President’s Column: A Fresh Perspective
Amy Fiske, PhD

I recently returned to the lovely mountain state of West Virginia from a wonderful half-year sabbatical in New York City. I gained much from this experience—invaluable relationships with collaborators, focused time to work on projects, and even some mastery of the subway system in Manhattan. Perhaps the most important benefit, however, has been a fresh perspective.

It occurs to me that as we consider the challenges and opportunities that lie ahead for the Society, we may also benefit from a new perspective.

Much has been accomplished within the field of clinical geropsychology in the past 20 years. Training models have been developed and training opportunities have expanded, as have methods of assessing
competencies. Geropsychology is now a recognized specialty area of practice. A board certification process is currently under development. Guidelines for working with older adult clients have been widely distributed to non-specialist psychologists. And these are only a few of our recent successes.

Yet, daunting challenges remain. As noted in the Institute of Medicine’s 2012 report on the Mental Health and Substance Use Workforce for Older Adults, there is dramatic gap between the demand and supply of mental health and substance use providers prepared for work with older adults, and the shortfall will only be amplified by the projected growth in the older adult population in coming decades. It is unlikely that this urgent problem will be solved by continuing to use the strategies that have been used to date, even though they have already led to important accomplishments.

In an effort to develop a new perspective on this and other challenges and opportunities facing our field, I established an Advisory Committee and launched a strategic planning effort. The members of this blue ribbon Advisory Committee are: Barry Edelstein, Amber Gum, Bradley Karlin, Bob Knight, George Niederehe, and Michael Smyer. The Committee has already provided input to the Board on the mission and vision for the Society, and will continue to meet regularly throughout the year as the strategic planning process unfolds. I am deeply grateful to the Committee members for their service to the Society.

One of the first steps in the strategic planning process has been to identify a shared vision for the organization. Based on input from the Advisory Committee, the Board approved the following vision statement for the Society:

“Fostering the mental health and wellness of older adults through science, practice, education and advocacy.”

If you will be in Honolulu for the APA convention next week, I invite you to attend the Presidential Address and Business Meeting (both on Friday morning) to hear more about the strategic planning process and to let us know what you think. I look forward to benefitting from your perspective!

In other news, I’d like to heartily congratulate the recipients of the Society’s 2013 awards! Philip Sayegh, MA, will receive the Student Paper Award, Jennifer Moye, PhD, will receive the Distinguished Mentorship Award, and Victor Molinari, PhD, ABPP, is the recipient of the M. Powell Lawton Award for Distinguished Contributions to Clinical Geropsychology. All three awards will be presented at the convention on Friday, August 2, 9:00-9:50, followed by Victor’s Lawton Award Address. Thanks to Barry Edelstein and the Awards Committee for their service in selecting award recipients from among the many exceptional nominees.

Congratulations are also in order for Antonette Zeiss, PhD, a founding member of 12/II, who will receive the 2013 APA Award for Outstanding Lifetime Contributions to Psychology. This prestigious award will be presented at the APA Convention Opening Session. In addition, Michael Smyer, PhD, the first President of 12/II and current member of our Advisory Committee, has been named the recipient of CONA’s 2013 Award for the Advancement of Psychology and Aging. This award will be presented at the GSA conference in New Orleans.

I look forward to seeing many of you in Hawaii!

Aloha and mahalo,

Amy
Welcome to the Summer edition of the 12/II Newsletter! There are a few pieces in the current issue that we would like to highlight:

- Check out the APA programming events highlighted in the Announcements section of the newsletter.
- Don’t forget to “like” 12/II on Facebook: https://www.facebook.com/#!/ClinicalGeropsychology
- We are now accepting advertisements in the newsletter! Various sizes are available, so contact the newsletter editors if you’re interested in advertising.
- **We are looking for two newsletter editors to start in 2014**, as our term will end in 2013. This is a great opportunity for postdocs and early career members! The term is for three years, and we will help with the transition during the first newsletter issue of 2014. Please send an email to Erin.Woodhead@sjsu.edu and JenniferKaci.Fairchild@va.gov if you have questions or are interested.

