the survey and analyzation of the data.

4) That Council approves an amendment to the 1959 policy Philosophy for Creating New Divisions:

The policy of the Council with respect to the admission of new divisions shall be a positive one concerned with the spirit and intent of APA to give full recognition to diversity and to growth in the field of psychology. The Council shall not be overly restrained by considerations of orderliness, by fears of centralization, or by the problems created by a sheer increase in size. Council shall naturally satisfy itself that divisional status is warranted under the criteria established in the Bylaws. But, beyond the letter of these rules, Council shall establish that a proposed division represents a new, vigorous, and demonstrably viable interest; that it has achieved recognition in the literature of psychology and in institutional form within departments of psychology, industry, and government; and that it numbers among its members both established psychologists and [younger persons who are not actively working in other divisions] early career psychologists whose professional interest areas are not represented by the current divisions. When such new interests emerge, Council should be prepared to grant divisional status promptly.

5) That Council approves an amendment to the 1961 policy that encourages psychologists to join divisions and that Central Office should facilitate the process:

Psychologists should be encouraged to join at least one division of their choice. The Association should make it as easy as possible to apply for membership. This might take the form of a blank included with the annual statement of dues which would be filled out by the applicant, returned to the Central Office with the dues, sorted by Central Office personnel, and forwarded to appropriate division secretaries. The Central Office will utilize new and emerging technologies to facilitate membership applications for divisions.

6) That Council archives the 1985 Policy on Undergraduate Curriculum in Psychology.


8) That Council archives the 2002 Memorandum of Understanding between the APA and CPA for Concurrent Accreditation of Doctoral Training Programs and Predoctoral Internship Training Programs in Professional Psychology.

E.(25) The Board received as information an update on the item “APA’s Tax Status.”

VII. PUBLICATIONS AND COMMUNICATIONS

No items.

VIII. CONVENTION AFFAIRS

A.(13) The Board voted to refer the item “Restructuring of Convention Registration Fees” to the Convention Working Group.

B.(14) The Board voted to approve the use of the 2010 Abatement Funds for enhancing the annual convention as recommended by the Board of Convention Affairs as follows:

1) $40,000 – Convention activities initiated by Carol Goodheart, EdD, APA President, to include (1) Kids Camp - $25,000; (2) Speed Mentoring – $5,000; (3) Bring the Family Speaker - $5,000; and (4) Printing/activities in support of LGBT issues - $5,000;
2) $25,000 – APA Day at the San Diego Zoo’s Wild Animal Park;

3) $35,000 – Enhanced technology associated with the convention and investment in attracting more sponsors and exhibitors to the meeting.

IX. EDUCATIONAL AFFAIRS

A.(15) The Board voted to recommend that Council approve the proposed APA Advertising Policy for APA Publications (bracketed material to be deleted; underlined material to be added):

Advertising of educational programs in APA publications and on the APA Web site will be restricted to those schools or other institutions fully accredited by regional or other institutional accrediting associations recognized by the U.S. Department of Education. In addition, for those areas of professional psychology where APA accreditation is currently provided (e.g., clinical, counseling, school, combined), APA will restrict advertising to only APA accredited programs. Those [doctoral] programs accredited by the American Psychological Association must state that they are APA-accredited and include contact information for the APA Accreditation Office. [Those doctoral programs not accredited by APA must include the following statement in their advertisements: This program is not accredited by the American Psychological Association. Information concerning whether or not a doctoral program is APA-accredited will be required in all print advertising in APA publications and exhibit space at the APA Convention as well as alternative text in all banner advertising.]

B.(16) The Board voted to approve the addition of $31,100 to the 2010 Budget to subsidize the Continuing Education sessions at convention. The Board noted that the Continuing Education fees at convention will remain at $15 per CE credit for APA members and $20 for non-members. The Board requested that the Continuing Education Committee bring back to the Board alternative models for granting Continuing Education that specifically have reduced costs related to monitoring.

C.(26) The Board received as information and updated Petition for the Recognition of Proficiencies in Professional Psychology.

D.(27) The Board received information regarding the next steps in the transition toward international quality assurance collaboration between accrediting bodies.

X. PROFESSIONAL AFFAIRS

A.(17) The Board voted to recommend that Council approve APA’s development of treatment guidelines, including the establishment of a Steering Committee and Guidelines Development Panel(s) to assist in their development.

B.(18) The Board voted to recommend that Council adopt as APA the revised Model Act for State Licensure of Psychologists as amended by the Board.

C.(19) The Board voted to recommend that Council reauthorize the Public Education Campaign, to be consistent with APA’s Strategic Plan, up to $1.5 million per year as previously authorized by Council and add $117,200 to the 2010 Budget to achieve funding of least $1 million per year for the next three years.

XI. SCIENTIFIC AFFAIRS

No items.
XII. PUBLIC INTEREST


XIII. ETHNIC MINORITY AFFAIRS

No items.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No Items.

XVI. FINANCIAL AFFAIRS

A.(20) In double executive session, the Board voted to recommend that Council approve the 2009 year-end probable safety margin of $3,325,400 and a 2010 Budget safety margin of $1,040,100 (after recognition of the $3,500,000 cash flow from the buildings).

In double executive session, the Board voted to approve an approximate allocation of $2,790,500 to undesignated net assets. The Board also approved a special designation of $534,900 from 2009 net assets funds to fund the Fall 2010 Consolidated meetings and $534,900 from 2009 funds for end-of-year payments for staff.

B.(21) The Board voted to postpone the item “2010-2012 Financial Forecast and Net Asset Allocation Plan” to a January conference call of the Board.

C.(22) The Board voted to postpone the item “Long Term Investment Policy” to a January 2010 conference call of the Board.

D.(29) The Board received as information the 2008 IRS Tax Form 990 and 990-T.
VI. CENTRAL OFFICE REPORTS

Council of Representatives Draft Minutes, August 2009

Issue
The Draft Minutes of the August 2009 meeting of the Council of Representatives are provided as information.

Implementation Plan
NA

Fiscal Implications
NA

Main Motion
NA

Exhibits
1. Council of Representatives Draft Minutes, August 2009

Sue Houston
Public Interest Directorate
COUNCIL OF REPRESENTATIVES
August 5 & 9, 2009

APPROVED MINUTES

I. MINUTES OF MEETING

A.(1) Council voted to approve the minutes of its February 20-22, 2009, meeting.

II. ELECTIONS, AWARDS, MEMBERSHIP AND HUMAN RESOURCES

A.(2) Council voted to postpone to its February 2010 meeting the item “Members Dues Schedule Revision: Amendment to Association Rules.”

B.(3) Council voted to request that Article XIX, Section 3, of the Bylaws be amended and forwarded to the Membership for a vote as follows (bracketed material to be deleted; underlined material to be added):

Article XIX
Dues and Subscriptions

1. The basic Association dues to be paid annually by Members and Associate members shall be determined by Council and shall include subscriptions to such publications as may be determined by Council. In addition to the basic dues, each Member shall pay a fixed amount, to be determined by Council, for each Division over and above one to which the Member belongs.

2. The annual fees to be paid by International Affiliates, High School Teacher Affiliates, and Student Affiliates, and the publications of the Association to which they shall be entitled, shall be determined by Council.

3. Nonpayment of dues for [two] one [consecutive] year[s] shall be considered as equivalent to a request for resignation from the Association.

Council also voted to request that the Association Rules be amended as follows (bracketed material to be deleted; underlined material to be added):

10-10. TERMINATION OF MEMBERSHIP

10-10.1 Membership in the Association may be terminated by the death of a member, resignation, dropping for nonpayment of dues, or as provided in the Ethics Committee’s Rules and Procedures.

Notice of the death of a member or formal resignation should be forwarded to APA Central Office. Resignation will ordinarily be accepted forthwith, except while a member is under scrutiny by the Ethics Committee. While under such scrutiny, a member may be permitted to resign under stipulated conditions in accordance with provisions in the Ethics Committee's Rules and Procedures.

A member is dropped from membership in the Association after nonpayment of dues [two calendar years during which dues to the Association have remained unpaid. “Benefit of membership” subscriptions (such as the APA Monitor on Psychology) will not be continued during this period of grace] by January 1 of the year after dues have been unpaid for one year, except while a member is under the scrutiny by the Ethics Committee. Members dropped after nonpayment of dues will be considered voluntary resignations from the Association.

10-10.2 A member may resign from any division by not paying the dues or assessment of that division in connection with the annual Association dues statement.
10-11. REINSTATEMENT OR READMISSION

10-11.1 The membership of a person who has voluntarily resigned [or who has been dropped for nonpayment of dues] may be fully reinstated at any time by the payment of all [delinquent and] current dues. Prior to such reinstatement, the person must indicate any prior unethical conduct and make the ethics affirmation in accordance with the procedures of Association Rule 10-4 and is subject to investigation by the Ethics Committee as provided in its Rules and Procedures for applicants. Reinstatement is effective as of the current year. The period of [nonpayment of dues] voluntary resignation shall not be counted towards the years needed to attain dues-exempt status. When fully reinstated, the person’s membership dates from the original year of election. This option shall not be available to a former member who was under scrutiny by the Ethics Committee at the time membership was terminated.

10-11.2 The membership of a person who has voluntary resigned or who has been dropped for nonpayment of dues may be reinstated upon payment of dues for the current year. Reinstatement is effective as of the current year. The period of nonpayment of dues shall not be counted toward the years needed to attain dues exempt status. This option can be used only once and shall not be available for former members who were under scrutiny by the Ethics Committee at the time membership was terminated.

10-11.3 A person whose membership has been terminated under the provisions of Article II, Section [17] 16 of the APA Bylaws or who has resigned while under the scrutiny of the Ethics Committee may request reinstatement of membership under the conditions stated in Article II, Section [18] 17. Accordingly, the Membership Board will automatically inform the Ethics Committee of all such reinstatement requests and the Ethics Committee shall be responsible for furnishing the Membership Board with a recommendation as provided in its Rules and Procedures.

10-11.4 Ordinarily, individuals who have previously resigned or been expelled from membership must reinstate into the previously held membership status and dues category and may not reapply as a new member. Exceptions regarding the membership status and dues category of reinstating members may be made by the chief staff officer or the Membership Board.

C.(3A) Council voted to elect 101 members to initial Fellow status, on the nomination of the indicated divisions and on the recommendation of the Fellows Committee and the Board of Directors.

D.(3B) Council voted to approve amending Association Rule 110-8.3 as follows (bracketed material to be deleted; underlined material to be added):

110-8. PRESIDENT-ELECT ELECTION

110-8.1 The election of APA President-elect is conducted by the Election Committee.

110-8.2 Candidates are nominated by Fellows, Members, and Associate members with voting privileges. Nominations are made by preferential ballots, and up to five names may be listed in rank order. Nomination ballots are sent on or about February 1. The balloting period closes within 45 days. Only APA members are eligible for nomination.

110-8.3 The APA President-elect shall be elected by Fellows, Members, and those Associate members who have been granted voting privileges. The election ballot shall be preferential and shall list five candidates. Final election ballots shall be sent on or about [October] September 15. The balloting period shall close within 45 days.

Each candidate is invited to submit a statement, to be sent with the election ballot, of no more than 1,000 words, stating his or her opinion of issues facing psychology and of the role APA should play regarding these issues.
Results are reported to the Board of Directors. Tallied results are reported to Council no more than 30 days after the ballot closes. Election results are published in the APA Monitor on Psychology in the earliest issue possible.

III. ETHICS

A.(4) Council voted to approve the following motion in response to concerns regarding ethical standards 1.02 and 1.03:

Council directs the APA Ethics Committee to propose language to Council that will resolve the discrepancy between the language of the Introduction and Applicability Section of the Ethical Principles of Psychologists and Code of Conduct and the Ethical Standards 1.02 and 1.03 so that these Standards can never be used to justify, or as a defense for, violating basic human rights. This process shall be completed in time for the Ethics Committee's proposed language to be acted on as part of Council's February 2010 meeting agenda;

WHEREAS when Council adopted the 2002 Ethics Code, it was not anticipated or intended that the language of Standards 1.02 and 1.03 be interpreted to mean that any psychologist in any role could use these Standards to justify, or as a defense for, violating basic human rights. Standard 1.02 addresses conflicts between ethics and law, regulations or other governing legal authority. Standard 1.03 addresses conflicts between ethics and organizational demands;

WHEREAS in 2005 Council members learned that the Introduction and Applicability Section of the Ethics code is aspirational and not enforceable. It states: "If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights." In contrast, Standard 1.02 states, "If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority." Standard 1.03 states, "If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code";

WHEREAS, in 2005 Council directed the APA Ethics Committee to "review the discrepancy between the language of the Introduction and Applicability section of the Ethical Principles of Psychologists and Code of Conduct (2002) and Ethical Standard 1.02 and," requested that the Ethics Committee "make a recommendation to the Board of Directors concerning adding the words 'in keeping with basic principles of human rights' to Ethical Standard 1.02";

WHEREAS it was Council's intent in giving the Ethics Committee this charge that the Committee consider various approaches and wording in order to resolve the discrepancy;

WHEREAS, in August 2008, the movers introduced New Business Item #34E directing the Ethics Committee to suggest language that would resolve the discrepancy. The main motion suggests, as one possible approach, adding the phrase "in keeping with basic human rights";

WHEREAS in July 2009 the Ethics Committee issued its response to Council's 2005 directive in which it noted that "the language of Ethical Standard 1.03 closely tracks the language of Standard 1.02," and also reiterated a central distinction in the Ethics Code "between the Code's aspirational sections—the Introduction and Applicability, the Preamble, and the Ethical Principles—and the enforceable ethical standards." In contrast to the general language of the aspiration sections, language in the enforceable standards "is specific and directive" and sets forth "specific obligations and specific prohibitions on psychologists' behavior";
WHEREAS in July 2009 the Ethics Committee acknowledged the discrepancy between the aspirational section of the Ethics Code (Introduction and Applicability Section) and the enforceable section, but did not propose any language to resolve it. Instead the Ethics Committee recommended against adding the one phrase, “in keeping with basic principles of human rights,” to Ethical Standard 1.02 or 1.03;

WHEREAS the July 2009 response does not report that the Ethics Committee considered any other approaches or wording possibilities to resolve the discrepancy other than adding the words “in keeping with basic principles of human rights”;

WHEREAS Council acknowledges and appreciates the Ethics Committee’s work on this issue, however, the pressing need to resolve the discrepancy remains so that Ethical Standards 1.02 and 1.03 can never be used to justify or as a defense for violating basic human rights;

WHEREAS there is no plan, timeline or allocated funds for a revision of the entire Ethics Code;

WHEREAS the Ethics Committee received comments in last year’s Call for Comments about 1.02, including concerns raised about the effects of language changes on disclosure of confidential information in response to a legal demand such as a subpoena or court order, the Ethics Committee should consider these comments as it proposes language to ensure that Ethical Standards 1.02 and 1.03 can never be used to justify or as a defense for violating basic human rights;

WHEREAS the Ethics Committee’s June 2009 statement, “No Defense Against Torture,” is insufficient because it solely prohibits torture and is neither contained nor referenced in the Ethics Code itself;

WHEREAS according to The Association Rules (2008) Code 20-4.1, titled, Review of the Ethics Code, "The Ethics Committee shall have the responsibility from time to time of initiating a review of the latest formally adopted version of the ethics code or any part of the code and proposing necessary changes or additions. In carrying out such a review, the Ethics Committee may set up such ad hoc committees as it finds necessary;"

THEREFORE BE IT RESOLVED that Council directs the APA Ethics Committee and the other relevant Boards, Committees and constituencies to move forward expeditiously to recommend language to Council that will resolve the discrepancy between the language of the Introduction and Applicability Section of the Ethical Principles of Psychologists and Code of Conduct and Ethical Standards 1.02 and 1.03;

BE IT RESOLVED that the language proposed for Council’s action clearly communicate that Ethical Standards 1.02 and 1.03 can never be interpreted to justify or as a defense for violating basic human rights;

BE IT RESOLVED that this entire process be completed in time for the Ethics Committee to make a formal recommendation for proposed language to be acted on as part of Council’s February 2010 meeting agenda.

IV. BOARD OF DIRECTORS

A.(5) Council voted to approve the following motion:

Council requests that diversity training on the topic of “Current Findings on Discrimination: Causes and Interventions” be provided to Council at its February 2010 meeting and to boards and committees at the March 2010 Consolidated Meeting.

B.(6) Council voted to approve 1) suspending Association Rule 210-2.10 and 2) reducing the 2009 President-elect discretionary fund by $3800 and increasing the 2010 President discretionary fund by

Council also voted to request that one non-voting delegate from each of the four National Ethnic Minority Psychological Associations be invited to continue to attend Council meetings for an additional three years (2010-2012) with the understanding that the delegates will serve as consultants to the process of developing next steps based on the recommendations of the Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives. Furthermore, the delegates will continue to receive full reimbursement for their attendance at the February and August meetings. Council affirms that in 2007 and 2008 it voted in support of a Bylaw amendment to be voted upon by the membership to seat representatives of the four National Ethnic Minority Psychological Associations.

Council also requested that the Report of the Presidential Working Group on the Representation of Diversity on the Council of Representatives be referred to the Committee on Ethnic Minority Affairs, the Committee on Structure and Function of Council and the Policy and Planning Board.

Council received information regarding continuing implementation of the petition resolution.

V. DIVISIONS AND STATE AND PROVINCIAL AND TERRITORIAL ASSOCIATIONS

Council vote to postpone to its February 2010 meeting the item “Ensuring All Divisions and State, Provincial and Territorial Psychological Associations a Seat on the Council of Representatives.”

B. Council received an update on the new-business-in-progress item “Change in Association Rule 90-6 to Clarify Role of CODAPAR in the Agenda Planning Group.”

VI. ORGANIZATION OF THE APA

A. Council voted to refer the item “APA’s Tax Status” to the Committee for the Advancement of Professional Practice with a request that the item come back to Council at its February 2010 meeting.

B. Council voted to approve the following motions for Guidelines and Standards included in the Council Policy Manual:

1) That Ethical Guidelines for the Teaching of Psychology in the Secondary Schools be archived.

2) That Guidelines for the Specialty Training and Certification of Secondary School Teachers of Psychology be archived.

3) That Guidelines for the Use of Drugs in Research by Psychologists be archived.

4) That the expiration date of the document Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists be extended to 2011.

C. Council voted to approve the following motions for Policies Included in the Council Policy Manual:

1) That Council archives the 2004 policy Identifying Priorities

2) That Council archives the 1949 policy Management of the Association’s Journals

3) That Council archives the 1970 policy on the Psychological Bulletin vs. Psychological Review:

4) That Council approves a revision to the 1971 policy on Complimentary Subscriptions (Brackets indicate deletions and underlining indicates additions):
2009 Complimentary Subscriptions
(a) A member of the [Publications Board (now] Publications and Communications Board[,] shall, during the term of office, be entitled to receive (complimentary subscriptions to all journals,) the electronic Gold Package, delivered by PsycNET. P&C Board members retiring from the board after July, 2009 shall receive the electronic Gold Package, delivered by PsycNET for life.
(b) An editor of an APA journal shall be entitled, during the term office, to receive complimentary (subscriptions to all APA journals) electronic Gold Package, delivered by PsycNET, and shall be entitled to receive for life a complimentary print subscription and complimentary electronic access to the journal he or she edited.
(c) Associate editors of APA journals shall be entitled, as long as they serve in these capacities, to receive a complimentary print subscription and complimentary (subscriptions) electronic access to the journal which they serve. (and such other journals as are required to serve their purposes for their work on a specific journal.)
(d) Consulting editors of APA journals shall be entitled, as long as he or she serves a specific journal, to receive a complimentary print subscription to that journal.

5) That Council archives the 1986 policy on the Use of Aversive Techniques in Treating Alcoholism

6) That Council archives the 1986 policy On Drug and Alcohol Treatment as Sub-issues of ‘Substance Abuse’

7) That Council archives the 1989 policy on psychology’s role in diagnosis, assessment, training and treatment of mental retardation (Division 33)

8) That Council archives the 1998 policy on APA Activities Bearing on Licensure Changes:

9) That Council approves a revision to the 1995 policy Psychological Needs of Children Exposed to Disasters

...Whereas disasters are increasing sources of human dysfunction (Hurricane Andrew, Midwest floods), as urban areas grow in population and geographic area/spread, as rural areas fall further behind in access to resources, as technology expands the potential for accidents and negative side effects (Three-Mile Island), and as the rise in international terrorism increases the probability that U.S. sites will be targeted ([1992 New York’s World Trade Center]);...

D.(12) Council voted to approve the following Goals and Objectives as part of APA’s Strategic Plan:

Goal 1: Maximize Organizational Effectiveness

Objectives

The APA’s structures and systems support the organization’s strategic direction, growth and success.

a. Enhance APA programs, services and communications to increase member engagement and value;

b. Ensure the ongoing financial health of the organization;

c. Optimize APA’s governance structures and function.
Goal 2: Expand Psychology’s Role in Advancing Health

Objectives

Key stakeholders realize the unique benefits psychology provides to health and wellness and the discipline becomes more fully incorporated into health research and delivery systems.

a. Advocate for the inclusion of access to psychological services in health care reform policies
b. Create innovative tools to allow psychologists to enhance their knowledge of health promotion, disease prevention, and management of chronic disease;
c. Educate other health professionals and the public about psychology’s role in health;
d. Advocate for funding and policies that support psychology’s role in health;
e. Promote psychology’s role in decreasing health disparities;
f. Promote the application of psychological knowledge for improving overall health and wellness at the individual, organizational, and community levels.

Goal 3: Increase recognition of psychology as a science

Objectives

The APA’s central role in positioning psychology as the science of behavior leads to increased public awareness of the benefits psychology brings to daily living.

a. Enhance psychology’s prominence as a core STEM (Science, Technology, Engineering, and Mathematics) discipline;
b. Improve public understanding of the scientific basis for psychology;
c. Expand the translation of psychological science to evidence-based practice;
d. Promote the applications of psychological science to daily living;
e. Expand educational resources and opportunities in psychological science.

Council voted to postpone to its February 2010 meeting action on the Core Values for APA.

VII. PUBLICATIONS AND COMMUNICATIONS

A.(13) Council voted to approve the Division 47 request for authorization to publish a divisional journal, to be tentatively titled Sport, Exercise, and Performance Psychology.

B.(14) Council voted to approve the Division 52 request to sponsor a new journal, tentatively entitled International Perspective in Psychology: Research, Practice, and Consultation.

VIII. CONVENTION AFFAIRS

No items.

IX. EDUCATIONAL AFFAIRS

A.(15) Council voted to approve the proposal for the establishment of an APA designation program for education and training programs in psychopharmacology.

Council also voted to adopt as APA policy, 1) the 2007 Recommended Postdoctoral Education and Training Program in Psychopharmacology for Prescription Privileges (with minor revisions), and 2) the 2007 Model Legislation for Prescriptive Authority.

B.(16) Council voted to approve the renewal of recognition of the Assessment and Treatment of Serious Mental Illness as a proficiency in professional psychology for a period of seven years, to be reviewed
again in 2016 unless otherwise warranted by provisions outlined in the CRSPPP Procedures for Recognition of Specialties and Proficiencies in Professional Psychology.

C.(17) Council voted to approve an extension for recognition of Sport Psychology as a proficiency in professional psychology for an additional period of six months until August 2010.

D.(18) Council voted to grant an extension of recognition of Psychopharmacology as a proficiency in professional psychology for a period of one year until August 2010.

E.(19) Council voted to approve the continued recognition of Family Psychology as a specialty in professional psychology for a period of seven years, to be reviewed again in 2016 unless otherwise warranted by provisions outlined in the CRSPPP Procedures for Recognition of Specialties and Proficiencies in Professional Psychology.

F.(20) Council voted to approve an extension for recognition of Industrial-Organizational Psychology as a specialty in professional psychology for an additional period of six months until August 2010.

G.(21) Council voted to approve changing the name of the specialty from Behavioral Psychology to Behavioral and Cognitive Psychology. Council also voted to grant an extension of the recognition of Cognitive and Behavioral Psychology as a specialty in professional psychology for a period of one year until August 2010.

H.(42) Council received information regarding the 2008 National Conference on Undergraduate Education in Psychology.

X. PROFESSIONAL AFFAIRS

A.(22) Council voted to adopt the following resolution as APA policy:

Resolution on APA Endorsement Of The Concept Of Recovery For People With Serious Mental Illness

INTRODUCTION: The traditional view of serious mental illness, especially psychotic disorders, is that they have at best a stable course with chronic disability and poorer-than-premorbid functioning, and at worst a chronic deteriorating course. As a result, treatment has typically focused on symptom reduction and relapse prevention, and has been characterized by low expectations with little focus on issues such as living environment, relationships, work, and education. This is now changing. A wealth of data now indicate that the majority of people with serious mental illness eventually improve significantly over time, and can have independent lives that include striving for personal meaning and enhanced quality of life through active efforts in the above domains (e.g., relationships, work), regardless of whether symptoms are present or not. Moreover, research indicates that these areas are important sources of self-esteem for consumers, and are some of their most highly rated goals for treatment. In addition, federal and state agencies are now recommending that the paradigm for treatment of serious mental illness shift away from symptom-oriented care, to this more comprehensive view of how treatment can be envisioned. This new vision for foci of treatment, informed by long-term outcome data suggesting that it is realistic, has been labeled recovery-oriented treatment. It is important to note that the concept of recovery-oriented care does not assume a specific etiology for serious mental illness, nor does it recommend or contraindicate any specific treatments. Rather, it is a vision for a person-based approach to treatment, and a method of treatment delivery that is sensitive to consumer-defined goals and recognizes the need to attend to a range of psychological factors (e.g., identity, self-esteem) as part of an expanded definition of what a positive outcome represents. In the resolution below, a detailed set of points is reviewed to clarify the definition of, and rationale for, the concept of “recovery.” This is followed by recommendations regarding how APA can help to promote this concept and thereby influence both how treatment is provided and the outcomes that are achieved.
WHEREAS as noted in the APA Resolution on Stigma and Discrimination against People with Serious Mental Illness and Severe Emotional Disturbance (1999), the Center for Mental Health Services reports that 5.4 million or 2.7 percent of the adult population has a "severe and persistent" mental illness, such as schizophrenia, bipolar disorder or major depression;

WHEREAS the Center for Mental Health Services (CMHS, 1993), in accordance with PL 102 321 (1992), has defined serious mental illness (SMI) as "a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified by DSM-IV, and that has resulted in functional impairments which substantially interfere with or limit one or more major life activities;"

WHEREAS, as stated in the APA Resolution on Stigma and Discrimination against people with Serious Mental Illness and Severe Emotional Disturbance (1999), the CMHS definition further notes that "functional impairment is defined as difficulties that substantially interfere with or limit role functioning in one or more major life activities including basic daily living skills (e.g., eating, bathing, dressing), instrumental living skills (e.g., managing money, maintaining a household, taking prescribed medication, or functioning in social, family, and vocational/educational contexts) and that adults who would have met the functional impairment criteria during the year without the benefit of treatment or other support services are considered to have a serious mental illness;"

WHEREAS, APA has previously endorsed a resolution on Stigma and Discrimination against People with Serious Mental Illness and Severe Emotional Disturbance (1999);

WHEREAS, a proficiency which contains language clearly expressing a recovery orientation in the Assessment and Treatment of Serious Mental Illness has been recognized by APA;

WHEREAS the concept of "recovery" is a core theme in the President's New Freedom Commission Report (2003), which states that: 1) "the system is not oriented to the single most important goal of the people it serves-the hope of recovery;" 2) "the system should foster recovery, resilience, and independence;" and 3) "Research and personal testimony confirm that "recovery from mental illness is real: there are a range of effective treatments, services, and supports to facilitate recovery;"

WHEREAS recovery has been defined as "A deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills and/or roles. It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness” (Anthony, 1993);

WHEREAS the process of recovery includes “that people overcome the effects of being a mental patient - including rejection, poverty, substandard housing, isolation, unemployment, loss of valued social roles and identity, loss of sense of self and purpose in life, and the iatrogenic effects of involuntary hospitalization, medication and other treatments - in order to retain, or resume, some degree of control over their lives” (Davidson, O’Connell, Tondora, Staeheli, & Evans, 2005);

WHEREAS recovery involves “a redefinition of one’s illness as only one aspect of a multi-dimensional sense of self capable of identifying, choosing, and pursuing, personally meaningful goals and aspirations despite continuing to suffer the effects and side effects of mental illness” (Davidson, et al., 2005);

WHEREAS the Substance Abuse and Mental Health Services Administration (SAMHSA) issued a National Consensus Statement on Mental Health in which it defined recovery as a "journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her full potential" (SAMHSA, 2005);
WHEREAS the Department of Veterans Affairs is changing its regulations and practice standards to implement recovery-oriented care;

WHEREAS the Department of Justice is promoting recovery-oriented care;

WHEREAS the Joint Commission has incorporated standards that address recovery oriented services for persons with severe mental illness;

WHEREAS the National Association of State Mental Health Program Directors (NASMHPD) issued a report supporting recovery-oriented care in 2004 (NASMHPD/NTAC, 2004);

WHEREAS states, agencies, and other organizations have published guidelines for recovery-oriented care (e.g., Connecticut DMHAS, 2006; Onken, Dumont, Ridgway, Dorman, & Ralph, 2002; Sainsbury Centre for Mental Health, 2004; Young, Forquer, Tran, Starzynski, & Shatkin, 2000);

WHEREAS, as noted in the APA Resolution on Outpatient Civil Commitment (2004), all people have a right to the opportunity for recovery, namely, full participation in society to the best of their ability;

WHEREAS numerous longitudinal research studies indicate that the majority of people with SMI can improve their functional status and move into valued social roles (e.g., spouse, employee, student) over time (e.g., Bleuler, 1978; Ciompi, 1980; DeSisto, Harding, McCormick, Ashikaga, & Brooks, 1995a,b; Harding, Brooks, Ashikaga, Strauss, & Breier, 1987; Harrow et al., 2005; Huber, Gross, & Schuttler, 1975; Huber, Gross, Schuttler, & Linz, 1980; Jablensky, Sartorius, Emberr, Anker, Korten, Cooper et al., 1992; Ogawa, Miya, Watarai, Nakazawa, Yusa, & Utela, 1987; Sartorius, Jablensky, & Shapiro, 1977; Tsuang, Woolson, & Fleming, 1979);

WHEREAS these longitudinal data supporting recovery from SMI are consistent with findings that even people diagnosed with schizophrenia who have spent years in state hospitals and are considered treatment-refractory can be discharged to live back in the community after receiving intensive social-learning based inpatient services (Corrigan & Liberman, 1994; Paul & Lentz, 1977; Silverstein, Wong, Wilkins, Bloch, Smith, Savitz, et al., 2006);

WHEREAS short term outcome data (1-2 years) also support the idea that recovery is possible (Edwards, Maude, McGorry, Harrigan, & Cocks, 1998; Gitlin, Nuechterlein, Subotnik, Ventura, Mintz, Fogelson, et al., 2001; Maslin, 2003; Loebel, Lieberman, Alvir, Mayerhoff, Geisler, & Szymanski, 1992; Whitehorn, Richard, & Kopala, 2004);

WHEREAS converging data on positive long-term outcomes of people with serious mental illness, and on the personal meanings of recovery have come from countries all over the world (Cohen, Patel, Thara, & Gureje, 2008; Jablensky et al. 1992; Ng, Pearson, Lam, Law, Chiu, & Chen, et al. 2008; Sartorius et al. 1977; Warner, 1983);

WHEREAS despite the general similarities in outcomes and subjective experiences related to recovery in different countries, cultural variation in the expression of serious mental illness and attitudes towards serious mental illness exist, and these must be taken into account in conceptualizing and implementing recovery-oriented care for individual persons;

WHEREAS recovery for some individuals or groups involves religious coping as a way to maintain control of their lives (Yangarber-Hicks, 2004). Research has shown that patterns of religious coping differ between ethnic groups (Bhui et al., 2008);

WHEREAS life challenges associated with recovery are common human experiences that require resilience. Resilience across cultures involves resolving tensions in relationships and cultural adherence (Ungar et al., 2007). Resilience is “...both a characteristic of the individual...and a quality of...environment which provides the resources necessary for positive development despite adverse circumstances” (Ungar et al., 2007);
WHEREAS the “research and clinical literature on resilience has focused largely if not exclusively on individual personality traits and coping styles, and has neglected to explore all possible sources and expressions of resilience in individuals and groups. For many ethnic minorities, traditional notions of resilience, shaped largely by middle class European and North American values, may not capture culturally more familiar modes of positive adaptation to adverse and traumatic experience” (Tummala-Nara, 2007);

WHEREAS research indicates that recovery is not an inevitable outcome of SMI, but that it is a function of the availability of comprehensive and coordinated psychological interventions (e.g., Harding et al., 1987b);

WHEREAS despite the existence of evidence-based practices, there are often environmental barriers to accessing potentially beneficial services. Moreover, the research literature suggests that these disparities are more severe for minorities and people of lower socioeconomic status, and that general disparities in health care lead to people with SMI dying, on average, 25 years earlier than expected. In addition, women with schizophrenia are more likely to have experienced severe trauma (e.g., physical or sexual abuse) and to have comorbid post-traumatic stress disorder, and therefore to be at risk for especially poor outcomes and further comorbidity (e.g., substance abuse) if this is not diagnosed and treated;

WHEREAS although most people with SMI will experience a significant improvement in functioning over the long term, some people will need long-term intensive treatment and supports and continue to experience significant disability; even in these cases, however, recovery-oriented principles, such as shared decision making, and a focus on multiple dimensions of outcome may improve quality of life;

WHEREAS most discussions of recovery focus on subjective experience as the domain that is most critical for promoting recovery, the extent of recovery is likely to be significantly affected by community and societal values regarding mental illness, and the extent to which people undergoing a process of recovery are accepted as valued members of their communities and the society at large.

WHEREAS as noted in the APA Resolution on Outpatient Civil Commitment (2004), a key ingredient in recovery from serious mental illness is making choices for oneself and developing skills necessary to make those choices (Anthony & Liberman, 1992);

WHEREAS as noted in the APA Resolution on Outpatient Civil Commitment (2004), clinical application of psychological methods (including neuropsychological, behavioral, sociocognitive, and functional assessments and interventions) holds substantial promise for enhancing skill development, including skills relevant to recovery from serious mental illness and skills relevant to making competent personal choices (Spaulding, Sullivan, & Poland, 2003);

WHEREAS recovery-oriented interventions such as supported employment, supported housing, and supported education have demonstrated greater effectiveness than traditional interventions for people with SMI (Drake & Bellack, 2005; Mueser, Clark, Haines, Drake, McHugo, Bond, et al., 2004);

WHEREAS the integration of psychological interventions with interventions seen as paradigmatic of recovery can lead to outcomes that are superior than with either intervention alone (e.g., cognitive rehabilitation, when added to supported employment, significantly improves vocational outcomes for people with SMI compared to supported employment alone) (McGurk, Mueser, Feldman, Wolfe, & Pascaris, 2007);

WHEREAS recovery-oriented care is consistent with evidence-based treatment (Bond, Salyers, Rollins, Rapp, & Zipple, 2004; Frese, Stanley, Kress, & Vogel-Scibilia, 2001);

WHEREAS psychologists are well qualified by training and experience, as well as well positioned in both service delivery and policy development roles, to promote such transformation and
champion the adoption of recovery-oriented services, including training staff in, and delivery of recovery-oriented interventions in mental health settings;

WHEREAS research conducted by psychologists has identified psychological constructs that are involved in the recovery process (e.g., hope, self-efficacy, self-determination, empowerment, changing personal narratives) (e.g., Lysaker, Lancaster, & Lysaker, 2003; Roe 2001, 2003), and that can form the basis for more effective psychological therapies;

WHEREAS reliable and valid assessment instruments to assess individual staff members on the extent to which they have adopted a recovery orientation, and to assess agencies’ growth towards recovery oriented services, are now increasingly used (e.g., Campbell-Orde, Chamberlin, & Leff, 2005; Chinman, Young, Rowe, Forquer, Knight, & Miller, 2003; O’Connell, Tondora, Croog, Evans, & Davidson, 2005; Ridgway & Press, 2004);

WHEREAS recovery is now routinely the subject of books; articles in scientific journals in the fields of psychology, nursing, and psychiatry, articles in consumer-oriented publications such as Schizophrenia Digest, and papers given at local, national, and international conferences;

WHEREAS the American Psychological Association has yet to develop or issue a position on the concept of recovery as it applies to SMI;

THEREFORE BE IT RESOLVED that the American Psychological Association (APA) endorses the concept of recovery as it applies to SMI.

BE IT FURTHER RESOLVED that APA will issue a position statement noting this endorsement, and that this statement will be actively promulgated to the public and appear on the APA website.

BE IT FURTHER RESOLVED that APA will work toward increasing the attention to promoting data-driven views on the realities of long-term outcomes for people with serious mental illness, and to the importance of consumer-defined and community reintegration-centered goals in conceptualizing treatment, in graduate and post-graduate training.

BE IT FURTHER RESOLVED that psychologists be encouraged to continue to promote the development, implementation, and rigorous evaluation of recovery-oriented services.

BE IT FURTHER RESOLVED that, consistent with the principles of recovery, that these efforts involve consumer input and other forms of active collaboration with consumers.

BE IT FURTHER RESOLVED that psychologists be encouraged to support and promote staff training and public education efforts designed to increase awareness of recovery-oriented concepts and treatment.

BE IT FURTHER RESOLVED that psychologists be encouraged to support and promote efforts at stigma reduction, with the understanding that the extent of recovery is partly a function of the degree to which people with SMI are accepted as valued individuals in their communities.

BE IT FURTHER RESOLVED that psychologists be encouraged to conduct further research on the outcomes of recovery-oriented interventions.

References


B.(23) Council voted to approve the assignment of February 21, 2019, as an expiration date for Guidelines for Child Custody Evaluations in Family Law Proceedings (approved as APA Policy by the APA Council of Representatives in February 2009).


D.(24A) Council voted to adopt as APA policy the proposed Guidelines Regarding Psychologists’ Involvement in Pharmacological Issues.

E.(36) Council received an update on the business pending item "Infusing the Association Guidelines in the Public Interest Which Have Been Adopted by Council for Psychologists Throughout APA."

F.(37) Council received an update on the business pending item “Revision of APA’s Statement on Parental Alienation Syndrome.”

G.(38) Council received an update on the business pending item “Ad Hoc Task Force to Investigate the Merits, Needs, and Outcomes of An Evidence Based Practice Policy for Applied Psychologists and the Benefits of Collaborating with International Associations Interested in Developing EBP Policy for Applied Psychology.”

H.(43) Council received as information an update regarding the Revision of APA’s Model Act for State Licensure of Psychologists.

I.(44) Council received as information an update regarding the contribution of psychology to the revision of the Mental Health chapter of the International Classification of Diseases and Related Disorders.
J.(45) Council received information regarding BPA’s work to develop tools and materials to support and facilitate guidelines development, revision and review.


M.(52) Council received an update on the new-business-in-progress item, “Submission of Revised Specialty Guidelines for Forensic Psychology for comment, review and revision, consistent with APA Rule 30.8.”

XI. SCIENTIFIC AFFAIRS


B.(26) Council voted to reduce the annual contribution to the Archives of the History of American Psychology to $20,000 in 2010. Council also voted that Council must reauthorize the continuation and amount of the annual contribution every three years beginning with the 2011 contribution.

Paul L. Craig, PhD, recused himself from voting on this item.


XII. PUBLIC INTEREST

A.(27) Council voted to receive the report Multicultural Competency in Geropsychology.

B.(28) Council voted to adopt the following resolution as APA policy:

Resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts

Research Summary

The longstanding consensus of the behavioral and social sciences and the health and mental health professions is that homosexuality per se is a normal and positive variation of human sexual orientation (Bell, Weinberg & Hammersmith, 1981; Bullough, 1976; Ford & Beach 1951; Kinsey, Pomeroy, & Martin, 1948; Kinsey, Pomeroy, Martin, & Gebhard, 1953). Homosexuality per se is not a mental disorder (APA, 1975). Since 1974, the American Psychological Association (APA) has opposed stigma, prejudice, discrimination, and violence on the basis of sexual orientation and has taken a leadership role in supporting the equal rights of lesbian, gay, and bisexual individuals (APA, 2005).

APA is concerned about ongoing efforts to mischaracterize homosexuality and promote the notion that sexual orientation can be changed and about the resurgence of sexual orientation change efforts (SOCE)\(^1\). SOCE has been controversial due to tensions between the values held by some faith-based organizations, on the one hand, and those held by lesbian, gay and bisexual rights organizations and professional and scientific organizations, on the other (Drescher, 2003;\(^1\)

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\(^1\) The APA uses the term sexual orientation change efforts to describe all means to change sexual orientation (e.g., behavioral techniques, psychoanalytic techniques, medical approaches, religious and spiritual approaches). This includes those efforts by mental health professionals, lay individuals, including religious professionals, religious leaders, social groups, and other lay networks such as self-help groups.
Drescher & Zucker, 2006). Some individuals and groups have promoted the idea of homosexuality as symptomatic of developmental defects or spiritual and moral failings and have argued that SOCE, including psychotherapy and religious efforts, could alter homosexual feelings and behaviors (Drescher & Zucker, 2006; Morrow & Beckstead, 2004). Many of these individuals and groups appeared to be embedded within the larger context of conservative religious political movements that have supported the stigmatization of homosexuality on political or religious grounds (Drescher, 2003; Southern Poverty Law Center, 2005; Drescher & Zucker, 2006). Psychology, as a science, and various faith traditions, as theological systems, can acknowledge and respect their profoundly different methodological and philosophical viewpoints. The APA concludes that psychology must rely on proven methods of scientific inquiry based on empirical data, on which hypotheses and propositions are confirmed or disconfirmed, as the basis to explore and understand human behavior (APA, 2008a; 2008b).

In response to these concerns, APA appointed the Task Force on Appropriate Therapeutic Responses to Sexual Orientation to review the available research on SOCE and to provide recommendations to the Association. The Task Force reached the following findings.

Recent studies of participants in SOCE identify a population of individuals who experience serious distress related to same sex sexual attractions. Most of these participants are Caucasian males who report that their religion is extremely important to them (Beckstead & Morrow, 2004; Nicolosi, Byrd, & Potts, 2000; Schaeffer, Hyde, Kroencke, McCormick, & Nottebaum, 2000; Shidlo & Schroeder, 2002, Spitzer, 2003). These individuals report having pursued a variety of religious and secular efforts intended to help them to change their sexual orientation. To date, the research has not fully addressed age, gender, gender identity, race, ethnicity, culture, national origin, disability, language, and socioeconomic status in the population of distressed individuals.

There are no studies of adequate scientific rigor to conclude whether or not recent SOCE do or do not work to change a person’s sexual orientation. Scientifically rigorous older work in this area (e.g., Birk, Huddleston, Miller, & Cohler, 1971; James, 1978; McConaghy, 1969, 1976; McConaghy, Proctor, & Barr, 1972; Tanner, 1974, 1975) found that sexual orientation (i.e., erotic attractions and sexual arousal oriented to one sex or the other, or both) was unlikely to change due to efforts designed for this purpose. Some individuals appeared to learn how to ignore or limit their attractions. However, this was much less likely to be true for people whose sexual attractions were initially limited to people of the same sex.