**The Senior Connection: An on-going randomized trial of peer companionship**

*Submitted by Kim Van Orden, PhD*

Kimberly_Vanorden@urmc.rochester.edu

*Note from the Editors: This piece describes ongoing research by a member that we thought would be of interest to the larger membership. Please contact Kim if you have further questions, and stay posted for information on the results of the trial described here.*

There is a pressing public health need to find interventions that reduce suicide risk in later life. Psychiatric and physical illness, functional decline, and social factors place seniors at risk for suicide. Reflecting this body of evidence, the Centers for Disease Control and Prevention (CDC) has identified the promotion and strengthening of social connectedness, between and within the individual, family, community, and broader societal levels, as a key strategy for suicide prevention. We believe this approach is especially well-suited to older adults given the mounting evidence that social disconnectedness is associated not only with suicide-related morbidity and mortality, but with a wide range of negative health indicators in later life, including cardiovascular disease, Alzheimer’s disease, and all-cause mortality. Our objective with this project is to examine whether linking socially disconnected seniors with peer supports through the Retired and Senior Volunteer Program (RSVP) is effective in reducing risk for suicide and promoting health and well-being.

Dr. Yeates Conwell at the University of Rochester School of Medicine and Dentistry is the Primary Investigator of the project. Dr. Kim Van Orden is Co-investigator and Project Director. Dr. Carol Podgorski is also Co-investigator. Dr. Deb Stone and Wendy LiKamWa are collaborators from the CDC. The Senior Connection will recruit 400 primary care patients (from several practices in the Greater Rochester Practice Based Research Network) over age 60 years who endorse feeling lonely and/or as if they are a burden on others. These criteria were chosen because they represent the psychological states of thwarted belongingness and perceived burdensomeness that are posited by the Interpersonal Theory of Suicide to
cause desire for death and suicide. Subjects will be randomly assigned to either of two conditions. Those assigned to The Senior Connection (TSC) will be paired with a peer companion. The comparison group will not receive a peer companion (“care-as-usual” [CAU]). All subjects will be followed for up to 24 months with repeated in-home (baseline, 12, and 24 months) and telephone assessments (3, 6, and 18 months). All subjects will be screened at baseline for safety issues in the home (e.g., need for grab bars) and provided assistance in meeting those needs; some subjects may be linked with case management services.

The study has four specific aims: (1) To compare the impact of TSC and CAU on social connectedness of older adult primary care patients; (2) to compare the effectiveness of TSC and CAU in reducing factors associated with proximal risk for suicidal behavior; (3) to determine if changes in measures of older adults’ social connectedness mediate the relationship between social connectedness and suicide risk; and (4) is to examine whether responsiveness to the intervention differs by gender.

The Retired and Senior Volunteer Program (RSVP) is offered in communities nationwide by social service agencies that are dedicated to maintaining the independence and quality of life of older adults. Their expertise and resources are well suited to the reduction of suicide risk in later life. If RSVP is shown to be effective in reducing suicidal ideation and increasing connectedness, it will be easily disseminated across the aging services provider network as a means to prevent suicide among seniors at risk.


Resources for LGBT Older Adults

Submitted by Tiffany Rideaux, Psy.D.
Postdoctoral fellow, VA Palo Alto Health Care System
trideaux@paloaltou.edu

In April I attended a day-long conference on Aging in the LGBT Community sponsored by the Institute on Aging in San Francisco, California. The conference began with a highly energized presentation and a call to action to increase community awareness of the health disparities in the LGBT older adult population. I was inspired by the conference and made a personal commitment to increase my understanding of the issues LGBT older adults encounter and to share that knowledge with other health care providers. The purpose of this article is to briefly introduce the health disparities in the LGBT older adult community and to highlight resources for health care providers.