Although sound data on the safety of SOCE are extremely limited, some individuals reported being harmed by SOCE. Distress and depression were exacerbated. Belief in the hope of sexual orientation change followed by the failure of the treatment was identified as a significant cause of distress and negative self-image (Beckstead & Morrow, 2004; Shidlo & Schroeder, 2002).

Although there is insufficient evidence to support the use of psychological interventions to change sexual orientation, some individuals modified their sexual orientation identity (i.e., group membership and affiliation), behavior, and values (Nicolosi, Byrd, & Potts, 2000). They did so in a variety of ways and with varied and unpredictable outcomes, some of which were temporary (Beckstead & Morrow, 2004; Shidlo & Schroeder, 2002). Based on the available data, additional claims about the meaning of those outcomes are scientifically unsupported.

On the basis of the Task Force’s findings, the APA encourages mental health professionals to provide assistance to those who seek sexual orientation change by utilizing affirmative multiculturally competent (Bartoli & Gillem, 2008; Brown, 2006) and client-centered approaches (e.g., Beckstead & Israel, 2007; Glassgold, 2008; Haldeman, 2004; Lasser & Gottlieb, 2004) that recognize the negative impact of social stigma on sexual minorities” (Herek, 2009; Herek &

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2 The Task Force uses the term sexual minority (cf. Ullerstam, 1966; Blumenfeld, 1992; McCarn & Fassinger, 1996) to designate the entire group of individuals who experience significant erotic and romantic attractions to adult members of their own sex, including those who experience attractions to members of both their own and the other sex. This term is used because the Task Force recognizes that not all sexual minority individuals adopt a lesbian, gay, or bisexual identity.
Garnets, 2007) and balance ethical principles of beneficence and nonmaleficence, justice, and respect for people’s rights and dignity (APA, 1998, 2002; Davison, 1976; Haldeman, 2002; Schneider, Brown, & Glassgold, 2002).

Resolution


WHEREAS The American Psychological Association takes a leadership role in opposing prejudice and discrimination (APA, 2008b, 2008c), including prejudice based on or derived from religion or spirituality, and encourages commensurate consideration of religion and spirituality as diversity variables (APA, 2008b);

WHEREAS Psychologists respect human diversity including age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status (APA, 2002) and psychologists strive to prevent bias from their own spiritual, religious, or non-religious beliefs from taking precedence over professional practice and standards or scientific findings in their work as psychologists (APA, 2008b);

WHEREAS Psychologists are encouraged to recognize that it is outside the role and expertise of psychologists, as psychologists, to adjudicate religious or spiritual tenets, while also recognizing that psychologists can appropriately speak to the psychological implications of religious/spiritual beliefs or practices when relevant psychological findings about those implications exist (APA, 2008b);

WHEREAS Those operating from religious/spiritual traditions are encouraged to recognize that it is outside their role and expertise to adjudicate empirical scientific issues in psychology, while also recognizing they can appropriately speak to theological implications of psychological science (APA, 2008b);

WHEREAS The American Psychological Association encourages collaborative activities in pursuit of shared prosocial goals between psychologists and religious communities when such collaboration can be done in a mutually respectful manner that is consistent with psychologists’ professional and scientific roles (APA, 2008b);

WHEREAS Societal ignorance and prejudice about a same-sex sexual orientation places some sexual minorities at risk for seeking sexual orientation change due to personal, family, or religious conflicts, or lack of information (Beckstead & Morrow, 2004; Haldeman, 1994; Ponticelli, 1999; Shidlo & Schroeder, 2002; Wolkomir, 2001);

WHEREAS Some mental health professionals advocate treatments based on the premise that homosexuality is a mental disorder (e.g., Nicolosi, 1991; Soconides, 1968);

WHEREAS Sexual minority children and youth are especially vulnerable populations with unique developmental tasks (Perrin, 2002; Ryan & Futterman, 1997), who lack adequate legal protection from involuntary or coercive treatment (Arriola, 1998; Burack & Josephson, 2005; Molnar, 1997) and whose parents and guardians need accurate information to make informed decisions regarding their development and well-being (Cianciotto & Cahill, 2006; Ryan & Futterman, 1997); and

WHEREAS Research has shown that family rejection is a predictor of negative outcomes (Remafedi, Farrow, & Deisher, 1991; Ryan, Huebner, Diaz, & Sanchez, 2009; Savin-Williams, 1994; Wilber, Ryan, & Marksamer, 2006) and that parental acceptance and school support are protective factors (D’Augelli, 2003; D’Augelli, Hershberger & Pilkington, 1998; Goodenow, Szalacha, & Westheimer, 2006; Savin-Williams, 1989) for sexual minority youth;
THEREFORE BE IT RESOLVED That the American Psychological Association affirms that same-sex sexual and romantic attractions, feelings, and behaviors are normal and positive variations of human sexuality regardless of sexual orientation identity;

BE IT FURTHER RESOLVED That the American Psychological Association reaffirms its position that homosexuality per se is not a mental disorder and opposes portrayals of sexual minority youths and adults as mentally ill due to their sexual orientation;

BE IT FURTHER RESOLVED That the American Psychological Association concludes that there is insufficient evidence to support the use of psychological interventions to change sexual orientation;

BE IT FURTHER RESOLVED That the American Psychological Association encourages mental health professionals to avoid misrepresenting the efficacy of sexual orientation change efforts by promoting or promising change in sexual orientation when providing assistance to individuals distressed by their own or others’ sexual orientation;

BE IT FURTHER RESOLVED That the American Psychological Association concludes that the benefits reported by participants in sexual orientation change efforts can be gained through approaches that do not attempt to change sexual orientation;

BE IT FURTHER RESOLVED That the American Psychological Association concludes that the emerging knowledge on affirmative multiculturally competent treatment provides a foundation for an appropriate evidence-based practice with children, adolescents and adults who are distressed by or seek to change their sexual orientation (Bartoli & Gillem, 2008; Brown, 2006; Martell, Safren & Prince, 2004; Ryan & Futterman, 1997; Norcross, 2002);

BE IT FURTHER RESOLVED That the American Psychological Association advises parents, guardians, young people, and their families to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support and educational services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority youth;

BE IT FURTHER RESOLVED That the American Psychological Association encourages practitioners to consider the ethical concerns outlined in the 1997 APA Resolution on Appropriate Therapeutic Response to Sexual Orientation (American Psychological Association, 1998), in particular the following standards and principles: scientific bases for professional judgments, benefit and harm, justice, and respect for people’s rights and dignity;

BE IT FURTHER RESOLVED That the American Psychological Association encourages practitioners to be aware that age, gender, gender identity, race, ethnicity, culture, national origin, religion, disability, language, and socioeconomic status may interact with sexual stigma, and contribute to variations in sexual orientation identity development, expression, and experience;

BE IT FURTHER RESOLVED That the American Psychological Association opposes the distortion and selective use of scientific data about homosexuality by individuals and organizations seeking to influence public policy and public opinion and will take a leadership role in responding to such distortions;

BE IT FURTHER RESOLVED That the American Psychological Association supports the dissemination of accurate scientific and professional information about sexual orientation in order to counteract bias that is based in lack of knowledge about sexual orientation; and

BE IT FURTHER RESOLVED That the American Psychological Association encourages advocacy groups, elected officials, mental health professionals, policy makers, religious professionals and organizations, and other organizations to seek areas of collaboration that may promote the wellbeing of sexual minorities.
References


D.(30) Council voted to adopt the following resolution as APA policy:

**Resolution on Families of Incarcerated Offenders**

WHEREAS in 2005, nearly 2.2 million Americans, or 1 in every 136 U.S. residents, were incarcerated in state or federal prisons or local jails (Harrison & Beck, 2006);

WHEREAS at the end of 2004, over 4.9 million adult men and women were under federal, state, or local probation or parole jurisdiction (Glaze & Palla, 2005);

WHEREAS, nearly 6 in 10 persons in local jails were ethnic or racial minorities (Harrison & Beck, 2006) and, at the end of 2004, 60% of state and federal prisoners were black or Hispanic (Harrison & Beck, 2005);
WHEREAS more than half (54%) of federal prisoners are serving time for a drug offense, but only 11% are incarcerated for a violent offense (The Sentencing Project, 2006);

WHEREAS changes in policies related to drug arrests contributed to an 888% increase between 1986 and 1995 in the number of women incarcerated for drug offenses (Mauer, Potter, & Wolf, 1999) and a 114% increase from 1990 to 2001 in the number of women incarcerated overall (Lee, Genty, & Laver, 2005);

WHEREAS 64% of mothers in state prisons and 84% in federal prisons were living with their children at the time of their admission to prison; in contrast, only half of incarcerated fathers were living with their children at the time of their incarceration (44% for state and 55% for federal prison) (Parke & Clarke-Stewart, 2002);

WHEREAS research suggests that offenders and their families face complex and often severe psychological, medical, educational, economic, social, and spiritual challenges (Lewis, Shanok, & Balla, 1979, Seymour, 1998);

WHEREAS on June 30, 2005, the majority of all jail and prison inmates had a mental health problem and female inmates had higher rates of mental health problems than male inmates (James & Glaze, 2006; Abram, Teplin, &McClelland, 2003; Lamb & Weinberger, 1998);

WHEREAS the high rate of incarceration in the U.S. has been devastating socially and economically to children, their families, and communities (Family Strengthening Policy Center, 2005);

WHEREAS more than 2 million children had a parent behind bars in 2004, and approximately 10 million, or 1 in 8 of America’s children had experienced parental incarceration at some point in their lives (Bernstein, 2004);

WHEREAS when parents are incarcerated, the care giving arrangements for children frequently are disrupted, and mothers, grandparents, aunts, uncles, and foster parents often must raise children often without much financial or social support (Travis, 2005);

WHEREAS when a father is incarcerated, children and their mothers may suffer economically from the loss of financial support (Travis, McBride, & Solomon, 2005);

WHEREAS when a mother is incarcerated, children are most likely to live with their grandparents (Travis, McBride, & Solomon, 2005);

WHEREAS research has shown that grandparents caring for their grandchildren often experience mental health problems, such as anxiety, depression, and low life satisfaction (Gerard, Landry-Meyer, & Roe (2006);

WHEREAS children with incarcerated mothers and fathers are at very high risk of a variety of emotional and behavioral problems because of the stress of separation from their parent, stigma associated with having an imprisoned parent, loss of emotional support, fear for their parent’s safety, and uncertainty or confusion about what has happened to their parent (Seymour, 1998);

WHEREAS it has been estimated that as much as 70% of young children (ages 2 to 6 years old) with a mother incarcerated have displayed symptoms that research suggests are associated with insecure attachments, including internalizing problems such as anxiety, withdrawal, hyper vigilance, depression, shame and guilt, and externalizing behaviors such as anger, aggression, and hostility toward caregivers and siblings (Baunach, 1985; Johnson, 1995; Parke & Clarke-Steward, 2003);

Families are defined broadly to include diverse family structures, including grandparents raising grandchildren and same-gender couples and their children.
WHEREAS children with incarcerated parents are six times more likely than their peers to become criminally involved and incarcerated during their lives (Bilchik, Seymour, & Kreisher, 2001);

WHEREAS families of inmates typically receive few services, and they often lack even basic support and information as they deal with the offender's prosecution, punishment, and reentry (Travis, Solomon, & Waul, 2001);

WHEREAS some families of inmates have been doubly victimized – by the offender himself or herself and unintentionally by the system that fails to provide them with adequate support (Travis, Solomon, & Waul, 2001);

WHEREAS research indicates that policies and practices, including prison visitation policies, often make maintenance of relationships difficult when a family member is incarcerated, and that the lack of support to families of offenders can weaken family ties and make family reunification even more difficult when the offender is released (Travis, 2005);

WHEREAS nearly 95% of offenders in state prisons will eventually be released (Hughes & Wilson, 2004) without support, most will face multiple barriers to successful reintegration, including difficulty in accessing health, mental health, and drug and alcohol treatment services (Travis, 2005);

WHEREAS federal initiatives to facilitate offender reentry are underemphasizing the needs and contributions of family members despite research that documents the importance of the family in the reentry process (Travis, Solomon, & Waul, 2001);

WHEREAS all of these issues apply as well to families of juveniles in the juvenile and criminal justice systems (some of whom are parents themselves) and the juveniles themselves;

WHEREAS psychologists can and should contribute significantly to advancing the state of knowledge regarding families of offenders, including their children; and

WHEREAS the American Psychological Association is committed to promoting the health and well-being of children, youth, and families,

THEREFORE, BE IT RESOLVED that the American Psychological Association urges:

(a) the National Institute of Mental Health, the National Institute of Drug Abuse, the National Institute of Alcohol Abuse and Alcoholism, the National Institute for Child Health and Human Development, Centers for Medicaid and Medicare Services, the Health Resources and Services Administration and the National Institute of Corrections to support research (i) to illuminate the experiences of children of offenders and their families, (ii) to identify the needs, resilience, and protective factors that reduce the involvement of offenders and their children in drugs or criminal activity and (iii) to develop and evaluate models of emotional, social, and economic support for such families;

(b) the Center for Mental Health Services, state mental health agencies, and community mental health centers to place a high priority on the development of services for families of defendants and offenders that not only address the families' needs but that also mobilize resilience and protective factors in prevention programs;

(c) state and federal courts to strive to ensure that services are available for (i) education of families of defendants about the legal process and (ii) minimization of psychological, social, and economic harm to innocent family members;

(d) social service and health agencies to provide appropriate educational, physical, and mental health services for children of incarcerated parents and their family members,
(e) the U.S. Department of Education and state educational agencies to develop training and other services to strengthen the ability of teachers, counselors, and other school professionals to identify and support children with incarcerated parents and their families;

(f) the relevant federal agencies to develop training programs, including internships, postdoctoral, and continuing education, to increase mental health and social service professionals’ capacity to work effectively with families of offenders;

(g) psychologists and other mental health professionals working in the juvenile and criminal justice system to strive to ensure that attention is given to the needs and potential contributions of offender’s family members.

(h) psychologists and other mental health and social services professionals to provide services to incarcerated parents to strengthen their parenting and employment skills and to assist them as they leave prison and reenter their families and communities.

References


E.(31) Council voted to adopt the following resolution as APA policy:

**APA Resolution on Emancipating and Assisting Victims of Human Trafficking (May 2009)**

WHEREAS human trafficking has become more widespread in recent years and there are an estimated 12 million affected persons worldwide (although estimates vary from 4 to 27 million; United States Department of State, 2008);

WHEREAS the number of trafficked persons living in the United States is hard to determine, but the Government Accounting Office (2006) estimates that between 14,000 and 17,000 persons are trafficked into the United States every year, and Americans may also financially support human trafficking if they purchase goods made from exploited labor or participate in sex trade tourism;

WHEREAS trafficking can take many forms including labor in factories, farms, or homes, but most of the transnational trafficked persons are forced into prostitution (United States Department of State, 2008);

WHEREAS women (Bryant-Davis, Tillman, Marks, & Smith, 2009) and children (van de Glind & Kooijman, 2008) are disproportionately subjected to trafficking;

WHEREAS human trafficking often involves organized criminal activity (Government Accounting Office, 2006);

WHEREAS, despite gaps in the research literature, trafficked persons who have experienced torture and psychological abuse often require access to human services and treatment of psychological and physical disorders in order to establish the capacity to lead normal lives (Zimmerman et al., 2008);

WHEREAS there is an urgent need to explore the social causes of trafficking, to collect data, and to conduct more research, despite the enormous logistical problems involved in conducting such research;

WHEREAS trafficking violates rudimentary human rights and offends our most cherished values;

WHEREAS the American Psychological Association has taken positions promoting self-determination and dignity for all persons including endorsing rights for women and children, human rights, rights of immigrant workers, and opposition to racism, torture, and to other cruel, inhuman, and degrading treatment and punishment;

BE IT THEREFORE RESOLVED that the American Psychological Association:

Commits itself to promoting public awareness of the presence of human trafficking consistent with its mission;

Commends individuals, nongovernmental organizations, and governments that are working to
create public awareness of human trafficking, to prevent human trafficking and to emancipate trafficked persons, and to assist them in obtaining human services and health care including attention to their psychological needs;

Urges funded research on the social and cultural underpinnings of human trafficking, ways to assist trafficked persons, and research into psychological treatments and educational needs for trafficked persons, consist with their unique circumstances; and

Urges the United States government, state and local governments, foreign governments, and international non-governmental organizations to work assiduously to end human trafficking and to assist its victims.

References


G.(39) Council received an update on the business pending item “APA Resolution to Promote Well-Being and Alleviate Psychological Risk Factors for Immigrants.”

H.(40) Council received an update on the business pending item “Value Neutral Language for End-of-Life Choices.”

XIII. ETHNIC MINORITY AFFAIRS

A.(46) Council received a detailed report of the activities and programs of the CEMRRAT2 Task Force from July 1, 2008 to June 30, 2009.

XIV. INTERNATIONAL AFFAIRS

No items.

XV. CENTRAL OFFICE

No Items.

XVI. FINANCIAL AFFAIRS

A.(33) Council voted to approve the listing of items requiring governance consideration as proposed for 2009 and 2010 as follows:

<table>
<thead>
<tr>
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<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Improvements/Cuts</td>
<td>$70,800</td>
<td>$148,800</td>
</tr>
<tr>
<td>Prior Improvements/Cuts Carried Forward to 2010</td>
<td></td>
<td>$1,346,000</td>
</tr>
</tbody>
</table>
The above actions will be incorporated into the 2010 Budget that will be developed this fall and presented to the Council in February 2010.

William H. Macey, PhD, recused himself from voting on this item.

B.(34) On the recommendation of the Finance Committee and Board, in recognition of the difficult economic climate facing our members, Council voted to approve a one-year suspension for the 2010 dues year of increasing the APA base member dues and the graduate student/teacher affiliate fees by the annual change in CPI.

Council also voted to approve the 2010 revenue projections of $111 million, noting that these revenues will serve as the general framework for the 2010 Budget that will be developed during the fall of 2009 and presented to Council for approval in February of 2010.

C.(47) Council received as information the draft minutes of the June 5 & 6, 2009 Finance Committee Meeting.

D.(48) Council received as information the Argy, Wiltse & Robinson, P.C. 2008 Audited-Related Reports.

On Wednesday morning, Presidential Citations were presented to Randy Phelps, PhD, Kenneth J. Sher, PhD, and Janet K. Swim, PhD.

On Sunday morning, the 2008 Raymond D. Fowler Award – Member – was presented to Ronald E. Fox, PhD, and a Presidential Citation was presented to Ludy T. Benjamin, Jr., PhD.

On Sunday morning, Council paid tribute to the late Jacquelin Goldman, PhD, who had made a gift in her estate to the American Psychological Foundation, of approximately $2 million.
Oversight of APA Leadership and Participation in the International Network On Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology

Issue

The Board for the Advancement of Psychology in the Public Interest (BAPPI), CIRP, CLGBTC, the Society for the Psychological Study of Lesbian, Gay, Bisexual, and Transgender Issues (Division 44), and the Division of International Psychology (Division 52) are asked to receive a report on APA’s participation in the International Network from their representatives to the Oversight Group: Kristin A. Hancock, BAPPI; Jeanne Maracek (past), CIRP; Alicia Lucksted (past), CLGBTC; Peter Goldblum, Division 44; and Mercedes McCormick, Division 52.

The Committee on International Relations in Psychology (CIRP) and the Committee on Lesbian, Gay, Bisexual, and Transgender Concerns (CLGBTC) have each been asked to appoint representative to the International Oversight Group, which oversees APA’s participation in the International Network on Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology and the APA Representatives to the International Network, who are currently Armand Cerbone and Maria Cecilia Zea.

The oversight group meets quarterly. The most recent meetings were on April 21 and December 1, 2009 (Exhibits 1 & 2). The International Network on Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology meets bi-monthly by teleconference: The most recent meetings were March 16, November 14, and December 15, 2009 (Exhibits 3-5). A Network meeting is planned for February 25. Information from that meeting will be made available to the Committee during its meeting.

Report on the International Network. The establishment of an international network was one of the objectives of the 2001 international meeting Sexual Orientation and Mental Health: Toward Global Perspectives on Practice and Policy: An International Meeting on Lesbian, Gay, and Bisexual Concerns in Psychology. The meeting was initiated in 1998 by then APA Board of Directors member Catherine Acuff and carried through to completion by APA after her unexpected death in 2000. APA was represented in the Meeting Executive Committee by Armand Cerbone and Kristin Hancock. Staff and budgetary support for the Conference was provided by the Lesbian, Gay, and Bisexual Concerns Office, with the assistance of other APA offices, such as the Convention Office, the Office of International Affairs, and Editorial and Design Services. Funding was provided by the Gamma Mu Foundation, the HIVOS Foundation, and the APA Board of Directors Discretionary Fund.

When the final report of the International Meeting was completed, Drs. Cerbone and Hancock initiated consideration of the Network by APA governance. This consideration, in which BAPPI, CIRP, CLGBTC, Division 44 and Division 52 participated, culminated in June 2004 when the Board of Directors authorized APA’s participation in the network, established an oversight group composed of representatives from BAPPI, CIRP, CLGBTC, Division 44, and Division 52, and directed the oversight group to nominate two APA members for the APA President to appoint to represent the Association in the Network.

The Oversight Group began meeting in quarterly telephone calls in fall 2004, adopted operating procedures (exhibit 6), a job description for the APA Network Representatives (Exhibit 7), and nominated APA Network Representatives to the APA President for appointment in April 2005. The current membership of the Oversight Group is as follows:
The APA representatives to the International Network are Armand R. Cerbone, PhD (2005-2007; 2008-2010), and Maria Cecilia Zea, PhD (2010-2012).

The International Network began meeting in monthly conference calls in May 2005 and changed to bimonthly calls in 2008.

The International Network adopted the following mission statement in 2006.

The International Network for Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology is composed of national, multinational, and international psychological associations that are cooperating to achieve the following aims:

(1) To increase cross-cultural collaboration among psychological researchers and practitioners who are concerned about the mental health and well-being of lesbian, gay, bisexual, and transgender populations;

(2) To increase knowledge among psychologists and other mental health practitioners about lesbian, gay, bisexual, and transgender populations;

(3) To apply psychological research and mental health practice guidelines that address the needs and concerns of lesbian, gay, bisexual, and transgender populations to international health policy;

(4) To increase the number of national, multinational, and international psychological associations that formally reject the mental disorder conception of homosexuality and that promote mental health practice that is affirmative of gay, lesbian, bisexual, and transgender people.

The members of the International Network are listed below.

American Psychological Association  
Association of Lesbian, Gay, and Bisexual Psychologies Europe  
Australian Psychological Society  
British Psychological Society Lesbian & Gay Psychology Section  
Canadian Psychological Association  
Colombian Society of Psychology  
Conselho Federal de Psicologia (Brazil)  
Nederlands Institute van Psychologen  
Psychological Society of South Africa  
Psychological Society of Ireland

The International Network has identified two areas of programmatic activities: (1) promoting greater participation and programming in the major international psychological meetings; (2) international policy advocacy.

Promoting Greater Participation And Programming In The Major International Psychological Meetings The Network has participated in the 2007 and 2009 Inter-American Congresses of Psychology (SIP) in Mexico City and Guatemala City, and the 2008 International Congress of Psychology (ICP) in Berlin. The Network was successful in its request that the 2009 11th European Congress of Psychology add lesbian, gay, bisexual, transgender concerns as an index term for abstract submissions.
The Network is working to support the Australian Psychological Society’s representative, Damien Riggs, in coordinating the development of programming for the 2010 International Congress of Applied Psychology (ICAP), which will be in Melbourne. The Network submitted to the ICAP a Panel Discussion proposal titled *Going Global with Lesbian, Gay, Bisexual and Transgender Issues: How Psychology Can Contribute*. The panel will consider psychology’s potential role in research, clinical practice and application initiatives in a global context of rapidly increasing attention to LGBT issues, both positive and negative, particularly as it relates to potential impacts on organizational and state policy. Examples will be considered based on experiences of Network member representatives. Participants will include Merry Bullock, who will focus on organized international psychology and intersections of interests, challenges and opportunities for the International Network in her capacities as Deputy Secretary-General for the International Union of Psychological Science and associate editor of the International Journal of Psychology; Armand Cerbone, who will represent the APA and its involvement in the International Network; Damien Riggs, who will offer a case example of the APS’s involvement in the International Network; and Clinton Anderson who will provide an overview of the policy environment in which the efforts of the International Network operate.

Dr. Riggs has developed plans for a day of activities focusing on LGBT issues during the ICAP. The activities include a Workshop on Mental Health Practice with LGBT people (3 hours, convened by Tania Israel); the APS Gay & Lesbian Issues in Psychology Interest Group’s annual meeting; a Symposium on Parenting; the International Network Roundtable; and a Social Function.

The Network is also working to support the Psychological Society of South Africa’s representatives, Juan Nel and Carien Lubbe, in coordinating the development of programming for the 2012 International Congress of Psychology, which will be in Cape Town. Dr. Nel has reported to the Network that initial conversations are underway for the agenda but there is nothing concrete yet. The Network should be able to have substantial programming. Promotion of the Network’s participation in the 2012 ICP will begin with the 2010 ICAP.

The Network seeks not only to promote programming on LGBT issues in the scientific program of the ICP, but also to leverage the Congress for regional/global Network development by working with existing psychology organizations and their representatives from Africa and elsewhere at the Congress to encourage their involvement in the Network and LGBT issues in psychology and networking with individual psychology professionals, in particular in Africa, to help facilitate organized psychology incorporating LGBT issues.

**International Policy.** Two areas of policy that have been discussed by the Network include advocating for the International Union of Psychological Science (IUPsyS) to adopt a policy on sexual orientation discrimination and making recommendations to the World Health Organization regarding revisions to the homosexuality-related diagnoses in the “mental and behavioural disorders” chapter of the *International Statistical Classification of Diseases and Related Health Problems*. The IUPsyS has initiated an internal policy development process for a non-discrimination policy. It has also communicated clearly to the organizers of the 2012 ICP that the IUPsyS strongly supports full inclusion of LGBT people, programming, and the Network in the congress. In the case of Cape Town, this position seems to be strongly mirrored by the organizers, but the IUPsyS position is important because it will set a precedent that may be more important if future congresses are in nations where the human rights of LGBT people are less accepted than they are in South Africa, which has constitutional protections for human rights of LGBT people. APA has completed its recommendation to the WHO (Exhibit 8). Network members will be asked to consider making similar recommendations to WHO and communicating their positions on the ICD diagnoses to their health ministry, which will ultimately represent their nation’s government in the adoption of the ICD by WHO.

More recently several policy issues and requests have come to the Network’s attention from outside psychology and health care. These issues include the decision by an Indian court to overturn that nation’s sodomy law, the introduction of anti-homosexuality legislation in the Ugandan national legislature, and the denial of certification to an LGBT political party in the Philippines. In all three cases, the Network is developing a standard operational posture of seeking to facilitate psychologists and
psychological organizations in the nation or the region to take action on such issues. In line with this operational policy, APA staff have provided technical assistance to the Psychological Society of South Africa in developing, approving, and disseminating a public statement opposing the proposed Ugandan legislation. Information about the PsySSA action will be provided to the Committee at the meeting.

All members of the Network will be asked to consider endorsing the PsySSA statement and to contact their foreign ministry to ask that their government also raise their concerns about this legislation with the government of Uganda. Because this endorsement by APA is unprecedented, the process by which it might be approved is currently being clarified and the Committee will be informed of the conclusion.

Grantsmanship. Staff has been working to identify potential funders for the International Network. A proposal to the American Psychological Foundation is planned to be submitted by March 15 and a letter of interest has been invited by the Arcus Foundation and is planned to be submitted in the first week of March.

Implementation Plan

To be determined

Fiscal Implications

None

Main Motion

To be determined

Recommendation

None.

Exhibits

8. ICD-10 Revision Proposal Form for Mental and Behavioural Disorders (Chapter V) and Diseases of the Nervous System (Chapter VI).

Clinton W. Anderson, PhD, Associate Executive Director & Director, Lesbian, Gay, Bisexual, & Transgender Concerns Office
Public Interest Directorate
International LGB Activities Oversight Group
Tuesday, April 21, 2009, Conference Call Summary

Oversight Group Members Present: Kristin A. Hancock, PhD, (BAPPI); Maria Cecilia Zea, PhD, (Div 44); Jeanne Marecek, PhD, (CIRP)
Oversight Group Members Absent: Gloria B. Gottsegen, PhD, (Div 52); Alicia A. Lucksted, PhD, (CLGBT); 
Network Representatives Present: Oliva Espin, PhD; Armand R. Cerbone, PhD, ABPP
Staff Present: Clinton W. Anderson, PhD; Charlene DeLong

1. Approved agenda.


3. Nominations for APA members to the Oversight Group. Assume responsibilities before the actual end of the term. Several potential candidates were mentioned. Dr. Espin and Dr. Cerbone agreed to make initial contact with them.

4. Discussed revised mission statement giving Dr. Hancock feedback which will be incorporated and the finalized statement will be voted upon at the next meeting.

5. INET proposal with Div 52 for the next APA convention. Several possible presentations were discussed for forming a program. Dr. Zea will develop a proposal.

6. Update on ICD. Deadline has moved from June to September.

7. Establish next meeting date. July 28 as 12 noon eastern.
**International LGB Activities Oversight Group**

Tuesday, December 1, 2009, 4-5 PM EST

Conference Call Summary

**Oversight Group Members Present:** Kristin A. Hancock, PhD (BAPPI); Maria Cecilia Zea, PhD (Div. 44); Jeanne Marecek, PhD (CIRP)

**Oversight Group Members Absent:** Gloria B Gottsegen, PhD (Div. 52); Alicia A. Lucksted, PhD (CLGBT)

**Network Representatives Present:** Armand R. Cerbone, PhD, ABPP

**Network Representatives Absent:** Oliva Espin, PhD

**Staff Present:** Clinton Anderson, PhD; Merry Bullock, PhD; Ron Schlittler

1. Approved agenda with one addition: Network Update

2. Approved April 21, 2009 Conference Call Summary

3. Staffing Update – Dr. Anderson introduced Mr. Schlittler who provided:
   - An overview of his employment status: temporary, through March; part-time, two days per week through the end of the year and one day per week thereafter;
   - An outline of his key roles:
     - Provide professional support to the International Network on Lesbian, Gay, & Bisexual Concerns and Transgender Issues;
     - Grantmanship to generate funding to support the staffing needs and work of the Network.

4. Nominations for APA member representative to the International Network:
   - The Oversight Group nominated Dr. Zea to be one of the APA’s member representative to the Network for a three-year term from 2010-2012.

5. Discussion of revised mission statement – Dr. Hancock provided a draft revision for the Oversight Committee, which the Group will review at its next meeting.

6. APA convention program proposal to Div. 52
   - The Oversight Group did not submit a proposal for this convention but plans to reconsider for the next;
   - Proposals to Divisions 44 & 52 for their hospitality suite programming are still options. In addition, International Network informational brochures may be distributed in the suites and in the Public Interest and International Affairs office.

7. Network updates
   - Update on ICAP
     - A proposal is being prepared for a Panel Discussion and is tentatively entitled *Going Global with Lesbian, Gay, Bisexual and Transgender Issues: How Psychology Can Contribute*. Confirmed panelists include
Dr. Damien Riggs (Network representative for the Australian Psychological Society), Dr. Bullock and Dr. Anderson. Dr. Cerbone offered to also participate in the panel discussion, if he is able to attend, which he will be able to clarify shortly.

- Dr. Riggs and the APS Special Interest Group have submitted proposals for a full day of LGBT programming. He made a report about this to the International Network representatives on their December conference call and requested help with efforts to publicize the events and promote attendance.
- Efforts are underway to conduct outreach to the larger international human rights network to promote awareness of the International Network. This resulted in almost immediate responses to consider ways the International Network can provide services and make contributions to policy matters. Specific inquiries have come from India and the Philippines.
- Dr. Bullock provided a status report on the International Union of Psychological Science process of developing a policy of non-discrimination on the basis of sexual orientation, which was initiated by the IUPsyS at the request of the United States National Member of IUPsyS, the US National Committee of Psychology, acting at the request of the American Psychological Association. Her report included sharing the following draft minute from the 2009 meeting of the IUPsyS Executive Committee:

1.11 Development of Free Circulation Policy: Response to USNC

The Secretary-General provided the background to correspondence with the US National Member (USNC) Chair, Professor Suzanne Bennett Johnson, concerning including explicit mention of sexual orientation (LGBT) in the free circulation of scientists policy. The action requested from the USNC was for the Union to propose that ICSU include sexual orientation in its free circulation policy. The Secretary-General noted, prior to making this request to ICSU, it would be important that the Union statutes explicitly include this policy. At present the Union policy is merely to adhere to the ICSU policy. The proposed solution is to amend Article 3 of the Union Statutes to clearly articulate the free circulation policy.

Action: The EC will recommend to the Assembly that it modify the statutes as following (new material in bold font):

Article 3. (i) The Union adheres to the International Council for Science (ICSU) and recognizes it as providing a coordinating and representative body for the international organization of science.

(ii) The Union adheres to the ICSU principle of the Universality of Science embodying freedom of movement, association, expression and communication for scientists, as well as equitable access to data, information and research material; and actively upholds this principle, by opposing any discrimination on the basis of such factors as ethnic origin,
religion, citizenship, language, political stance, gender, sex, sexual orientation, or age.

- Dr. Bullock also noted that the IUPsyS had already formally communicated to the organizers of the next International Congress of Psychology (2012) in Cape Town its expectations about the inclusion of substantive content on lesbian, gay, bisexual, and transgender issues in the scientific program and the provision of assistance to members of the International Network on Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology to meet at the Congress.

- Dr Bullock also noted that APA’s United Nations Committee is another key resource for the International Network as it develops programs that relate to the UN.

8. Update on ICD – APA’s work on the development of recommendations to the WHO for the homosexuality-related classifications in the ICD is proceeding and will be completed by the end of the year.

9. Establishing next meeting date: March.
INTERNATIONAL NETWORK ON LESBIAN, GAY, AND BISEXUAL CONCERNS AND TRANSGENDER ISSUES IN PSYCHOLOGY

MARCH 16, 2009 CONFERENCE CALL SUMMARY

Network Member Representatives Participated in the Call:
American Psychological Association (APA)
   Armand R. Cerbone
Australian Psychological Society (APS)
   Dr. Damien Riggs
British Psychological Society Lesbian & Gay Psychology Section (BPS LGPS)
   Roshan das Nair
Canadian Psychological Association (CPA)
   J. Roy Gillis
Psychological Society of Ireland (PSI)
   Maria Dempsey

Network Member Representatives Absent:
American Psychological Association (APA)
   Oliva M. Espin
Association of Lesbian, Gay, and Bisexual Psychologies Europe (ALGBPE)
   Melanie Steffens
Colombian Society of Psychology (CSP)
   Ruben Ardila
Conselho Federal de Psicologia (CFP) (Brazil)
Psychological Society of South Africa (PsySSA)
   Juan Nel

Network Member Staff:
Clinton Anderson, Director and Charlene DeLong, Administrative Coordinator, American Psychological Association, Lesbian, Gay, Bisexual, and Transgender Concerns Office
Merry Bullock, Senior Director, American Psychological Association, International Affairs Office
AGENDA

NETWORK BUSINESS

1. Approve meeting agenda. Approved

2. Approve summary of the January 12, 2009, meeting. Approved

3. Reports from Network Members. Gillis (CPA), Rainbow Health Ontario Across disciplines for LGBT Issues. He will send us a summary

   Riggs (BPS LGPS), New guidelines should be out by the middle of the year.

   Dempsey (PSI), Psychological Society of Ireland will be linking to the APA International Network page

   Cerbone (APA), The oversight group job description is being reworked.

   Anderson (APA) Amicus Brief in FL on gay parent adoption, reworking our guidelines, task force report and resolution will be reviewed by the boards and committees at the March meeting and are planned to go to Council in August.

4. Network work plan and operating procedures: Transition to SKYPE for next call.

5. Schedule next call May 4, 2009 at 8 am EDT

   NETWORK MEMBERSHIP AND OUTREACH

6. Member representative vacancies: Brazilian Conselho, NIP.

7. IUPsyS Newsletter.
8. INET Listserv. Approved Network Welcome Letter

In order to support the maintenance and growth of the international network, the American Psychological Association has provided an electronic forum called INET (the International Network for Lesbian, Gay, And Bisexual Concerns and Gender Identity Issues in Psychology). The forum aims to strengthen global ties among psychologists and mental health workers concerned with same-sex sexual orientation and transgender issues.

The goal of the forum is to advance understanding through the exchange of information and ideas, through the provision of mutual support in professional practice and research, and through the encouragement of collaborative research endeavors.

For more information about the international network, its current activities, and its future plans, contact the Lesbian, Gay, and Bisexual Concerns Office, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242; (202) 336-6041; FAX: (202) 336-6040, INET@apa.org; Http://www.apa.org/pi/lgbc/international.html.

To subscribe to INET, send an e-mail message to INET@LISTS.APA.ORG. Leave the subject line blank. Write SUBSCRIBE [E-MAIL ADDRESS] [FIRST NAME] [LAST NAME] in the body of the message.

9. Coordinated Web Pages. Update on Progress

PARTICIPATION IN INTERNATIONAL MEETINGS

Inter-American Society of Psychology (SIP)

10. Planning re: Guatemala 2009:

European Congress of Psychology

International Congress of Applied Psychology

12. Planning re Melbourne, Australia, 2010: Proposals accepted January – June 2009. Proposals open now until June 30. Individual papers and posters will be accepted later in the year at a second round

International Congress of Psychology


POLICY

14. Policy Committee (Clinton Anderson, Armand Cerbone, APA, Roy Gillis, CPA, Roshan das Nair, BPS LGPS).


INTERNATIONAL NETWORK ON LESBIAN, GAY AND BISEXUAL CONCERNS
AND
TRANSGENDER ISSUES IN PSYCHOLOGY

NOVEMBER 14, 2009 CONFERENCE CALL SUMMARY
8-9 AM, EST

Network Member Representatives Participated in Call:
American Psychological Association (APA)
    Armand R. Cerbone
Association of Lesbian, Gay and Bisexual Psychologies Europe (ALGBPE)
    Melanie Steffens
Columbian Society of Psychology (CPS)
    Ruben Ardila
Canadian Psychological Association (CPA)
    J. Roy Gillis

Network Member Representatives Absent:
American Psychological Association (APA)
    Oliva M. Espin
Australian Psychological Society (APS)
    Dr. Damien Riggs
British Psychological Society Lesbian & Gay Psychology Section (BPS LGPS)
    Roshan das Nair
Conselho Federal de Psicologia (CFP) (Brazil)
    Paulo Roberto Ceccrelli
Nederlands Instituut van Psychologen (NIP)
Psychological Society of Ireland (PSI)
    Claire Cullen
Psychological Society of South Africa (PsySSA)
    Carien Lubbe
    Juan Nel

Network Member Staff Participating:
Clinton Anderson, Director and Ron Schlittler, LGBT Concerns Officer
    APA LGBT Concerns Office
Merry Bullock, Senior Director
    APA International Affairs Office
AGENDA

1. Introductions; Ironing out usage of Skype; Armand agreed to chair the call; Agenda review
   - Armand expressed appreciation for the changes to agenda substance and format

2. International Congress Updates
   - 27th International Congress of Applied Psychology Proposal
     - Discussed status, focus, format agreeing that:
       ▪ Of key importance topics to include are the research-policy connection, introducing the Network and its goals and work, using examples of network members’ involvement, providing report on IUPsyS policy and initiative process & status
       ▪ A “round table” type format would be most conducive to dialogue with presenters and participants (staff note: ICAP’s “Panel Discussion” format is best match for this)
       ▪ We need to encourage members to promote the session among their attendees
   - International Congress of Psychology Status Check
     - Acknowledged it is on the horizon and that it is time for planning to begin.

3. Ugandan “Anti-Gay” legislative initiative:
   - Discussed possible Network response may be in order for this and similar policy issues as they arise
     - Noted any response in this case would need to be informed and guided by PsySSA representatives
     - Noted providing of relevant research is a usual response
     - Noted this is indicative of a larger policy backlash to increasing standing of the LGBT issues and concerns in international human rights fora, and that this larger context deserves further discussion and consideration for possible protocols and response options

4. Grantsmanship
   - Agreed that garnering funding support would make critical work possible and that this is what the Network is for and what members are committed to it
   - Noted it will be critical to the process to clarify member organizations’ commitments to being part of the overall Network support plan
   - Ron provided examples of what baseline information is needed to proceed with potential foundations and any other potential funders
     - Assessing member organizations’ capacity for commitments of supporting the work of the Network (i.e.: assisting their own representatives with conference participation support to more substantial commitments)
     - Assessing member organizations’ LGBT policy status and where any in place can be accessed for review
Assessing member organizations’ LGBT initiatives
Assessing member organizations’ representative’s professional networks in countries with psychological associations that may be good prospects for Network membership
Funding source ideas

• Agreed that Ron can create a list of these and related questions for circulation and answering by Network representatives
• Discussed topics for grant funding
  o How the Network can take a lead in being a resource, a voice of the profession, assess research agenda needs as they relate to policy questions and challenges
  o Increase capacity of national member organizations to deal with LGBT issues and concerns
  o To raise awareness among membership of member organizations
  o To provide resources in languages other than English, and specifically to non-western countries

5. Updates, Announcements, Next Meeting
• Roy shared that he has made tenure
• Roy spoke about an online journal he edits, and plans to focus an issue on international LGBT issues within the next year. Discussed use of INET to solicit contributions; hopes of publishing in a book edition.
  o Agreed that is appropriate use of INET
  o Agreed summaries of Network Representatives calls also should post to INET (after approval of the Network Reps at following meeting)
• Melanie shared that:
  o Germany now has an out gay man as Secretary of State
  o The German ALGP Section who had a existential crisis has a new home page and has met again; and the home page is used for activist issues with little work and big effects, for instance, we compile a list of clinical training institutes who include LGBT issues in their training, and all major institutes are asked whether they want to be on the list, prompting them to consider the issue
  o A symposium at a clinical psychology conference at the University of Marburg was on “Conversion Therapy”; this triggered much activism which was well-covered in by the media, including statements by the German ALGP
• Agreed that monthly calls would be best.
  o Ron will poll for best dates/times in December.