“Who in your life is especially important?” Asking an older adult this question may create the safety needed to self-disclose about their sexual orientation and gender identity, perhaps for the first time to a health care provider. Approximately 1.5 million U.S. adults age 50 and older self-identify as Lesbian, Gay, Bisexual, and Transgender (LGBT) according to a report released by the National LGBT Health and Aging Center (the Aging and Health Report: Disparities and Resilience among Lesbian, Gay, Bisexual, and Transgender Older Adults accessed at http://caringandaging.org/wordpress/reports/). The report is based on the Caring and Aging with Pride project, which is a federally funded nationwide survey examining the aging and health of over 2,500 LGBT adults ages 50 to 95. According to this report, compared to same-aged heterosexual peers lesbian, gay, and bisexual older adults are more likely to report emotional distress, engage in excessive drinking, smoke, and have high rates of victimization and are less likely to be in a partnership or married. Historical factors such as criminalization of homosexual behavior and stigmatization of homosexual orientation and gender variance may be mental health risk factors for LGBT older adults. Thirty-one percent...
Where Are They Now?

As a new feature in the newsletter, the editors decided to contact prior winners of the 12/II Student Research Award to ask them a few questions about what they’re up to now. The first installment of this new column was introduced in the Spring 2012 newsletter. For the fourth installment, we profiled Tara Victor (received award in 2003) and Caitlin Holley (received award in 2006). Here we publish the abstracts from their award winning work, and follow-up with questions about their current activities.

Tara L. Victor, PhD, ABPP
Associate Professor
Department of Psychology
California State University, Dominguez Hills
Assistant Clinical Professor and Clinical Neuropsychologist
Departments of Psychiatry and Biobehavioral Sciences and Physical Medicine and Rehabilitation
UCLA Semel Institute and West LA Veterans Healthcare System

Original Paper Title and Abstract: The Role of Executive Function as a Mediator of Age-related Differences in Free Recall Memory Performance

The elderly are the fastest growing segment of U.S. population, yet the effects of the aging on this groups’ cognitive function are not well-known or sufficiently understood. This is coupled with the fact that this age group is vulnerable to increasing disabilities, many of which are the result of the aging central nervous system. Thus, as the number of older adults continues to increase, so does the importance of understanding the cognitive aging process. Being able to identify those cognitive elements that seem to characterize the mental status of elderly populations is very important to our understanding of this process and has major implications for the adaptive functioning and overall psychological health of these individuals.

One particular area of cognition that declines with age is memory. Much research has focused on age-related memory decline; however, there are many questions still left unanswered. The purpose of this study was to elucidate the mechanisms through which age exerts its effects on memory performance. Specifically, this study investigated the hypothesis that executive function (the class of cognitive abilities of scaffold cognitive processes that are necessary for the task successful completion) mediates age-related differences in free recall memory performance.
thought to encompass the wide range of mental processes involved in problem solving, such as planning, strategic and abstract thinking, self-monitoring, shifting tasks and behavioral inhibition), processing speed (how quickly one can think and process information) and working memory (the ability to store and manipulate information simultaneously) would all mediate the relationship between age and free-recall memory performance. A focus was placed on the role of executive function. In addition, exploratory analyses concerning the relative contributions of different aspects of executive function (i.e. attention, response inhibition and set-shifting) to the age-memory relationship were conducted.

A total of 241 adults participated in this study ranging in age from 54-87 years (M = 68.97, SD = 7.8). All participants were home-dwelling community elderly individuals recruited through local newspaper advertisements and talks given to local community groups. Exclusion criteria included evidence of depression or significant gross cognitive impairment to ensure that the sample examined was representative of the normal aging population. This yielded a total sample of 210 (118 females). Finally, each participant was offered the opportunity to participate in memory and attention training workshops as a result of participating in this study. Variables were measured using standard neuropsychological tests (i.e., California Verbal Learning Test, Wisconsin Card Sorting Test, Trailmaking Test, Stroop Test, Symbol Digit Modalities Test, WMS-III Digit Span Backwards) with a sample of normal healthy elderly individuals. Hierarchical multiple regressions indicated that age (54-87) contributed only 8.8% to the variance in memory performance. Both executive function and processing speed when entered alone partially mediated the relationship between age and memory. When entered together, they fully mediated the relationship. Working memory was not found to be related to free-recall memory performance. All three aspects of executive function contributed similar amounts to the age-related variance. These results were discussed in light of their practical, theoretical and methodological implications.

Interview Questions for Dr. Victor

Q: Why did you become a 12/II member and how did 12/II assist you with your professional development?