INTERNATIONAL NETWORK ON LESBIAN, GAY AND BISEXUAL CONCERNS AND TRANSGENDER ISSUES IN PSYCHOLOGY
DECEMBER 15, 2009 CONFERENCE CALL SUMMARY
9-10 AM, EST

Network Member Representatives Participated in Call:
American Psychological Association (APA)
    Armand R. Cerbone
    Oliva M. Espin
Columbian Society of Psychology (CPS)
    Ruben Ardila
Psychological Society of South Africa (PsySSA)
    Juan Nel

Network Member Representatives Absent:
Association of Lesbian, Gay and Bisexual Psychologies Europe (ALGBPE)
    Melanie Steffens
Australian Psychological Society (APS)
    Dr. Damien Riggs
British Psychological Society Lesbian & Gay Psychology Section (BPS LGPS)
    Roshan das Nair
Canadian Psychological Association (CPA)
    J. Roy Gillis
Conselho Federal de Psicologia (CFP) (Brazil)
    Paulo Roberto Ceccrelli
Nederlands Instituut van Psychologen (NIP)
Psychological Society of Ireland (PSI)
    Claire Cullen
Psychological Society of South Africa (PsySSA)
    Carien Lubbe

Network Member Staff Participating:
Clinton Anderson, Director and Ron Schlittler, LGBT Concerns Officer
    APA LGBT Concerns Office
Merry Bullock, Senior Director
    APA International Affairs Office
1. Approved Agenda

2. Approved Summary of 11/2009 meeting

3. International Congress of Applied Psychology (ICAP) in Melbourne, Australia
   - Panel Discussion Proposal
     - The Network approved the Panel Discussion proposal titled *Going Global with Lesbian, Gay, Bisexual and Transgender Issues: How Psychology Can Contribute*
     - The panel will consider psychology’s potential role in research, clinical practice and application initiatives in a global context of rapidly increasing attention to LGBT issues, both positive and negative, particularly as it relates to potential impacts on organizational and state policy. Examples will be considered based on experiences of Network member representatives.
     - Participants will include (with particulars of presentation organization yet to be determined):
       - Dr. Bullock, to discuss organized international psychology and intersections of interests, challenges and opportunities for the International Network in her capacities as Deputy Secretary-General for the International Union of Psychological Science and associate editor of the International Journal of Psychology;
       - Dr. Cerbone, to represent the APA discussing its involvement in the International Network and in his capacities as Chair for the Network;
       - Dr. Riggs, to offer a case example of the APS’s involvement in the International Network;
       - Dr. Anderson, to provide an overview of the policy environment in which the efforts of the International Network operate.
     - The Network received a report from Dr. Riggs on the day of activities focusing on LGBT issues that is being planned:
       - Workshop on Mental Health Practice with LGBT people (3 hours, convened by Tania Israel)
       - The Gay & Lesbian Issues in Psychology (GLIP) Interest Group’s annual meeting
       - Lunch
       - Symposium on Parenting
       - International Network Roundtable
       - Social Function
4. 2012 International Congress of Psychology (ICP), Cape Town, South Africa
   • The Network received a report from Dr. Nel including:
     o Initial conversations are underway for the agenda but there is nothing concrete yet,
     o The Network should be able to have substantial programming
   • The Network considered the timetable for publicizing and promoting LGBT programming and the Network’s involvement and decided:
     o Revise the Network’s brochure with content finalized by early June with the message being a call for ideas for programming for the ICP
     o APA will produce the brochure
     o Dr. Nel’s office will assist
   • The Network decided to leverage the Congress for regional/global Network development by:
     o Working with existing psychology organizations and their representatives from Africa and elsewhere at the Congress to encourage their involvement in the Network and LGBT issues in psychology
     o Networking with individual psychology professionals, in particular in Africa, to help facilitate organized psychology incorporating LGBT issues
     o Dr Nel’s office will take the lead

5. Uganda’s “Anti-Homosexuality Bill 2009”
   • The Network discussed the Ugandan legislative developments and response options.
   • Decided the initial plan will be to work through the PsySSA to develop a response.

6. Network outreach response update
   • India: Concerning the request from local activists for the Network to provide a statement to the court should an appeal of the Dehli Supreme Court’s decriminalizing of homosexuality be filed, the Network decided:
     o Dr. das Nair will pursue networking opportunities in India and outreach to the Indian Association of Clinical Psychologists (IACP), of which he is a member should this matter move forward.
   • Philippines: Mr. Schlittler is providing informational support to two psychologists there concerning:
     o Network involvement in responding to a decision by the Commission on Elections to deny Ang Ladlad (a Philippine LGBT political party) accreditation to run under the party-list system, citing that the group advocates "immorality" and that homosexuals are a "threat to the youth."
     o Approaching the two major psychological associations there about membership in the International Network

7. Grantsmanship – leads/needs:
• Dr. Anderson and Mr. Schlittler will approach The Johnson Family Foundation as a potential source for support
• The report called Global Gaze about international LGBT funding by the organization, Funders for Lesbian and Gay Issues is being audited for possible leads, including for regional funding opportunities
• A survey is being developed for Network Representatives to complete that will provide important baseline information on capacities, needs and resources of member organizations, their home countries, and global regions. The survey will hopefully be ready to send out by late in January.

7. Updates, Announcements, Next Meeting
• Dr. Cerbone reported that Dr. Maria Cecilia Zea has been nominated by the APA LGBT International Activities Oversight Group to be APA’s representative for the position being vacated by Dr. Oliva Espin when her term expires at the end of 2009. Dr. Zea’s nomination has been forwarded to the President of the APA, James H. Bray, PhD for official appointment.
• Dr. Espin announced that she will be in Austria for six months as a Fulbright lecturer
• Call participants agreed that the next meeting should be in February.
In June 2004, the American Psychological Association (APA) Board of Directors authorized APA to pursue the goals and recommendations in the final report of the international meeting *Sexual Orientation and Mental Health: Toward Global Perspectives on Practice and Policy* by working with other national and international psychological organizations to establish and maintain an international network for lesbian, gay, and bisexual concerns and gender identity issues in psychology. Although the initial framework for the network was the meeting final report, the network will develop activities that extend beyond that framework, with the approval of its constituent groups.

To oversee this activity, the Board established an oversight group composed of representatives appointed by and from the Board for the Advancement of Psychology in the Public Interest, the Committee on International Relations in Psychology, the Committee on Lesbian, Gay, and Bisexual Concerns, the Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44), and the Division of International Psychology (Division 52). Further, the Board directed the oversight group to nominate for appointment by the APA President two APA members to represent the Association in the international network.

The Oversight Group has adopted the following operating procedures:

- The members of the Oversight Group will serve one-year terms;
- The APA will provide the Oversight Group with a listserv.
- Members of the Oversight Group will communicate to the groups they represent about its activities.
- The Oversight Group will communicate with the APA Board of Directors as needed and approved by its parent groups.
- The Oversight Group may initiate actions within the APA governance system through its parent groups.
- Staff will provide liaison with Office of International Affairs and the APA staff international coordinating group.
- The Oversight Group will meet by conference call on a quarterly basis.
- Their parent board may reappoint members of the Oversight Group.
- The two APA Network Representatives will be co-chairs of the APA International Lesbian, Gay, and Bisexual Concerns Oversight Group.
- The Oversight Group will solicit nominations for Network Representatives beginning early in the year in which a term will end.
- The Oversight Group will decide its nominee at its final meeting of the year and then submit the nominee to the current APA President.
American Psychological Association  
Representatives

International Network for Lesbian, Gay, and Bisexual Concerns  
and Transgender Issues in Psychology

Job Description

[The Oversight Group approved the following job description for the APA Network  
Representatives on January 18, 2005.]

The APA President will appoint the Network Representatives for three-year terms from  
nominations provided by the International Lesbian, Gay, and Bisexual Concerns  
Activities Oversight Group, except that of the first appointments one will be for a two- 
year term in order to establish a staggered rotation to increase continuity.

Job Description

1. Represent APA in International Network Executive Committee. Because the  
   Board of Directors authorized APA to play a leadership role in the network, the  
   APA representatives will be expected to actively lead in the development and  
   maintenance of the network. Because the network is in the early stages of  
   development, the APA representatives will need to provide considerable  
   organizational expertise and experience. The work will involve collaborating  
   with other members of APA governance as well as other international  
   organizations and their representatives.

2. Communicate quarterly with oversight group by conference call.

3. Make recommendations to oversight group for APA governance action.
ICD-10 Revision Proposal Form
for Mental and Behavioural Disorders (Chapter V)
and Diseases of the Nervous System (Chapter VI)

Complete this form for each change that you are proposing. Most proposals should affect a specific code or block of codes. If the proposal affects multiple codes in different groups or blocks, the same description, rationale and evidence does not apply to all. Otherwise, they should be submitted as separate proposals.

1. Name of person making the proposal: Clinton W. Anderson, PhD

2. E-mail address: canderson@apa.org

3. Please check the option below that best describes on whose behalf this proposal is being submitted:
   _____ This proposal represents my personal recommendation (e.g., based on personal expertise, informal consultation with colleagues, review of literature).
   _____ This proposal represents the recommendation of a group (e.g., a WHO working group).
   Specify group: ____________________________________________________
   __X__ This proposal represents the recommendation of an organization external to WHO.
   Specify organization: The American Psychological Association, 750 First Street, NE, Washington, D.C., USA, is the largest scientific and professional organization representing psychology in the United States and is the world's largest association of psychologists. APA's membership includes more than 150,000 researchers, educators, clinicians, consultants and students. Through its divisions in 54 subfields of psychology and affiliations with 60 state, territorial and Canadian provincial associations, APA works to advance psychology as a science, as a profession and as a means of promoting health, education and human welfare.
   _____ Other:
   Specify: _________________________________________________________

3. Indicate the primary code, block, or chapter from ICD-10 that is the subject of your proposal, using the highest applicable level of coding. For example, if your proposal concerns the entire chapter on mental and behavioural disorders, write 'F'. If your proposal concerns only Spasmodic torticollis, write 'G24.3'.
   _F66.0 – F66.9

Category name:
Psychological and behavioural disorders associated with sexual development and orientation

4. Which of the following best describes the proposal? (Check more than one if needed.)
   _____ Addition of new code(s)
   _____ Moving code(s) to a different grouping, block, or chapter
   __X__ Deletion of code(s)
   _____ Reorganization of groupings, or blocks within a chapter
4. How do you want to update the code(s)?
   _____ Changing the name of code(s), without changing disorder concept, definition, or criteria
   _____ Other: Specify: __________________________

   _____ Making substantive changes in the conceptualization, definition, or criteria for code(s), whether or not a new name is proposed

5. What is the main purpose of the proposal? (Check more than one option if they are equally important.)
   _____ To identify a new disease entity
   _____ To better reflect current scientific knowledge
   _____ To better reflect current practice
   _____ To improve clinical utility/usefulness of ICD
   _____ To reflect changes in the social understanding or view of diseases or disorders (e.g., removal of stigmatizing terms)
   _____ To improve compatibility within WHO Family of International Classifications
6. Please provide a specific description of the proposal, in no more than 100 words. That is, what is the specific change that is being proposed? Please do not include the evidence for the proposal here.

The American Psychological Association proposes that the F66 diagnoses be removed in their entirety. To the extent that an individual may be experiencing difficulties in adjustment relating to the concepts addressed in these diagnoses, alternative diagnoses currently exist that appropriately and accurately define these difficulties (e.g., Adjustment Disorders).

7. Summarize the evidence in support of your proposal (200 words maximum). Evidence may include scientific findings, expert consensus, and evidence related to use or practice, e.g., evidence of improved utility.

Since ICD-9, positive changes have occurred in the perceptions and legal status of homosexuality in many societies worldwide. Nevertheless, persons with non-heterosexual sexual orientation identities and/or behavior are still subject to societal stigma and discrimination that harm their health. F66 diagnoses are historically rooted in and support continuing unscientific stigmatization of homosexuality by health professions. Because stigmatization continues, F66 is likely to be used to diagnose homosexuality despite its accompanying caution. Further, use of F66 codes may impede appropriate treatment of underlying disorders (e.g., Major Depression).

No scientifically accepted treatment method has been shown to effectively treat F66 diagnoses. A recent systematic review of the research literature found that insufficient evidence to support sexual orientation change efforts (SOCE) in adults, no evidence that SOCE in children and adolescents affected adult sexual orientation, harm from SOCE, and the benefits that some reported from SOCE were related to non-SOCE aspects of treatment.

Health professionals in nations where the American Psychiatric Association Diagnostic and Statistical Manual is used have operated without ICD F66-like diagnoses for more than 20 years without difficulties emerging. In doing so, they have appropriately used diagnostic codes that reflected the nature of complaints from the standpoint of distressing symptoms.

8. Supporting web links:

   (Please note that a revised version of the guidelines is forthcoming in 2010)


9. Supporting material, including publications (attach files):
Please submit completed form to:
Dr. Geoffrey Reed (Chapter V-- Mental and Behavioural Disorders), reedg@who.int
Dr. Tarun Dua (Chapter VI-- Diseases of the Nervous System), duat@who.int
Proposal for Resolution and Initiative in Support of APA Promotion of Public Health Communication

Issue

BAPPI is being asked to consider a proposal from Council of Representatives member Mary Gregerson, PhD, from Division 10 Society for the Psychology of Aesthetics, Creativity, and the Arts, regarding APA’s promotion of public health communication through various approaches. Specifically, the Board should decide whether the proposed initiative would be appropriate to include on its list of top priorities that will be developed during the strategic planning process.

Although a resolution has been developed, it was not channeled through the standard governance review process since it had not been submitted as a new business item at the February Council.

Multiple members of the APA executive staff have been engaged with Dr. Gregerson over the past month or so and have encouraged her to talk with specific boards and committees about the idea of including this concept as one of their suggestions for future initiatives during the strategic planning session.

Implementation Plan

To be determined

Fiscal Implications

To be determined

Main Motion

That BAPPI consider whether to include the proposal from Dr. Gregerson among its highest ranked priorities during the strategic planning process..

Recommendation

None
Exhibits

1. March 4, 2010 Memo from Mary Gregerson, PhD to Asuncion Miteria Austria, PhD
2. Draft Resolution on Public Health Communication Initiative
3. Public Testimony to US Department of Health and Human Services from Mary Gregerson, PhD

Sue Houston
Public Interest Directorate
Houston, Sue

From: oltowne@aol.com
Sent: Thursday, March 04, 2010 3:34 PM
To: amaustria@stritch.edu
Cc: melvasquez@aol.com; michael.wertheimer@colorado.edu; Houston, Sue; Keita, Gwendolyn
Subject: New Agenda Item for BAPPI
Attachments: WHEREAS to Consolidated Meetings.doc; Online testimony.doc; American Psychological Association Feedback to DHHS Dec 2009.docx.doc

Chair Asuncion Miteria Austria, Ph.D.
BAPPI

Dear Dr. Austria,
APA Staff Member Rhea Farberman has indicated that new agenda items for the BAPPI Mid-Winter meeting in a few weeks should be sent along. Therefore, I am contacting you, BAPPI Chair, directly on this matter.

Please find attached a resolution that would benefit from BAPPI review. This resolution emanates from testimony I was invited to present to the USDHHS in October 2009, and which APA subsequently integrated into the organization testimony to USDHHS in December 2009; both my and APA’s testimony are attached as well. In 2010 over 50 COR members interested in public health communication crafted the attached resolution, and plan to present that resolution for APA COR endorsement at the August 2010 Annual Meeting after responding to such feedback as BAPPI provides.

Via APA Staff Member Maureen O’Brien, another agenda matter will be forwarded to BAPPI early next week that is a request for funding for an initial strategic initiative project. Currently I am finalizing collaborative agreements so that BAPPI may review appropriately the proposal for funding of this innovative project. What type of documentation besides letters of agreement and samples of work would be preferred for the BAPPI review?

Thank you kindly for attending to this matter.

Your sincerely,
Mary Gregerson, PhD
APA Council Representative
Div 10 Society for the Psychology of Aesthetics, Creativity, and the Arts

cc
BOD Melba Vasquez, PhD
BOD Michael Wertheimer, PhD
APA Staff Ms. Sue Houston
APA Staff Gwendolyn Puryear Keita, PhD

3/5/2010
WHEREAS the APA adopted the 2009 strategic plan emphasizing psychology, health, and the public, with new approaches to communication within psychology and with the public emphasize in the following excerpts:

**Goal 1: Maximize Organizational Effectiveness Objectives:**
- Enhance APA programs, services and communications to increase member engagement and value.

**Goal 2: Expand Psychology's Role in Advancing Health Objectives:**
- Advocate for the inclusion of access to psychological services in health-care reform policies.
- Create innovative tools to allow psychologists to enhance their knowledge of health promotion, disease prevention and management of chronic disease.
- Educate other health professionals and the public about psychology's role in health.
- Promote the application of psychological knowledge in diverse health-care settings.
- Promote psychology's role in decreasing health disparities.
- Promote the application of psychological knowledge for improving overall health and wellness at the individual, organizational and community levels.

**Goal 3: Increase Recognition of Psychology as a Science Objectives:**
- Improve public understanding of the scientific basis for psychology.
- Expand the translation of psychological science to evidence-based practice.
- Promote the applications of psychological science to daily living.
- Expand educational resources and opportunities in psychological science.

WHEREAS compelling data exists that behavioral and lifestyle habits are primary risk factors for the top 10 diseases causing morbidity and mortality in the US thus the need to shift to the value of cognitive and behavioral interventions in health care, and the necessary shift from a medical education model of health issues to a biopsychosocial one integrates that evidence of social psychology and ways to change behavior.

WHEREAS special population groups/topics relevant to the public health channel includes, but are not limited to the 63 million Americans with disabilities; those with or at risk for pediatric obesity; women; chronic health conditions, especially those facing children and women; and developmental challenges (children, youth, adults, seniors) across the spectrum of diversity including race, ethnicity, gender, age, sexual orientation, disability, social economic status and religion.

WHEREAS in the United States children are spending more of their time with new technologies like texting and computing than they are talking. They spend more time with various media than with their parents. These new media are needed to franchise our youth.

WHEREAS developing countries already successfully access creative media technology to disseminate public health information and facilitate behavioral change into social mores for both urban and rural areas.

BE IT RESOLVED that APA endorses an initiative on public health communication to include, but not limited to, public health marketing strategies of:

- Multi media (including Internet, television, radio, and gaming) programs to communicate the relationship between psychology and health:
  - These programs could archive series, allowing for viewer friendly options. For example:
    - Through on demand programming a young parent might select a particularly relevant series based upon successful parenting of newborns.
• Partnerships with Internet websites, links, and other aspects for a multi-media consortium characteristics of media outlets like NBC/MSNBC today.

• Make readily available print materials to dovetail with electronic media programming.

  o A range of types of multi-media programs would communicate best the psychology and health message:
    ▪ News format shows.
    ▪ Review shows for movies with psychology content and impact.
    ▪ A public health marketing soap opera, perhaps applying the Sabido and/or Farina method(s), and perhaps titled “The Young and the Healthy” or “As the World Thrives,” and perhaps partnering with current popular venues like MTV or Discovery Channel.

  o A clearinghouse center, or rating system on public health accuracy similar to the rating system for parental guidance could facilitate and incentivize the entertainment industry routinely checking public health facts.
Why has the United States lagged behind developing countries in accessing creative media technology outlets to disseminate public health information and facilitate behavioral change into social mores?

For instance, in Uganda the AFFORD Health Marketing Initiative in April 2007 launched an entertaining and educative television, radio, and community-based game show called “The Good Life Gameshow” also has a telephone hotline, print materials, and neighborhood Good Life Teams complemented this game show. The Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs led this 2005-2010 initiative funded by the U.S. Agency for International Development. In another African example, between 2002 and 2004 47% of Ethiopian men and 42% Ethiopian women tuned into a 257 episode radio serial drama *Yeken Kignit* (“Looking over One’s Daily Life”). This social content drama used the theory and evidence based eight step Sabido methodology for behavior change via mass media communication to target reproductive health and women’s status, including family planning, marital communication, and HIV/AIDS (Barker & Sabido, 2005). Independent research documented a dramatic increase in AIDS testing for listeners (4 times for men and 3 times for women) compared to non-listeners and a significant reduction in prejudice toward those with HIV/AIDS. The Sabido method (named after Televisa [Mexican television] vice president for research Miguel Sabido of Mexico) applies behavioral change theory through creative mass media outlets and has scientific proof of effective positive behavior change in the more than 200 health intervention programs in more than 50 countries in Latin America, Africa, and Asia (Singhal et al., 2004).

In South America since 1996 the Ethics and Human Rights Department of the University of Buenos Aires (UBA) has used films to teach human rights ethics to more than 35,000 students in basic and applied sciences like medicine, psychology, biology, law. Print volumes, websites, multi-media educational materials and graduate level courses dovetail with this initiative to use popular television and films to teach human rights through bioethics.

What about the U.S.?

Since 1985 a private organization in New York called PCI-Media Impact has used creative media for worldwide programs on health, human rights, and social advancement. Over 75 radio and television creative programs have received production assistance from PCI-Media Impact in African nations like Kenya, and Rwanda, Asian nations like China and Pakistan, South American nations like Peru and Honduras and Mexico. In preproduction, experts determine cultural norms of the particular country and then adapt storytelling to those norms (Andaló, 2003). The PCI-Media Impact portfolio, though, does not seem to include the United States.

Currently about 30 U.S. television shows like the Santa Barbara, CA County Public Health Department’s monthly series “Healthy for Life” (see http://www.sbcphd.org/documents/press/H4L20090818.pdf) and in the mental health field, “The Healthy Place” consortium of TV, films, website, and videos (see http://www.healthyplace.com/) exist in the news or news magazine format and, yet, no creative programming, reality or otherwise, exists to specifically disseminate public health information, pose public health dilemmas, or question public health ethics.
Historically, from Sept 2004 to March 2005, the short-lived PBS series drama "Medical Investigation" with the storyline of "a mobile medical team from the National Institutes of Health (NIH) who are summoned in a heartbeat to scope out -- and hopefully snuff out -- outbreaks of unexplained and fearful diseases." (http://www.tv.com/medical-investigation/show/24271/summary.html) This show, while evidently not viable, had impact worldwide.

Glimpses of healthy living are found sporadically throughout various TV fare. Successful and viable television series in medicine like "House" as well as in crime investigation like the series "CSI" (whether in Las Vegas, Miami, New York, or the Navy), weave medical information intricately into plot lines. For 10 years the "Monk" criminal investigation series featured an obsessive-compulsive detective, capitalizing more on the entertainment value of his affections rather than the healthy management of such an affliction. Some series like "Law and Order: Special Victims Unit," received an American Psychological Association Golden Psi Award, given for ethical excellence in the portrayal of psychology and psychologists in select episodes, have medical personnel such as Neal Baer, M.D., on their production teams. An analysis of a popular television series “Grey’s Anatomy” (Farina, 2009, pp. 5-8) examined both the presence and absence of pertinent teaching moments. Vicki Beck, director of University of Southern California’s (USC) Hollywood, Health and Society program, noted that the most popular TV show in Kenyan history is a 1987 television series focused around family planning (Andaló, 2003). So, dramatization of public health issues can be successful both as entertainment and as dissemination of scientifically accurate information.

Sometimes public health messages from dramatic series do prevail. Recently the New England Journal of Medicine published an article on the surgical safe list (see http://content.nejm.org/cgi/content/full/NEJMsa0810119) that had been featured a few months earlier in a dramatic turn on the series “ER” that featured the life-saving necessity of having a particular special solution on hand (see http://beesight.com/er/er-season-15-episode-19-recap-and-review-old-times/all_pages.html).

And, consistently mistakes are made. The 2009 summer series “Royal Pains” about concierge medicine on Long Island, New York, featured a scene where the potent antibiotic vancomycin, called the Cadillac of antibiotics by some medical personnel, was handily and readily available in a mobile makeshift vehicle carrying all sorts of medical support equipment and supplies in order to avert an epidemic at a house party. This medicine must be refrigerated and has a short half life, so just carrying some around in ready supply like aspirins conveys a false conception of accessibility and viability.

Successful collaboration between medicine, public health, and television is too rare and too haphazard while misleading instances too frequent and too familiar. We could do better. The University of Southern California’s (USC) Hollywood, Health, and Society program at the Norman Lear Center "provides entertainment industry professionals with accurate and timely information for health storylines" (see http://www.learcenter.org/html/projects/?cm=hh), and since 1999 has bestowed annual Sentinel for Health Awards developed and funded by the Center for Disease Control (CDC) to recognize television writers with outstanding achievement that "inform, educate and motivate viewers to make choices for healthier and safer lives through their storytelling" (see http://www.learcenter.org/pdf/SentinelFactSheet.pdf). The tide is starting to turn, though. This year the Bill and Melinda Gates Foundation is forging partnership with Viacom, the media conglomerate including MTV, VH1, Nickelodeon, and Black Entertainment Television for message placements to “promote education and healthy living (Aranago & Stetler, 2009). A new collaborative initiative called “Get Schooled” partners these two entities at all levels of production. This growing awareness in the private sector needs complementary commitment from public sources.
We need to do better. Our children are spending more of their time with new technologies like texting and computing than they are talking (MC Marketing Charts, 2009). They spend more time with various media than with their parents (Graydon, 2004). If we do not access these new media, we risk losing our youth (Gregerson, 2009)!

We need to get going now. By the year 2020 the U.S.:

- Should have a number of health marketing mechanisms, and some specifically contoured for our young. For example:
  - A clearinghouse center, or rating system on public health accuracy similar to the rating system for parental guidance could facilitate and incentivize the entertainment industry routinely checking public health facts.
  - Public broadcasting could include successful reality and/or entertainment show(s) disseminating through real life dilemmas and/or story lines the paths toward public health and perils of neglecting public health issues.
  - Why not a public health marketing soap opera, perhaps applying the Sabido and/or Farina method(s), titled “The Young and the Healthy” or “As the World Thrives”? MTV now has such shows. Why not partner with such popular venues?
    - Argentine education entertainment expert Nora Marriotti notes the importance to “preserve the centrality of the fictional narrative” (Andaló, 2003).
  - Why not take further the first steps established by “The Healthy Place” consortium to become a public health channel? This public health channel could archive series, allowing for viewer friendly options. For example:
    - Through on demand programming a young parent might select a particularly relevant series based upon successful parenting of newborns.
    - Partner with Internet websites, links, and other aspects for a multi-media consortium characteristics of media outlets like NBC/MSNBC today.
    - Make readily available print materials to dovetail with electronic media programming.

The U.S. could once again become the leader in public health promotion via media. Whether we like it or not the media sends messages. The choice we have is in contouring the messages and evaluating the effects. Science and humanities wed in a potent combination of what Sabido calls “entertainment with proven social benefit” (Andaló, 2003).

References

Andaló, P. (2003). Love, tears, betrayal ...and health messages. *Perspectives in health magazine, 8*(2),


II. BAPPI BUSINESS

APA Public Interest Advocacy Goals for 2009

Issue

For review, discussion and approval (by Friday, April 16, 2010), APA’s Public Interest advocacy goals for 2009.

Implementation Plan

None

Fiscal Implications

None

Main Motion

Review and discuss changes/additions. Final approval by Friday, April 16, 2010.

Recommendation

None

Exhibits

1. APA Public Interest Advocacy Goals for 2009

Sue Houston
Public Interest Directorate
APA PUBLIC INTEREST ADVOCACY GOALS FOR 2009

APA's Public Interest advocacy goals for a given issue area are not mutually exclusive and can incorporate aspects of other areas. The "Cross-Cutting Issues" section at the end of the document includes initiatives relevant to most other areas.

### Aging Issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Goals and Objectives</th>
<th>Agency or Hill Office(s)/Committees</th>
<th>Coalitions and Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Availability of, and Access to, Mental and Behavioral Health Services</td>
<td><strong>Goal:</strong> To improve availability of, and access to, appropriate mental and behavioral health services for older adults, with special attention to the influences of gender, ethnicity, culture, sexual orientation, gender identity, and socioeconomic status (in coordination with the Practice Directorate).&lt;br&gt;&lt;br&gt;<strong>Objectives:</strong>&lt;br&gt;1) Advocate for legislation to improve availability of, and access to, appropriate mental and behavioral health services for older adults (e.g., Positive Aging Act and Medicare parity legislation);&lt;br&gt;2) Advocate for the implementation of the 2005 White House Conference on Aging mental and behavioral health recommendations;&lt;br&gt;3) Promote integrative models of care for older adults at all levels of care that incorporate the role of psychology as an equal interdisciplinary collaborator with other health professionals;&lt;br&gt;4) Promote the dissemination of evidence-based, empirically supported, developmentally appropriate interventions consistent with best practice guidelines.</td>
<td>Senate Finance and Health, Education, Labor, and Pensions (HELP) Committees; Senate Special Committee on Aging; House Education and the Workforce, Ways and Means, and Energy and Commerce Committees; Department of Health and Human Services (DHHS); Substance Abuse and Mental Health Services Administration (SAMHSA); Administration on Aging (AoA); Centers for Medicare and Medicaid Services (CMS); and 2005 White House Conference on Aging Policy Committee</td>
<td>National Coalition on Mental Health and Aging (NCMHA); Mental Health Liaison Group (MHLG); Psychologists in Long-Term Care (PLTC); Gerontological Society of America (GSA); American Association for Geriatric Psychiatry (AAGP); Older Women’s League, Alzheimer's Association; AARP; National Hospice and Palliative Care Organization; Medicare Rights Center; and Mental Health America (MHA)</td>
</tr>
<tr>
<td>II. Geropsychology Research</td>
<td><strong>Goal:</strong> To promote federal funding for research in the basic and applied clinical science of geropsychology (in coordination with the Science Directorate).&lt;br&gt;&lt;br&gt;<strong>Objectives:</strong>&lt;br&gt;1) Advocate for increased funding for research and faculty development in clinical geropsychology;&lt;br&gt;2) Promote increased funding with a behavioral research emphasis in federal and regulatory proposals related to gerontology;&lt;br&gt;3) Advocate for the appropriate inclusion of a diverse sample of older adults in clinical trials to validate the use of therapeutic interventions;&lt;br&gt;4) Advocate for funding of translational research on the psychological well being of older adults;&lt;br&gt;5) Advocate for data collection which assesses diversity issues for older adults, including sexual orientation, gender identity, ethnic/racial background, SES, and disability status.</td>
<td>Senate Finance and HELP Committees; Senate Special Committee on Aging; House Education and the Workforce and Energy and Commerce Committees; House and Senate Appropriations Committees; National Institute on Aging (NIA); and National Institute of Mental Health (NIMH)</td>
<td>Coalition for Health Funding; Alliance for Aging Research; PLTC; NCMHA; and GSA</td>
</tr>
<tr>
<td>III. Training of Psychologists for Work with Older Adults</td>
<td><strong>Goal:</strong> To increase the number of psychologists trained to meet the mental and behavioral health needs of the growing older adult population.&lt;br&gt;&lt;br&gt;<strong>Objectives:</strong>&lt;br&gt;1) Support increased funding for, and implementation of, the geriatric mental health training provisions in the Graduate Geropsychology Education Program (in coordination with the Education Directorate);&lt;br&gt;2) Support funding for training or retraining of psychologists at all career levels to become competent to address the needs of older adults;&lt;br&gt;3) Advocate for the implementation of the 2005 White House Conference on Aging health workforce recommendations.</td>
<td>Senate Finance and HELP Committees; House Education and the Workforce and Ways and Means Committees; CMS; AoA; Health Resources and Services Administration (HRSA); NIMH; and SAMHSA</td>
<td>Alliance for Aging Research; PLTC; GSA; NCMHA; NASW and AAGP</td>
</tr>
<tr>
<td>IV. Services and Support</td>
<td><strong>Goal:</strong> To increase the availability of services and supports that promote optimal</td>
<td>Senate Special Committee on Aging; Senate</td>
<td>AARP; NCMHA; National Lifespan Respite</td>
</tr>
</tbody>
</table>
### Supports for Older Adults

Health and independence in older adults across all types of residential settings (i.e., independent, assisted living, long-term care), with special attention to the influences of gender, ethnicity, culture, sexual orientation, and socioeconomic status.

**Objectives:**
1. Support mental and behavioral health promotion, treatment, and rehabilitation programs to address physical, cognitive, and emotional impairments and their management;
2. Advocate for enactment of new legislative initiatives (e.g., Lifespan Respite Care Act and Kinship Caregiver Support Act) and strengthening of existing federal programs (e.g., National Family Caregiver Support Program) that provide services and supports for older adults and their families/caregivers;
3. Advocate for legislation to help prevent abuse, neglect, and exploitation of older adults (e.g., Elder Justice Act).

### Objectives:
- Finance and HELP Committees; House Education and the Workforce, Ways and Means, Energy and Commerce, and Judiciary Committees; CMS; SAMHSA; AoA; and Department of Justice
- Coalition; MHLG; Alzheimer's Association; PLTC; GSA; and National Association of State Mental Health Program Directors (NASMHPD)

### Children, Youth, and Family Issues

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<tr>
<th>Issue</th>
<th>Goals and Objectives</th>
<th>Agency or Hill Office(s)/Committees</th>
<th>Coalitions and Organizations</th>
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</thead>
</table>
| **I. Child Welfare** | **Goal:** To advocate for federal support for child abuse and neglect prevention, treatment, and research; for increased involvement of psychologists in these areas; and to promote safe environments. **Objectives:**
1. Promote research-based prevention and treatment services in federal regulations to implement the Child Abuse Prevention and Treatment Act;
2. Advocate for increased federal funding for child abuse prevention activities and health and mental health services for child victims of crime;
3. Promote better linkages between child welfare, mental health, substance use service systems, juvenile justice systems, especially for children from vulnerable populations such as children with disabilities, children from ethnic/racial minorities, LGBTI children, and impoverished children. | Senate HELP and Finance Committees; House Education and Labor and Ways and Means Committees; and DHHS | Child Welfare, Mental Health and Juvenile Justice Coalition; National Child Abuse Coalition; Children’s Defense Fund; and Child Welfare League of America |
| **II. Childhood Development** | **Goal:** To advocate for strengthening programs that support and empower children, youth, and families. **Objectives:**
1. Protect Head Start's status as the federal provider of comprehensive services to low-income preschoolers;
2. Foster efforts to expand early childhood programs to all eligible children;
3. Promote collaboration between early childhood programs and other community services;
4. Support efforts to promote child development, healthy multigenerational family environments, and overall mental health;
5. Monitor and contribute to federal child care initiatives that promote quality, accessible, and affordable child care. | Senate HELP and House Education and Labor and Energy and Commerce Committees; and DHHS | National Head Start Association; National Association for the Education of Young Children; Society for Research in Child Development; Bazelon Center for Mental Health Law; and CDF |
| **III. Education** | **Goal:** To advocate for federal support for full educational opportunities for all children and adolescents, leading to literacy, self sufficiency, and positive overall functioning. **Objectives:**
1. Protect access to free, appropriate public education for students with disabilities by contributing to the implementation of the Individuals with Disabilities Education Improvement Act (IDEA);
2. Promote the application of research-based knowledge to key policy issues in IDEA (e.g., assessment, outcomes, early intervention, and discipline);
3. Monitor the implementation and prepare for the pending reauthorization of the No Child Left Behind Act to ensure critically needed educational and mental health services for low-income and other eligible students;
4. Promote research on the use of high-stakes testing for students and improve educational accountability through research-based programs and curricula for diverse student populations; | Department of Education; House Education and Labor and Senate HELP Committees | Council of Chief State School Officers; American School Health Association; American School Boards Association; National Education Association; National PTA; American Counseling Association; National Association of School Psychologists; National Association of Social Workers; Mental Health America; American Academy of Child and Adolescent Psychiatry; Children and Adults with Attention-Deficit/Hyperactivity Disorder; Bazelon Center for Mental Health Law; and the National Alliance of Pupil Services Organizations |
5) Support racial equity, gender equity and income equity in education.
6) Advocate for programs that provide mental health promotion, prevention, and intervention services in schools, including programs that address school bullying and school violence.

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<thead>
<tr>
<th>IV. Child and Adolescent Health and Mental Health</th>
<th>Goal 1: To advocate for health insurance for uninsured and underinsured children and adolescents.</th>
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<tbody>
<tr>
<td></td>
<td>Goal 2: To advocate for children’s and adolescents' access to appropriate and comprehensive health and mental health services.</td>
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<td>Objectives:</td>
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<tr>
<td></td>
<td>1) Ensure adequate funding for community-based children’s mental health initiatives, the Social Services block grant, and other vital maternal, child, and adolescent health programs;</td>
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<td>2) Support increased funding for an array of child and adolescent services at the Substance Abuse and Mental Health Services Administration (SAMHSA);</td>
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<td>3) Ensure that children have access to adequate health insurance coverage, including full parity for the treatment of mental disorders (in concert with the Practice Directorate);</td>
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<td>4) Ensure that services are provided by professionals with appropriate expertise and that they are adequately reimbursed;</td>
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<td>5) Advocate for the dissemination of empirically supported, developmentally appropriate interventions consistent with best practice guidelines;</td>
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<td>6) Monitor federal and maintain state implementation of the State Children’s Health Insurance Program (SCHIP);</td>
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<td>7) Advocate for the appropriate inclusion of children and youth in clinical trials to validate the use of therapeutic interventions (in conjunction with the Practice Directorate);</td>
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<td>8) Advocate for sexuality education that is comprehensive and age and culturally appropriate, supports healthy sexual development across the lifespan, acknowledges women's rights, fosters shared responsibility between males and females, and promotes tolerance for sexual diversity;</td>
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<td>9) Advocate for programs that promote funding and research that prevent obesity and disordered eating in children and promote healthy lifestyles in families;</td>
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<td>10) Advocate for increased opportunities and resources for transition youth with Serious Mental Illness;</td>
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<td>11) Promote resilience and wellbeing among children and youth that is culturally and linguistically appropriate – related to Child and Adolescent Mental Health Resilience Act.</td>
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<tr>
<th>IV. Child and Adolescent Health and Mental Health</th>
<th>CMS; Maternal and Child Health Bureau; Center for Mental Health Services; and House and Senate Budget and Appropriations Committees</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>National Consortium for Child and Adolescent Mental Health Services; Coalition for Health Funding; American Academy of Child and Adolescent Psychiatry; CDF; Coalition for Sexuality Education; and Friends of Maternal and Child Health Bureau; Bazelon Center for Mental Health Law; National Alliance on Mental Illness; and Mental Health America; Centers for Disease Control and Prevention</td>
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</tbody>
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<tr>
<th>V. Children and Media</th>
<th>Goal: To advocate for federal policies that reduce children’s exposure to violence and inappropriate advertising through the media or exploitation via new media technologies.</th>
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<tr>
<td></td>
<td>Objectives:</td>
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<tr>
<td></td>
<td>1) Advocate for the effective implementation of a content-based television program ratings system to be used with V-chip technology;</td>
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<td>2) Advocate for the adoption of public interest obligations for new media technology, such as digital television and the Internet;</td>
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<td>3) Advocate for policy concerning media safety/education for children;</td>
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<td>4) Advocate for policies that support the promotion of healthy foods and lifestyles in media targeted towards children and youth including public dissemination of data on the impact of marketing healthy foods to children.</td>
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</table>

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<thead>
<tr>
<th>V. Children and Media</th>
<th>Federal Communications Commission; Federal Trade Commission; and Key House and Senate Members</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Children’s Media Coalition; CDF; National PTA; American Academy of Pediatrics; AACAP; AMA; NEA; Kaiser Foundation</td>
</tr>
</tbody>
</table>
VI. Juvenile Justice

**Goal:** To advocate for adequate funding for prevention and early intervention programs through the Juvenile Justice and Delinquency Prevention Act (JJDPA) and the Safe and Drug Free Schools and Communities Act.

**Objectives:**
1. Advocate for protection of the core JJDP Act state mandates;
2. Advocate for increased funding of effective youth violence prevention and early intervention programs;
3. Work with federal agencies to ensure that adequate services are provided for all individuals in the juvenile justice system;
4. Promote federal efforts to minimize disproportionate minority contact with law enforcement and to address the overrepresentation of minorities in confinement, the rising number of adolescent females in the juvenile justice system; and the needs of individuals with disabilities in the juvenile justice system;
5. Advocate for effective research and evaluation in the implementation of juvenile justice programs;
6. Advocate for greater access to mental health services for individuals who are at-risk of delinquency and contact with the juvenile justice system.

**Department of Justice/Office of Juvenile Justice and Delinquency Prevention; House and Senate Judiciary Committees; House Education and Labor Committee; and CDC**

**Mental Health and Juvenile Justice Coalition; Children’s Defense Fund; Child Welfare League; American Corrections Association; American Academy of Pediatrics; Youth Law Center; and the National Juvenile Justice and Delinquency Prevention Coalition**

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**Disability Issues**

<table>
<thead>
<tr>
<th>Issue</th>
<th>Goals and Objectives</th>
<th>Priority Issue</th>
<th>Relevant Legislation</th>
<th>Status</th>
</tr>
</thead>
</table>
| I. Disability Health Disparities | **Goal:** To advocate for reducing health disparities among persons with disabilities, including those with mental health disabilities, across the lifespan.  
**Objectives:**
1. Advocate for increased access to health information, health insurance, and health services for persons with disabilities, including mental health disabilities, particularly for those living in rural areas;
2. Support funding aimed at educating persons with disabilities, including those with mental health disabilities, about accessible physical activity and how it contributes to improved mental health and overall wellbeing;
3. Support legislation aimed at increasing medical and mental health services for women with disabilities, including those with mental health disabilities;
4. Support increased research into the reasons for health disparities and develop appropriate policies and outreach activities to close the gap;
5. In keeping with the Americans with Disabilities Act, advocate for equivalent opportunities and accessibility to | Promoting Wellness for Individuals with Disabilities – Fitness, Nutrition, Technology, and General Health | Promoting Wellness for Individuals with Disabilities Act of 2007 (S. 1050/HR. 3294)  
Sets standards for accessibility of medical diagnostic equipment and establishes wellness grants to fund programs that focus on promoting good health, disease prevention and wellness, and the prevention of secondary conditions for individuals with disabilities.  
*Children's Health and Medicare Protection (CHAMP) Act of 2007 (HR.3162)*  
Provides optional coverage for children up to 25, authorizes the provision of adult day health service programs for people with intellectual and developmental disabilities, establishes coverage of preventive services, and provides parity for mental health coinsurance and a moratorium on proposed CMS restrictions. | Promoting Wellness - S. 1050/HR. 3294  
Referred to Committee.  
House version HR. 3294 introduced 8/1/07.  
*Children's Health and Medicare Protection (CHAMP) Act of 2007 (HR.3162)*  
Passed the House; received in the senate. Read twice and placed on the calendar on 9/4/07. |
II. Medicare Benefits for Individuals with Disabilities

**Goal:** To advocate for increased funding of Medicaid and Medicare (in concert with Practice Directorate).

**Objectives:**
1. Advocate for increased access to Medicaid and Medicare for individuals with disabilities, including those with mental health disabilities;
2. Support legislation for increased reimbursement and employment of personal caregivers and respite services;
3. Pass comprehensive mental health parity legislation (H.R. 1402 in the 109th Congress) which would require health insurance plans to provide equal coverage for mental and physical health care.

**Mental Health Parity and Community-Based Services**

**Mental Health Parity**
Provide parity between health insurance coverage of mental health benefits and benefits for medical and surgical services. Language is also present in SCHIP and CHAMP legislation.

**Medicaid Rehab. Option**
Support a moratorium on the Center for Medicare and Medicaid Services' (CMS) proposed rehabilitative services option rule that would cut spending for the program. This option is used to finance community-based services for people with disabilities.

**Ending the Medicare Disability Waiting Period Act of 2007 (HR. 154)**


Medicaid Rehab. Option Proposed rule will be published in the Federal Register on 9/7/07.