As a graduate student in clinical psychology at Michigan State University with an emphasis on the neuropsychology of aging under the supervision of Norman Abeles, PhD, ABPP, I wanted to gain additional understanding of research and clinical work with older adults. Becoming a member of Division 12/II provided multiple resources I found invaluable to my training experience and professional development, including information on geropsychology internships, practice guidelines, making professional connections, and of course, offering opportunities for disseminating the results of our research!

Q: How did you get interested in the field of aging?

My grandparents and great-grandparents were inspirational people. They had a huge impact on my life and my developing sense of self. My graduate mentor, Dr. Abeles, also played a significant role in supervising many rewarding clinical experiences with older adults, further fostering my interest in continuing to work with this population.

Q: What are your key responsibilities at your current job?

As an Associate Professor in the Department of Psychology at California State University, Dominguez Hills, I teach several graduate and undergraduate classes in psychology and mentor students conducting psychological research. I also work as a neuropsychologist in private practice and at the Greater Los Angeles Healthcare System. Finally, I supervise psychology trainees conducting assessment and therapy with older adults at UCLA.

Q: What has been your most memorable experience in gerontology and aging research?

Undoubtedly, my most memorable experience was learning how to conduct structural equation modeling for the completion of my dissertation! I’ll never forget that 😊 More seriously, my most
memorable experiences are those with veterans. I have a special affinity for this group, and I’m grateful for the opportunity to serve them.

Q: Why is it important for students to join 12/II?
   It’s important for students to join 12/II in order to make professional connections in the field and to stay aware of the training resources and practice guidelines provided.

Caitlin Holley, PhD
Staff Psychologist
Stratton VA Medical Center
Albany, NY


PURPOSE: Interest in anticipatory grief (AG) has typically focused on terminal diseases such as cancer. However, the issues involved in AG are unique in the context of dementia due to the progressive deterioration of both cognitive and physical abilities. The current study investigated the nature of AG in a sample of dementia caregivers and examined the relationship between AG and caregiver burden.

DESIGN AND METHODS: A total of 80 informal caregivers of individuals with dementia completed interviews and questionnaires assessing their experience of grief, physical and mental health, aspects of the caregiving situation, and the level of patient impairment. Hierarchical linear regression models were used to examine whether AG is significantly associated with caregiver burden.

RESULTS: AG was shown to be significantly and independently associated with caregiver burden in this sample, beyond the effects of known predictors such as background characteristics, behavior problems in the care recipient, and depressive symptoms.

IMPLICATIONS: The current results suggest that grief may be an important yet understudied aspect of the caregiving experience. It is likely that consideration of grief in future conceptualizations of caregiver burden can lead to better support for caregivers and more accurate predictions of outcomes.

Interview questions for Dr. Holley

Q: Why did you become a 12/II member and how did 12/II assist you with your professional development?
   I became a 12/II member to stay connected with others in the field and with the latest news and research. Being a member has helped me tremendously. I’ve had the privilege to meet numerous geropsychologists and gero trainees and that network has helped me to clarify and shape my interests and career path.

Q: How did you get interested in the field of aging?
   I became interested in aging shortly after losing my grandfather to dementia. I didn’t understand what he suffered from at the time and I wanted to. This led me to seek out some experiences with older adults and I fell in love with the work!
Q: What are your key responsibilities at your current job?
I work for Veterans Affairs as a staff psychologist. My responsibilities include treatment and supervision in the PTSD program, and neuropsychological testing in the Geriatric Evaluation and Management team.

Q: What has been your most memorable experience in gerontology and aging research?
Data collection for my dissertation involved conducting in-home interviews with 80 dementia caregivers. This experience was incredibly rewarding, and fun! I just loved hearing the stories and histories of devoted family members, especially those with long, successful marriages. It was inspiring!

Q: Why is it important for students to join 12/II?
There are so many reasons to join as a student, but I think networking is the most important one. There is a lot to be gained, both professionally and socially by developing relationships with others in the field.

Q: Do you have any tips for emerging geropsychologists?
Seek out mentors within the field! Learn from trusted peers, faculty members, and supervisors and use their experience and support to help you shape the path you want to take. My best advice is to seek out mentors whose values are consistent with yours, so that you can model their approach to their work, as well as utilize them for support and guidance.