Medicare Waiting Period – HR. 154 Referred to subcommittee on 3/5/07.

III. Rehabilitation and Workforce

**Goal:** To advocate for federal policies that enable persons with disabilities, including those with mental health disabilities, to participate fully in work, school, and family life.

**Objectives:**
1. Advocate against policies and regulations that may have the disparate impact of excluding people with disabilities, including those with mental health disabilities, from programs and services;
2. Advocate for appropriate implementation of policies that ensure persons with disabilities, including those with mental health disabilities, obtain integrated, community-based services and supports.

**Workforce/ Employment Systems that may unfairly discriminate against people with disabilities**

**Rehabilitation Act Reauthorization**
No pending legislation.

**Pathways to Independence Act (S.1730)**
Provide flexibility for families who require accommodation due to a disability - states will receive credit for investing in the supports necessary to help individuals with disabilities succeed in the labor market such as rehabilitation and skills training; and treatment for substance abuse.

**Job Corps Screening Program**
Express concerns that the screening program may inappropriately exclude people with mental health problems and have the adverse effect of deterring mental health treatment.

Pathways – S. 1730 Referred to Committee on Finance 6/28/07.

Job Corps Screening Form Comments submitted, awaiting final rule.

IV. Civil Rights of Persons with Disabilities

**Goal:** To advocate for civil rights and protections for people with disabilities and for enforcement of rights provisions by federal agencies.

**Objective:**
1. Advocate for the ADA Restoration Act;
2. Advocate for increased federal affirmative action efforts regarding persons with disabilities, including those with mental health disabilities;
3. Advocate for inclusion of “disability, including mental health disability” in the federal definition of a hate crime and for enhanced funding to states for its enforcement.

**Americans with Disabilities Act – A more inclusive definition of disability**

**Americans with Disabilities Restoration Act**
To restore the intent and protections of the Americans with Disabilities Act of 1990 to individuals with certain disabilities (e.g. epilepsy, diabetes) and address the current court interpretations of ‘mitigating measures.’

**Americans with Disabilities Restoration Act – HR. 3195/S. 1881**
S. 1881 referred to Committee on Health, Education, Labor, and Pensions 7/26/07. 3 co-sponsors. HR. 3195 referred to the Committees: Education and Labor, Judiciary, Transportation and Infrastructure, and Energy and Commerce on 7/26/07. 190 co-sponsors.
| **V. International Issues; for informational purposes only** | **Goal:** To advocate for equal rights of persons with disabilities, including those with mental health disabilities, internationally.  
**Objective:**  
1) Support international efforts aimed at reducing human rights violations involving persons with disabilities, including those with mental health disabilities (UN Convention);  
2) Support research of mental health needs of persons with disabilities, including those with mental health disabilities, internationally;  
3) Advocate for programs aimed at assisting international PWD toward financial independence/economic growth (e.g. microenterprise ventures that allow persons with disabilities, including those with mental health disabilities, the opportunity to make a livable wage). | **None** | **SSI Extension for Elderly and Disabled Refugees Act (HR. 2608)**  
Support the extension of eligibility for supplemental security income for refugees, asylees, and certain other humanitarian immigrants with disabilities | **SSI Extension – HR. 2608**  
Received from House; referred to Senate Committee on Finance on 7/16/09. |
| **VI. Veterans with Disabilities** | **Goal:** To advocate for mental and physical health needs of veterans with disabilities, including those with mental health disabilities.  
**Objective:**  
1) Advocate for increased access by veterans to quality, timely health care at VA medical facilities;  
2) Advocate for training and hiring of more psychologists within the VA to work with the increasing number of veterans returning with disabilities and mental health needs (APA reported in Feb there are 1,839 psychologists for 24.3 million veterans);  
3) Advocate for legislation promoting reconstruction of the VA’s processing of disability claims (to reduce the amount of time it takes for veterans to receive care/services);  
4) Advocate for the “Veterans Traumatic Brain Injury Rehabilitation Act”. | **None** | **No legislation at present** | **Information Sharing -**  
Share psychological research and clinical knowledge with policy makers regarding the mental and behavioral health care needs of military service members and veterans, focusing on the needs of veterans from the public interest subgroups, including older adults, individuals with disabilities, ethnic minorities, women and families, and those who have experienced trauma and abuse. |
| **VII. Disability and Education** | **Goal:** To support for full educational opportunities for all children and adolescents with disabilities, including those with mental health disabilities, leading to independence, self sufficiency, and positive overall functioning.  
**Objectives:**  
1) Protect access to free, appropriate public education for students with disabilities, including those with mental health disabilities;  
2) Promote the application of research-based knowledge to key policy issues in IDEA (e.g., assessment, outcomes, early intervention, and discipline);  
3) Monitor the implementation and prepare for the pending | **Increased access for students with disabilities to the education system**  
No pending legislation | **Access to Higher Education Textbooks**  
No pending legislation  
**Individuals with Disabilities Education Act**  
No Child Left Behind | **IDEA Part C NPRM**  
Comments submitted, awaiting final rule.  
**NCLB**  
Proposal drafted, legislation introduced 08/05/07. |
Disability issues initiatives may also include support for increased funding levels for the research programs at NIH and for any programs authorized by the following laws: the Workforce Investment Act Amendments of 1998, the Social Security Act, the Rehabilitation Act Amendments of 1998, the Developmental Disabilities Act and the Children’s Health Act of 2000.

### Ethnic Minority Issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Goal:</th>
<th>Agency or Hill Office(s)/Committees</th>
<th>Coalitions and Organizations</th>
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</thead>
<tbody>
<tr>
<td>I. Health and Human Services</td>
<td>To advocate for health and human services programs that are targeted to ethnic minority communities.</td>
<td>House and Senate Appropriations Committees; Senate HELP and House Commerce and Education and the Workforce Committees; congressional ethnic minority caucuses; DHHS; CDC; NIH; Office of Minority Health; and SAMHSA</td>
<td>American Public Health Association; American Counseling Association; National Coalition on Health and Behavior (NCHB); and Coalition for Health Funding</td>
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<td><strong>Objectives:</strong></td>
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<td></td>
<td>1) Protect and promote such health and human services programs (e.g., DHHS’s minority health initiatives, CDC HIV prevention programs);</td>
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<td>2) Encourage new federal investments in research, including development of culturally and linguistically appropriate evidence-based practices and demonstration programs to address minority health and mental health needs (e.g., CDC adolescent black male and Native American suicide prevention programs);</td>
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<td>3) Advocate for new programs that focus specifically on the education and training of ethnic minority health and mental health professionals;</td>
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<td>4) Promote the infusion of mental health into public health concerns.</td>
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<td>II. Ethnic and Racial Health Disparities</td>
<td>To advocate for reducing ethnic and racial health disparities (in concert with Science Policy).</td>
<td>DHHS; Senate HELP and House Energy and Commerce Appropriations Committees; House and Senate Appropriations Committees; congressional ethnic minority caucuses; NIH; and SAMHSA</td>
<td>NCHB; NASW; Consortium of Social Sciences Associations; American Counseling Association; and Society of Public Health Educators (SOPHE)</td>
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<tr>
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<td><strong>Objective:</strong></td>
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<td>1) Advocate for reauthorization of the 2000 health disparities legislation to include increased attention to behavioral and mental health;</td>
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<td>2) Support increased focus at NIH and in other HHS components;</td>
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<td>3) Support funding for and promote CDC’s racial health disparities initiative;</td>
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<td>4) Advocate for services that recognize ethnicity and culture as significant parameters in understanding psychological processes.</td>
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<td>III. Indian Mental Health</td>
<td>Promote the mental health status of American Indians.</td>
<td>Senate Committee on Indian Affairs; Senate and House Appropriations Committees; SAMHSA; and Indian Health Service</td>
<td>Friends of Indian Health; Psychologists in Indian Country (Section of Division 18); National Congress of American Indians; and National Indian Health Board</td>
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<tr>
<td></td>
<td><strong>Objectives:</strong></td>
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<tr>
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<td>1) Support increased funding for mental health and substance use services at the Indian Health Service and other federal health services agencies;</td>
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<td>2) Support reauthorization of the Indian Health Care Improvement Act;</td>
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<td>3) Advocate for the expansion of the American Indians Into Psychology (InPsych) program.</td>
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<td>IV. Training of Ethnic Minority Psychologists</td>
<td>To encourage additional sources of funding for ethnic minority psychology students and early career professionals.</td>
<td>Senate HELP and Appropriations Committees; House Energy and Commerce and Appropriations Committees; SAMHSA; and NIH (including NIGMS)</td>
<td>American Sociological Association; American Psychiatric Association; American Nurses Association; Council on Social Work Education; American Association for Marriage and Family Therapy; Society for Research in Child Development; American Educational Research Association</td>
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<tr>
<td></td>
<td><strong>Objective:</strong></td>
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<td></td>
<td>1) Ensure funding through SAMHSA and NIMH for the Minority Fellowship Program;</td>
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<td></td>
<td>2) Address, in collaboration with Science Policy, additional training initiatives at NIH and other federal agencies, including HIV/AIDS research and the involvement of HBCUs and Hispanic serving institutions.</td>
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<tr>
<td>V. Cultural Competence</td>
<td>To advocate for a systematic approach to cultural competence.</td>
<td>DHHS; House and Senate Appropriations Committees; and congressional ethnic minority caucuses</td>
<td>Ethnic minority psychological associations; National Urban League; National Multicultural Institute; and other minority organizations</td>
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<tr>
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<td><strong>Objective:</strong></td>
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<tr>
<td></td>
<td>1) Work with congressional offices and federal agencies to ensure that cultural competence is included throughout legislative authorizations and appropriations and agency directives.</td>
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</tbody>
</table>
### VI. Affirmative Action

**Goal:** To advocate for the preservation of federal affirmative action programs for women and ethnic minorities, and to promote tolerance.

**Objective:**
1. Monitor legislation and administrative initiatives to ensure that affirmative action programs remain intact.

<table>
<thead>
<tr>
<th>Agency or Hill Office(s)/Committees</th>
<th>Coalitions and Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>House and Senate Judiciary Committees</td>
<td>Leadership Conference on Civil Rights (LCCR)</td>
</tr>
</tbody>
</table>

### VII. Racial Profiling

**Goal:** To promote the role of psychology in informing law enforcement practices regarding ethnic diversity issues.

**Objective:**
1. Support legislation providing for national data collection on law enforcement practices and for police training on prejudice and racism.

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<thead>
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<tbody>
<tr>
<td>House and Senate Judiciary Committees; Department of Justice</td>
<td>NAACP; LCCR; National Council of La Raza; and ACLU</td>
</tr>
</tbody>
</table>

### VIII. Immigration

**Goal:** To advocate for preserving and protecting rights of, and services to, immigrant, migrant, and refugee populations.

**Objective:**
1. Advocate for federal resources to increase access to health, mental health, social, and educational services for documented immigrants, migrants and refugees.

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<tr>
<td>House and Senate Judiciary Committees; Immigration and Naturalization Service (INS); DHHS; and Social Security Administration</td>
<td>National Council of La Raza; Coalition of Refugee Centers; Organization of Chinese Americans; Asian American Justice Center; Japanese American Citizen League; and Filipinos for Civil Rights Association</td>
</tr>
</tbody>
</table>

## HIV/AIDS Issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Goals and Objectives</th>
<th>Agency or Hill Office(s)/Committees</th>
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</tr>
</thead>
</table>
| **I. HIV/AIDS Prevention** | **Goal:** To advocate for the provision of evidence-based prevention programs that target populations hardest hit by the AIDS epidemic.  
**Objectives:**
1. Advocate funding for comprehensive HIV prevention programs for youth and other high risk populations that address both sexual abstinence and sexual risk reduction;
2. Advance federal efforts to target culturally and linguistically appropriate HIV/AIDS prevention resources and technical assistance to communities;
3. Promote public policies that support the mental and behavioral health needs of people living with HIV/AIDS;
4. Promote public policies that support harm reduction strategies, such as needle exchange programs, legal access to sterile syringes at pharmacies, and methadone maintenance therapy;
5. Advocate increased routine and rapid HIV testing and increased funding for development of an effective rapid oral test for HIV, and for training mental health providers on rapid HIV technology;
6. Support efforts to provide widely available anonymous testing;
7. Support continuing research on early detection and harm reduction strategies to educate providers and policymakers about the benefits of these strategies. | House Energy and Commerce Committee; Senate HELP Committee; House and Senate Appropriations Committees; SAMHSA; HRSA; and CDC | Federal AIDS Policy Partnership (FAPP), Harm Reduction Coalition; National Organizations Responding to AIDS (NORA); NAPWA, NMAC, AIDS Alliance for Children, Youth, and Families; and Congressional Minority Caucuses |
| **II. HIV/AIDS Civil Rights Issues** | **Goal:** To safeguard the civil rights of persons living with HIV/AIDS.  
**Objective:**
1. Oppose discrimination on the basis of health status in such areas as access to health services, housing, legal services, and employment. | House and Senate Judiciary Committees; and House and Senate Appropriations Committees | FAPP; NORA; NAPWA; NMAC; AIDS Action; and POZ |
| **III. HIV/AIDS Services** | **Goal:** To expand services for children, adolescents, and adults living with HIV/AIDS.  
**Objective:**
1. Promote the reauthorization and increased funding for the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act;
2. Advocate for legislation (e.g., Medicaid and Medicare) that provides HIV/AIDS-related services;
3. Advocate increased funding for SAMHSA’S Minority HIV/AIDS Initiative, and APA’S HOPE program;
4. Advocate funding for HIV/AIDS services at the community level that are empirically supported by behavioral and social science research;
5. Expand services for individuals living with HIV/AIDS and suffering from co-occurring mental and substance use disorders; | Senate HELP and Appropriations Committees; House Energy and Commerce and Appropriations Committees; Health Resources and Services Administration (HRSA); and SAMHSA | FAPP Reauthorization Work group; AIDS Alliance for Children, Youth, and Families; NORA; NAPWA, Hispanic Federation; and NMAC |
IV. HIV/AIDS Research in General

**Goal:** To promote and protect the scientific integrity of federal research in HIV/AIDS prevention and treatment, with particular emphasis on promotion and integration of behavioral and social science research (in support of efforts by Science Policy)  

**Objective:**  
1. Increase funding for behavioral and social science research on HIV/AIDS through appropriations legislation and report language for NIH;  
2. Oppose intrusion into the peer review process for HIV/AIDS research and oppose ad hominem attacks on HIV/AIDS research programs recommended for funding through the peer review process.

**Agency or Hill Office(s)/Committees:** NIH (principally NIMH, NIDA, and NIAAA); Office of AIDS Research; CDC; House Energy and Commerce Committee; Senate HELP Committee; and House and Senate Appropriations Committees  

**Coalitions and Organizations:** FAPP Research on Prevention Working Group, AIDS Institute, and NORA

V. HIV Testing

**Goal:** To help ensure that HIV testing offered in accordance with the recently revised CDC guidelines utilizes empirically-based measures to ensure informed consent and is combined with other proven behavioral approaches to HIV prevention.  

**Objective:**  
1. Advocate for expanded funding for prevention case management that includes empirically-based, risk-reduction counseling, promotion of the use of condoms and clean needles, distribution of condoms, and treatment for substance abuse and mental health conditions;  
2. Advocate for increased funding to train and support those who provide HIV testing to implement empirically-based approaches of linking HIV-positive persons to medical, mental health, substance use, and preventive services;  
3. Safeguard the civil rights of at-risk populations, especially lesbian, gay, bisexual, and transgender persons and people of color, in HIV testing programs.

**Agency or Hill Office(s)/Committees:** CDC; House Energy and Commerce Committee; Senate HELP Committee; and House and Senate Appropriations Committees  

**Coalitions and Organizations:** FAPP, NORA, LCCR, NAPWA, and Human Rights Campaign

Lesbian, Gay, Bisexual, and Transgender Issues

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<thead>
<tr>
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<th>Coalitions and Organizations</th>
</tr>
</thead>
</table>
| I. Lesbian, Gay, Bisexual, and Transgender (l/g/b/t) Youth in Schools | **Goal:** To advocate for federal support of school-based health and mental health programs targeted to the needs of l/g/b/t youth.  
**Objective:**  
1. Work with federal agencies and other organizations to promote effective programs in such areas as HIV prevention and mental health promotion;  
2. Work with federal agencies and other organizations to prevent and address bullying, which is often based on gender non-conforming behavior. | Dept. of Education and CDC Division of Adolescent and School Health | HRC; National Coalition for Lesbian, Gay, Bisexual, and Transgender Health (NLGBT Health) |
| II. Lesbian, Gay, Bisexual, and Transgender Health | **Goal:** To promote federal efforts to address health needs of l/g/b/t persons and encourage biopsychosocial research in this area.  
**Objective:**  
1. Advocate for increased funding and program directives to highlight and effectively address the unique health care needs of l/g/b/t persons;  
2. Oppose political interference and censorship in scientific initiatives;  
3. Advocate for coverage of and oppose attempts to limit coverage of transgender specific health care;  
4. Advocate for the establishment of an Office on Lesbian, Gay, Bisexual, and Transgender Health within the Department of Health and Human Services;  
5. Advocate for explicit inclusion of LGBT people and LGBT relevant health issues in Healthy People 2020;  
6. Advocate for healthcare among underinsured and vulnerable groups within this populations that may not have access, (ie, low SES | House and Senate Appropriations Committees; and NIH | NASW; NLGBT Health; and others |
### III. Civil Rights for Lesbian, Gay, Bisexual, and Transgender Persons

**Goal:** To promote federal efforts to address the civil rights of l/g/b/t persons.

**Objectives:**
1. Oppose any federal amendment to the U.S. Constitution that would ban same-sex marriage and any other legal obstacles to same-sex marriage;
2. Oppose restrictions on federal benefits for children of lesbian, gay, bisexual, and transgender parents;
3. Advocate for the Uniting American Families Act;
4. Support the Family and Medical Leave Inclusion Act;
5. Promote passage of the Employment Non-Discrimination Act, including gender identity;
6. Advocate for effective school programs that promote an atmosphere of acceptance and safety for l/g/b/t youth, including anti-bullying legislation;
7. Support the elimination of discrimination in and by the military based on sexual orientation, gender identity, and gender expression,

**Coalitions and Organizations:**
- House and Senate Judiciary Committees; House Education and the Workforce Committee; and Senate HELP Committee
- HRC; Leadership Conference on Civil Rights (LCCR); NLGBT Health; National Black Justice Coalition; and Gay, Lesbian, and Straight Education Network (GLSEN)

### IV. LGBT Focused Research

**Goal:** To advocate for federal support of research documenting and addressing health risks, resiliencies, problems, and interventions particularly relevant to LGBT persons.

**Objective:**
1. Advocate for the collecting of data on sexual orientation and gender identify in national health surveys and studies, using unbiased, psychometrically sound methods;
2. Oppose political interference in the funding and conduct of LGBT related research;
3. Promote the development of scientifically robust, non-discriminatory measures of sexual orientation and gender identity for research.