Q: Tell us about your most recent activities.
In my current role as a VA staff psychologist I work primarily in two clinical teams. On the PTSD clinical team I provide treatment to combat veterans with PTSD, and supervise the neuropsych component of the postdoctoral training program. On the Geriatric Evaluation and Management Team, I provide brief neuropsychological testing and consultation for individuals with cognitive disturbance. Not having been hired into a role specifically designed for a geropsychologist, I have enjoyed seeking out opportunities to work with older adults and shaping this role for myself within the facility.

Q: Have you had an important mentor in your career? If so, how did it make a difference?
I have had several important mentors throughout my training and early career, but the most influential was definitely my graduate school faculty mentor, Dr. Benjamin Mast. His support and guidance was critical in my professional development. He helped me to get involved in research early on through involvement in his work, while also helping me to develop my own clinical and research interests throughout graduate school. He consistently pushed me to seek out new experiences to pursue my desired career path. His unwavering support of me was invaluable and helped me to successfully navigate the tricky task of balancing numerous priorities and goals while transitioning from a geropsychology trainee to an early career psychologist.

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The Student Voice

Survey of Internship-Bound Division Students

Submitted by Annie Mueller, MA
12/II Student Representative

This spring, Jay Gregg and I surveyed the current 12-II students who participated in the APPIC Match this year. We were curious in regards to what types of programs geropsychology students matched, as students...
face many options while applying for internship. We were also curious to see how the match rate for our division compared to the general match rate of 76% in Phase I (appic.org). We are pleased to say that the results from the survey indicated that 100% of the students surveyed reported matching in Phase I! Although we do not know how many division students participated in the Match this year but did not complete the survey, we were impressed with this statistic and the following results. We hope that these statistics are encouraging to geropsychology students who participate in the Match in the years to come.

First, we gathered some information regarding the type of doctoral program in which the students are currently enrolled:

- The majority (12/13) of students surveyed reported being currently enrolled in a Clinical Psychology PhD program, with the remaining student attending a PsyD program.

- Most students (7/13) reported their current doctoral program as having a geropsychology specialty training area. Two-thirds of students reported their doctoral program as being a member of the Council of Professional Geropsychology Training Programs (CoPGTP).

- Nearly all students reported that they have had multiple geropsychology training experiences their doctoral program thus far. Most (12/13) reported coursework in geropsychology, and all 13 students also reported clinical practicum training with older adults as well as research in aging.

Next, we inquired about the type of Internship program the student will be attending:

- The majority of students (11/13) reported their internship training will be in the VA setting. One student reported their training will be at a community mental health center, and one student reported their training will be at a university.

- The majority of students (9/13) said that their internship is a general clinical psychology program with geropsychology major rotation(s) available. Four students reported that their internship training program has a geropsychology specialty track.

- When asked what percentage of their internship training year will be geropsychology-focused:
  - 2 students reported 25%, one 3 month major rotation
  - 2 students reported 33%, one 4 month major rotation
  - 3 students reported 50%, two 3 month major rotations
  - 4 students reported 66%, two 4 month major rotations
  - 1 student reported that the entire training year will be geropsychology-focused

Finally, we asked students to share the name of their internship site and name if they felt comfortable in doing so. Congratulations to all internship-bound students!

- VA Salt Lake City Healthcare System
- VA Long Beach, Drew Petkus
- VA Palo Alto
- Boston Consortium in Clinical Psychology, Geropsychology track, Lindsay Gerolimatos
- VA Puget Sound, American Lake Division
- VA Puget Sound, American Lake Division, Annie Mueller
Announcements and Member News

This section of the newsletter highlights announcements relevant to the membership and the accomplishments of the Section’s members. If you have received any local or national awards, or want to let the Section know about recently accepted publications, or recently published books, please email updates to Erin Woodhead (Erin.Woodhead@sjsu.edu) and Kaci Fairchild (JenniferKaci.Fairchild@va.gov).

Announcements

Gero ABPP Application is now Online!