### Socioeconomic Status Issues

<table>
<thead>
<tr>
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</tr>
</thead>
</table>
| **I. Health and Health Care Access** | **Goal:** To improve availability of, and access to, appropriate mental and behavioral health services for all who need them, with special attention to the influences of gender, ethnicity, culture, sexual orientation, and socioeconomic status. **Objectives:**
1. Universal access to health care
2. Reduce health disparities based on SES
3. Nutrition/ Food
4. SCHIP | Senate Finance and Health, Education, Labor, and Pensions (HELP) Committees; House Committee on Education and Labor; Ways and Means, and Energy and Commerce Committees; Department of Health and Human Services (DHHS); Substance Abuse and Mental Health Services Administration (SAMHSA); Centers for Medicare and Medicaid Services (CMS) | Mental Health Liaison Group (MHLG); Medicare Rights Center; and National Mental Health Association (NMHA); The Opportunity Agenda |
| **II. Education** | **Goal:** To promote federal funding for education quality and access. **Objectives:**
1. Early education (e.g., Head Start)
2. Investment in low income neighborhood schools
3. Higher education financing (scholarships, loans)
4. Secondary Education – reducing drop out rates, high stakes testing, and high school exit exams are barriers, this equals lower SES | Senate Finance and HELP Committees; House Committee on Education and Labor; House and Senate Appropriations Committees | National Coalition for Women and Girls in Education; American University Women; Child Care NOW! Coalition |
| **III. Work** | **Goal:** To increase the training for and quality of jobs for workers with low education. **Objectives:**
1. Job training/Workforce investment
2. Self-sufficiency wages | Senate Finance and HELP Committees; House Education and the Workforce and Ways and Means Committees | Wider Opportunities for Women; The Urban Institute; Families and Work Institute, Community Action Network |
| IV. Housing and Energy Needs | Goal: To increase the availability and quality of low cost housing and energy.  
Objectives:
1) Increased availability of quality, affordable housing  
2) Increased subsidies for energy costs  
3) Access to transportation - gas | Senate Banking, Housing, and Urban Affairs Committee; House Financial Services Committee/Subcommittee on Housing and Community Opportunity | National Low Income Housing Coalition; The Opportunity Agenda, Community Action Network |
| V. Environmental Justice/Safe Environments | Goal: To promote safe, non-toxic environments in all communities.  
Objectives:
1) Increase environmental standards in poor neighborhoods  
2) Neighborhood policing/safety programs | Department of Justice; Environmental Protection Agency | Harvard University Working Group on Environmental Justice |
| VI. Classism | Goal: To reduce classist attitudes and discriminatory practices.  
Objectives:
1) Anti-bias training (e.g., for job counselors in low income areas)  
2) Legal protections for individuals with low income | House and Senate Judiciary Committees; House Education and the Workforce Committee; and Senate HELP Committee | Class Action; PEW Economic Mobility Project; Inclusion (inclusionist.org) ; The Opportunity Agenda |
| VII. Homelessness and Hate Crimes | Goal: To increase services for those who are homeless and protect the homeless from bias-motivated violent crime  
Objectives:
1) Increase funding for programs that prevent homelessness  
2) Increase housing, job training, and health services for the homeless  
3) Add homeless status to hate crimes statistics collection  
4) Include the homeless as a protected population in hate crimes legislation | Department of Justice; Bureau of Justice Statistics; FBI; SAMHSA | Coalition for the Homeless; Coalition on Hate Crime |
| VIII. Poverty | Goal: To advocate for federal resources to assist women and their families to remain financially secure and to aid others in the transition from poverty to a living wage, as part of the Temporary Assistance for Needy Families (TANF) program.  
Objectives:
1) Promote access to needed transitional services, including physical health, mental health, domestic violence, and substance abuse services; child and elder care; and education and training. | Senate HELP and Finance Committees; House Energy and Commerce and Ways and Means Committees; Senate and House Appropriations Committees; and DHHS (including ACF and CMS) | Council of Women’s Organizations, National Partnership for Women and Families; Institute for Women’s Policy Research; Families and Work Institute; National Women’s Law Center; and Coalition for Human Needs |

### Women’s Issues

<table>
<thead>
<tr>
<th>Issue</th>
<th>Goals and Objectives</th>
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</table>
| I. Women’s Physical and Mental Health Research and Services | Goal: To advocate for increased support for research (in coordination with Science Directorate) services, and the evaluation of services to address the physical and mental health needs of women and their families across the lifespan, with particular attention to women of ethnic and cultural minority groups.  
Objectives:
1) Advocate for increased funding for research to improve the physical and mental health of women;  
2) Promote policies that address physical and mental health (including postpartum depression and psychosis), particularly of women of ethnic and cultural minority groups and low income women;  
3) Support legislation that provides access for all women to health insurance, with particular attention to low-income women. | DHHS Office of Women’s Health; CDC; NIH; HRSA; SAMHSA; CMS; Senate Finance and HELP Committees; House Ways and Means, Education and the Workforce, and Energy and Commerce Committees; and Congressional Women’s Caucus | National Women’s Health Network; Society for Women’s Health Research; American Medical Women’s Association; National Black Women’s Health Project; Council of Women's Organizations; National Partnership for Women and Families; Institute for Women’s Policy Research; National Council for Research on Women; Older Women’s League; Women’s Research and Education Institute; and Coalition for Health Funding |
| II. Reproductive Health Care | Goal: To advocate for access to reproductive health services for all women, with particular attention to low-income women.  
Objective:  
1) Support legislation that provides access to reproductive health care for women, with particular attention to low-income women. | Senate HELP and Finance Committees; House Energy and Commerce and Ways and Means Committees; Senate and House Appropriations Committees; and DHHS | National Council of Women’s Organizations; NOW Legal Defense Fund; and National Abortion Rights Action League (NARAL) |
| III. Violence Against | Goal: To advocate for increased funding for research and services to address the | Senate and House Judiciary Committees; | National Coalition Against Domestic |
| Women | physical and mental health needs of female victims of violence. | DHHS (including National Institute for Occupational Safety and Health); and DOJ | Violence; Corporate Alliance to End Partner Violence; Women in Action – Association of Hispanic Women Against Discrimination and Gender Violence; Institute for Women’s Policy Research; and National Women’s Law Center |
| IV. Poverty | Goal: To advocate for federal resources to assist women and their families to remain financially secure and to aid others in the transition from poverty to a living wage, as part of the Temporary Assistance for Needy Families (TANF) program. | Senate HELP and Finance Committees; House Energy and Commerce and Ways and Means Committees; Senate and House Appropriations Committees; and DHHS (including ACF and CMS) | Council of Women’s Organizations, National Partnership for Women and Families; Institute for Women’s Policy Research; Families and Work Institute; National Women’s Law Center; and Coalition for Human Needs |
| V. Child Care | Goal: To advocate for access to affordable, accessible (where you live) and high quality child care. | Senate HELP and House Education and the Workforce Committees; DHHS; and Department of Labor | Council of Women’s Organizations, National Partnership for Women and Families; Institute for Women’s Policy Research; Families and Work Institute; and Women’s Research and Education Institute |
| VI. Family and Medical Leave | Goal: To advocate for access to paid family and medical leave for parents in the workforce. | Senate HELP and House Education and the Workforce Committees; DHHS; and Department of Labor | Council of Women’s Organizations, National Partnership for Women and Families; Institute for Women’s Policy Research; Families and Work Institute; and Women’s Research and Education Institute |
| VII. Gender Equity in Employment and Education | Goal: To advocate for access for women and girls to educational and job training opportunities, including non-traditional work, at the secondary, post-secondary, and graduate level (in collaboration with Education Directorate). | Senate HELP and House Education and the Workforce Committees; Department of Education; and Department of Labor | National Coalition for Women and Girls in Education; American University Women; National Partnership for Women and Families; Institute for Women’s Policy Research; and Families and Work Institute |

### Cross-Cutting Issues

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>I. Availability of, and Access to, Health and Mental Health Services</td>
<td>Goal: To increase access to health and mental health services for underserved populations, especially women and their families, older adults, people of color, people with HIV/AIDS, lesbian, gay, bisexual, and transgender (L/g/b/t) individuals, and low-income and poor individuals and their families.</td>
<td>Senate Finance and HELP Committees; House Ways and Means, Energy and Commerce, and Education and the Workforce Committees; White House Domestic Policy Council; and CMS</td>
<td>Campaign for Mental Health Reform; Mental Health Liaison Group (MHLG); Consortium for Citizens with Disabilities (CCD); and NCMHAA</td>
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</table>

1) Promote the provision of mental health services to underserved populations;  
2) Protect the eligibility for federal entitlements (e.g., Medicaid and Medicare) and current coverage provisions for persons with mental disability;  
3) Promote funding for, and reauthorization of, SAMHSA and opportunities for clinical training;  
4) Promote funding for, and reauthorization of, the Social Services Block Grant.
| II. Workforce Development | **Goal:** To increase the number of ethnic minority and l/g/b/t psychologists and to increase the training opportunities for psychologists working with diverse populations.  
**Objectives:**  
1) Increase funding to enable graduate programs to train mental health professionals to address the needs of our nation's increasingly diverse population by promoting cultural sensitivity and competence through such initiatives as the Minority Fellowship Program;  
2) Increase support for graduate programs to offer training grants, stipends, scholarships, and loan repayment programs for graduate students working with children, older adults, and individuals with physical disabilities, co-occurring disorders, or chronic health conditions, such as HIV/AIDS and cancer, in collaboration with Education Policy through such initiatives as the Graduate Psychology Education program. | Senate and House Appropriations Committees; SAMHSA; and HRSA | CCD Health Task Force; Health Access Task Force of NORA; MHLG; Coalition for Health Funding; Consumer Coalition for Health Care Quality; and Campaign for Mental Health Reform |
| III. Suicide Prevention | **Goal:** To contribute to the development of a national strategy for suicide prevention with particular attention to individuals at high risk for suicidal ideation, suicide attempts, and suicide.  
**Objectives:**  
1) Support the establishment of a federal interagency effort to coordinate federal suicide prevention initiatives in research, services, training, and public education, with special attention to older adults;  
2) Promote funding for, and reauthorization of, SAMHSA. | Senate HELP and House Education and the Workforce Committees; Senate Special Committee on Aging; and DHHS | Campaign for Mental Health Reform and NCMHA |
| IV. Hate Crime | **Goal:** To advocate for the inclusion of gender, gender identity, sexual orientation, and disability status in hate crime legislation and expand federal involvement in the investigation and prosecution of hate crimes.  
**Objectives:**  
1) Advocate for passage of hate crime legislation;  
2) Advocate for educational and other programs to prevent hate crime;  
3) Monitor procedures for the collection of prevalence data through the National Crime Victimization Survey to allow for more meaningful analysis. | Department of Justice Bureau of Justice Statistics and FBI | Hate Crime Coalition (includes HRC, Anti-Defamation League, LCCR, and others) |
| V. Service Members, Veterans and their Families | **Goal:** To advocate for the mental and behavioral health needs of service members, veterans and their families, with particular attention to diverse veteran populations (e.g., ethnic minorities; older adults; women; lesbian, gay, bisexual, and transgender individuals; and persons of low socioeconomic status).  
**Objectives:**  
1) Support legislation to address the mental and behavioral health needs of female and male service members, veterans and their families, with particular attention to diverse populations;  
2) Advocate for community and geographic accessibility of appropriate mental and behavioral health services and supports to address the needs of female and male service members, veterans who have experienced trauma, violence, and abuse, including military sexual trauma, and traumatic brain injury;  
3) Support legislation to address the mental and behavioral impact of deployment and redeployment, for female and male service members and their families. | Senate and House Committees on Veterans' Affairs; Senate and House Committees on Armed Services; Department of Veterans Affairs; and Department of Defense | Association of VA Psychology Leaders; Military Psychology Leaders; and Veterans Health Council |
| VI. Disaster Relief and Emergency Preparedness | **Goal:** To advocate for mental health services for those affected by disasters, particularly diverse and minority populations; and for research on disaster preparedness to develop a better public health response for future disasters.  
**Objectives:**  
1) Advocate for training opportunities for health care providers in delivering culturally competent services, as well for minority health care professionals;  
2) Advocate for mental health services targeted to diverse populations, including children, older adults, persons with physical and mental disabilities, low-income persons, racial/ethnic minorities, and lesbian, gay, bisexual, and transgender persons;  
3) Support funding for research on the short- and long-term mental health impact of deployment and redeployment, for female and male service members and their families. | Senate HELP and House Education and the Workforce Committees; Senate and House Appropriations and Government Reform Committees; Senate Special Committee on Aging; DHHS (including SAMHSA and NIH); and Federal Emergency Management Agency (FEMA) | Campaign for Mental Health Reform; Mental Health Liaison Group; National Child Traumatic Stress Network; National Center for PTSD; and Families USA |
4) Advocate for funding to deliver evidence-based, culturally competent practices to targeted diverse populations, including children, older adults, persons with physical and mental disabilities, low-income persons, racial/ethnic minorities, and lesbian, gay, bisexual, and transgender persons;
5) Advocate for funding or program development evaluation of innovating community-based mental and behavioral health interventions following disasters.

VII. End-of-Life Care

**Goal:** To advocate for psychological services and the consideration of psychological research in the development of federal policy on end-of-life care decisions for children and adults of all ages.

**Objectives:**
1) Promote the inclusion of expert psychologists on governmental panels and policy-making commissions;
2) Ensure that relevant psychological research is reflected in federal legislative and regulatory proposals;
3) Advocate for increased coverage of mental health and psychologist services under the Medicare Hospice Program (with the Practice Directorate);
4) Support legislation that grants equal rights to same-sex partners in health care decisions at end of life, including spousal visitation privileges.

| White House; NIH Office on AIDS Research; National Institute of Nursing Research; House Education and the Workforce and Ways and Means Committees; Senate Judiciary and Finance Committees; and CMS |
| National Hospice and Palliative Care Association and HRC |

VIII. Criminal Justice

**Goal:** To advocate for adequate funding for prevention, early intervention, and other critical programs and services impacting incarcerated individuals, especially those at high risk while incarcerated, including women; ethnic minorities; people with disabilities; young adults; lesbian, gay, bisexual, and transgender individuals and those perceived as such.

**Objectives:**
1) Advocate for mental health and substance use services for incarcerated individuals, including women;
2) Advocate for funding for education and training for practitioners working with individuals under criminal justice supervision, and addressing legal and ethical issues for these practitioners;
3) Advocate for research to examine the impact on women of interaction with the criminal justice system, including ethnic minority women.

| Senate Committee on Health, Education, Labor, & Pensions; Senate Committee on Agriculture, Nutrition, and Forestry; Senate Committee on Commerce, Science, and Transportation; House Committee on Education & Labor; House Committee on Agriculture; House Committee on Energy & Commerce; House Committee on Transportation and Infrastructure; DHHS; Department of Education; USDA |
| National Alliance for Nutrition and Activity; Rudd Center for Food Policy & Obesity; Academy for Eating Disorders; Association for Size Diversity and Health; STOP Obesity Alliance; Trust for America’s Health; American Academy of Pediatrics (AAP) |

VIX. Eating Disorders & Obesity Prevention

**Goal:** To advocate for initiatives encouraging positive body image, healthy eating habits, appropriate levels of physical activity, and improved self-esteem to positively influence health outcomes for individuals across the weight spectrum.

**Objectives:**
1) Advocate for research on behavioral interventions that effectively help individuals across the weight spectrum maintain healthy nutrition, appropriate levels of physical activity, and body satisfaction;
2) Advocate for screening for eating disorders and for physical, behavioral, and mental health concerns related to poor nutrition and physical inactivity for individuals across the weight spectrum;
3) Advocate for the integration of efforts to prevent obesity, disordered eating, and eating disorders;
4) Advocate for initiatives to improve the availability of and access to affordable, healthy foods and safe neighborhoods across socioeconomic levels;
5) Advocate for initiatives that educate families on the importance of family meals at home; modeling and providing a home environment that supports healthful eating, physical activity, and well-being; and age-related differences in how children understand and are affected by television advertising and other forms of marketing.

| National Alliance for Nutrition and Activity; Rudd Center for Food Policy & Obesity; Academy for Eating Disorders; Association for Size Diversity and Health; STOP Obesity Alliance; Trust for America’s Health; American Academy of Pediatrics (AAP) |
RENEWAL OF REIMBURSEMENT POLICY FOR ETHNIC MINORITY MEMBERS OF COUNCIL

Issue

BAPPI is asked to determine if it would like to make a recommendation to the Board and Council regarding the renewal of the reimbursement policy for ethnic minority members of Council.

At its August 2007 meeting, on recommendation of the Board of Directors, Council voted to approve the following motion:

Council finds that the program of fully reimbursing ethnic minority members of Council for their attendance at the February and August Council meetings (first approved by Council in August 2001) has been helpful in increasing ethnic minority representation on Council and should be continued.

Since the inception of the reimbursement program for ethnic minority members, Council approved a policy that became effective in January 2006 to provide that all Council members be fully reimbursed for their attendance at the February meeting of Council and for the cost of two night’s stay at the headquarters hotel where Council is housed for the convention meeting of Council.

APA strongly encourages Divisions and State, Provincial and Territorial Associations to submit one or more slates of nominees comprised solely of ethnic minorities. In order to continue to provide incentives for Divisions and State, Provincial and Territorial Associations to elect ethnic minorities to Council, APA shall provide full reimbursement (transportation, hotel and meal charges) for ethnic minority members of Council who are elected during the years 2008-2010 for their attendance at the convention meeting of Council.

For purposes of this program, ethnic minority identity is determined by self-identification as a member of one of the following four U.S. ethnic minority groups: African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, and Hispanic / Latino.

BAPPI may want to request that the Board recommend that Council approve the above motion after updating the 2008-2010 dates currently in the motion so that the policy would be extended for an additional three years (2011-2013).

The August 2007 Council agenda item is provided as Exhibit 1. A brief history of the APA reimbursement policy for Council members is provided as Exhibit 2.

Implementation Plan

BAPPI’s recommendation will be forwarded to the Board of Directors at its June meeting.

Fiscal Implications

To be determined based on number of ethnic minority members elected each year.

Main Motion

To be determined
Recommendation

None

Exhibits

1. August 2007 Council Agenda Item, "Reimbursement Policy for Ethnic Minority Members of Council"
2. History of APA Reimbursement Policy for Council Members
XIII. ETHNIC MINORITY AFFAIRS

Reimbursement Policy for Ethnic Minority Members of Council

Issue

Council is asked to approve a motion continuing the reimbursement policy for ethnic minority members of Council for an additional three years.

The policy that provides full reimbursement for ethnic minority members' attendance at the February and August meetings of Council (see under "background" section below) was first approved by Council in August 2001, and at its July 2004 meeting, Council voted to continue the policy for an additional three years. Council also requested that the Board review the effectiveness of the proposal and provide a recommendation to Council in August 2007 regarding funding its continuance beyond the 2007 election.

In February 2005, Council approved changing the reimbursement policy for Council members. The new policy became effective in February 2006 and provides that Council members receive full reimbursement (transportation, hotel and meal costs) for their attendance at the February meeting of Council and that they be reimbursed the cost of two night's stay at the headquarters hotel where Council is housed at the Convention meeting. Previously, Council members were reimbursed for transportation expenses only for the February Council meeting and for the cost of one night’s stay at the hotel where Council is housed at the Convention meeting.

As a result of the change to the reimbursement policy for Council members approved in February 2005, all Council members receive full reimbursement for their attendance at the February Council meeting. For the Convention meeting of Council, ethnic minorities receive full reimbursement for their attendance (transportation, hotel and meal charges) and Council members who are not ethnic minorities are reimbursed the cost of two night’s stay at the headquarters hotel where Council is housed.

Background

At its July 2004 meeting, Council voted to approve the following motion:

Because it believes that racial and ethnic diversity in the membership of Council has not been and is not currently satisfactory, Council finds that a program to provide incentives to Divisions and State, Provincial and Territorial Associations to elect ethnic minorities as Council representatives is in the best interest of APA.

Accordingly APA will reimburse any Division or State/Provincial/Territorial Psychological Association for the expenses incurred by representatives to Council who are ethnic minorities and who are elected during the years 2005-2007, to attend Council meetings. Reimbursement will be provided to Divisions, State, Provincial and Territorial Psychological Associations for transportation, hotel and meal expenses for both the February and August meetings of Council. APA strongly encourages Divisions and State, Provincial and Territorial Associations to submit one or more slates of nominees comprised solely of ethnic minorities.

For purposes of this program, ethnic minority identity is determined by self-identification as a member of one of the following four U.S. ethnic minority groups: African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, and Hispanic / Latino.
Council requests that the Board conduct a review of the effectiveness of this proposal and provide a recommendation to Council in August 2007 regarding funding its continuance beyond the 2007 election.

Provided below is information on the number of ethnic minorities serving on Council since 2002. The reimbursement policy for ethnic minority members became effective with the 2002 elections for those members with terms starting in 2003.

<table>
<thead>
<tr>
<th>Number of Council Reps</th>
<th>Number of Ethnic Minorities</th>
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<tbody>
<tr>
<td>2002</td>
<td>143</td>
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<tr>
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<td>2006</td>
<td>161</td>
</tr>
<tr>
<td>2007</td>
<td>161</td>
</tr>
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**Implementation Plan**

The Election Office will notify Divisions and State, Provincial and Territorial Associations of Council’s actions when requesting nominees for the Council of Representatives elections.

**Fiscal Implications**

To be determined based on number of ethnic minority members elected each year.

All Council members receive the same reimbursement for the February Council meeting. The estimated cost of providing additional reimbursement to ethnic minority members (above the cost of two night’s stay at the Convention hotel which all Council members receive) is $38,000.

Estimate:

August: $500 travel x 20 = $10,000
        $300 (hotel & meals) x 4 nights x 20 = $24,000
        $100 (meals) x 2 x 20 = $4,000
TOTAL = $38,000 per year

This amount is currently included in the budget since ethnic minority members of Council currently receive full reimbursement for their attendance at the Convention meeting of Council. If the main motion is approved, the amount will be incorporated into future years’ budgets (2009-2013) to cover the cost for those elected in 2008-2010 (with those elected in 2010 serving through 2013).

**Main Motion**

(as originated by the Board of Directors)

1. Council finds that the program of fully reimbursing ethnic minority members of Council for their attendance at the February and August Council meetings (first approved by Council in August 2001) has been helpful in increasing ethnic minority representation on Council and should be continued.
2. Since the inception of the reimbursement program for ethnic minority members, Council approved a policy that became effective in January 2006 to provide that all Council members be fully reimbursed for their attendance at the February meeting of Council and for the cost of two night’s stay at the headquarters hotel where Council is housed for the convention meeting of Council.
APA strongly encourages Divisions and State, Provincial and Territorial Associations to submit one or more slates of nominees comprised solely of ethnic minorities. In order to continue to provide incentives for Divisions and State, Provincial and Territorial Associations to elect ethnic minorities to Council, APA shall provide full reimbursement (transportation, hotel and meal charges) for ethnic minority members of Council who are elected during the years 2008-2010 for their attendance at the convention meeting of Council.

For purposes of this program, ethnic minority identity is determined by self-identification as a member of one of the following four U.S. ethnic minority groups: African American/Black, American Indian/Alaska Native, Asian American/Pacific Islander, and Hispanic / Latino.

**Recommendation**

The Board of Directors recommends approval of the main motion.

**Exhibits**

None.

*Maureen O'Brien*
*Governance Affairs*
History of APA Reimbursement Policy for Council Members  
(Reimbursement policies were approved by the Council of Representatives)

Prior to 2003

All Council members are reimbursed transportation expenses for the February Council meeting and the cost of one night's stay at Council's headquarters hotel for the August meeting. No other expenses are reimbursed by APA.

January 2003 – December 2005

Ethnic minority members receive full reimbursement (transportation, hotel and meal costs) for the February and August meetings.

No change to reimbursement policy for those Council members who are not ethnic minorities.

January 2006 - Present

All Council members receive full reimbursement for February Council meeting.

Ethnic minority members receive full reimbursement for attendance at August Council meeting.

Those Council members who are not ethnic minorities are reimbursed the cost of two nights' stay at the headquarters hotel where Council is housed for the August meeting.

Provided below is information on the number of ethnic minorities serving on Council since 2002.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total # of Council Reps</th>
<th>Total # of Ethnic Minorities</th>
<th># of EM Starting New Term</th>
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