To submit materials, go to the ABPP webpage: (http://www.abpp.org/i4a/pages/index.cfm?pageid=3285). Click on ‘Applicants’ icon on top; then “Geropsychology” on the side; next “specialty specific requirements”, and then click #2 – “Complete online application”. It’s best if you complete the ABGERO application first (just to the right of the online application), so that you can upload it to complete the generic online application. If you have any questions regarding the general ABPP application process, please contact Diane Butcher (919-537-8031) office@abpp.org. For questions regarding the specifics of the ABGERO screening, contact Victor Molinari at vmolinari@usf.edu.

APA Convention Program Updates

CONVENTION PROGRAMMING UPDATE
Brian Yochim, PhD, ABPP
President-Elect

Aloha Clinical Geropsychology colleagues!

The APA conference in Honolulu will take place over five days (Wednesday July 31-Sunday August 4) to allow more relaxation time in Hawai‘i.

Below is a preview of some of the Clinical Geropsychology programming. Please note that, due to unforeseen circumstances, the 12/II social event has been cancelled, though see below for an invitation to the Division 20 social event on August 3.

Thursday, August 1, 8:00-9:50
Location: Convention Center 313A
Symposium Co-Sponsored by 12/II
Jennifer Moye, PhD, Chair  
Title: Training for Integrated Care with Older Adults: Real World Implementation and the Path Forward  
Thursday, August 1, 4:00-5:00  
Location: Pagoda Hotel, 1525 Rycroft Street  
12/II Board Meeting  

Friday, August 2, 8:00-8:50  
Location: Hilton South Pacific Ballroom II  
12/II Presidential Address and Business Meeting  
Amy Fiske, PhD  
Title: The Road Ahead for Clinical Geropsychology: Challenges and Opportunities  
Friday, August 2, 9:00-9:50  
Location: Hilton South Pacific Ballroom II  
Note: All three 12/II awards will be presented at this session  

M. Powell Lawton Award for Distinguished Contributions to Clinical Geropsychology:  
Victor Molinari, PhD  
Title: Developments in Competencies and Specialization in Geropsychology  
12/II Distinguished Mentorship Award: Jennifer Moye  
12/II Student Paper Award: Philip Sayegh: Assessment and Diagnosis of Dementia in Hispanic and Non-Hispanic White Outpatients (advisor: Bob Knight).  

Saturday, August 3, 3:30-5:00  
The APA Committee on Aging (CONA) cordially invites you to the CONA Conversation Hour:  
A Conversation with Antonette Zeiss, PhD  
The 2013 Outstanding Lifetime Contribution to Psychology Award Recipient  
Hilton Hawaiian Village, Tapa Tower  

Saturday, August 3, 6:30pm  
12/II Members are invited to join the Division 20 Social Event  
Elks Lodge  
2933 Kalakaua Ave  
Honolulu, HI 96815  

$25 per person, $40 per couple, $50 per family, $15 per student  
RSVP and Payment by July 24: Please make checks out to Patricia Parmelee and mail to Center for Mental Health & Aging, The University of Alabama, Box 870315 - 207 Osband, Tuscaloosa, AL 35487-0315  
pparmelee@ua.edu  

For a list of sessions on aging issues, prepared by the APA Office on Aging:  
Call for Papers: Journals of Gerontology: Psychological Sciences

Special Issue on the Science of Clinical Geropsychology

The Journals of Gerontology: Psychological Science is announcing a special issue on “The Science of Clinical Geropsychology” to be published early in 2015. Forrest Scogin of the University of Alabama will be the special issue editor.

We are calling for original manuscript submissions that evidence high quality, innovative work that advances the science of clinical geropsychology. Potential topics include but are not limited to psychopathology, intervention research, prevention research, policy and training. Theoretical reviews that substantially advance the scientific understanding of a topic in clinical geropsychology are welcome, but should be cleared with Forrest Scogin and with Bob Knight in advance.

Manuscripts should be submitted by September 1, 2013 via Manuscript Central to JG:PS. Check “yes” to the query about submission to a special issue and type “clinical geropsychology” in the box.

The special section is expected to be published around January, 2015.

Bob G. Knight, Ph.D.
Editor, Journal of Gerontology: Psychological Sciences

Member News

Awards and Recognitions

Michael Smyer, PhD is the recipient of the APA Committee on Aging’s 2013 Award for the Advancement of Psychology and Aging. CONA is pleased to recognize Dr. Smyer’s significant contributions to research, education and training, practice, public interest, and public affairs in psychology and aging. Dr. Smyer has been a longstanding and consistent advocate for addressing the mental health needs of older adults.

This year, the CONA Award will be presented in New Orleans, the site of this year’s Gerontological Society of America’s Scientific Meeting, rather than at APA. Information regarding day and time will be shared as soon as determined. We hope to see you there!

Philip Sayegh, MA (University of Southern California; advisor: Bob G. Knight, Ph.D.) received a Certificate of Recognition from the APA for being selected as a finalist for the Anne Anastasi General Psychology Graduate Student Award

Philip Sayegh, MA (University of Southern California; advisor: Bob G. Knight, Ph.D.) was selected as the recipient of the 2013 APA Division 12, Section II Annual Student Paper Award for the following publication:

Paula Hartman-Stein, PhD, obtained a $30,000 grant from the H. Peter Burg Fund to develop a 6-part series of community-based group programs (Caring for the Carer) that uses psychological and spiritual coping strategies for caregivers of older adults with physical, emotional, or cognitive frailty. Heart to Heart
Communications in Akron, Ohio, is sponsoring the program that will be offered in churches and area businesses.

**Recent Member Publications**


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**Committee Updates**

**Public Policy Committee Update**

*Submitted by Margie Norris, PhD and Mary Lewis, PhD, Committee Co-Chairs*

The PPC now has information and links for all the Medicare MAC’s on the GeroCentral website at gerocentral.org/policy-advocacy/medicare/ and on the PLTC website within the Members Only section. The MAC information for each state includes the MAC’s name, web address, and phone number and clickable links for the Local Coverage Determinations (LCDs) for diagnostic and outpatient therapy, health and behavior services, psychological and neuropsychological testing, and incident to services. The MAC LCD information will change periodically, so please be aware of this. Also, stay tuned for a GeroCentral Blog post by Margie Norris regarding Medicare MAC’s and LCD’s.

The PPC is looking for new members to assist with our mission and goals. Responsibilities of PPC members may include participation in conference calls, reviewing MAC’s websites for updated information and assisting with updates for the LCD/MAC information for GeroCentral, 12/II and PLTC’s webpages, writing letters regarding policy updates and advocacy issues to Senators and Representatives, to name a few. Please contact Margie Norris (margienorris@hotmail.com) or Mary Lewis (marylewisphd@gmail.com) if you would like to join. We welcome any and all interested: students, ECP’s, mid- and late-career individuals.

**Membership Committee Update**

*Submitted by Rebecca Allen, PhD and Morgan Eichorst, BA*

Current Membership

333 Paid Members (328 in May 2013)
- 246 Regular Members (243 in May 2013)
- 87 Student Members (85 in May 2013)
As the summer months heat up, we want our membership numbers to do the same! Until the new, accessible website is available for members to check when their dues are up, we still struggle as a Division to remain up-to-date on payments.

Before the transition of Membership Committee staff at the beginning of 2014, the current Chair and Graduate student assistant hope to achieve the goal of contacting each lapsed member to encourage them to renew their membership. Special focus will be given to reconnecting with student members lost when they transitioned into professional roles.

**Division 12 Update**

*Submitted by Michele Karel, PhD, Representative for Division 12/II*

Michele.Karel@va.gov

Thank you to Dr. Becky Allen, 12-2 Membership Chair, for substituting for me to represent our Section at the Society of Clinical Psychology Board of Directors conference call on Wednesday, June 12, 2013.

Here are some updates from Division 12:

**Elections 2013.** Division 12 election results: President-elect: Terence Keane, PhD; Secretary: John Linton, PhD; Division Representative to APA Council (1-year term): David Smith, PhD; and Division Representative to APA Council (3-year term): Brian Carpenter, PhD. Congratulations to 12-2 member Dr. Brian Carpenter!!

**Nominations 2014.** Div 12 will be seeking nominations for President, Treasurer, and Council Representative for 2014 election. In addition, Division will be seeking new Editor and Associate Editor of the *The Clinical Psychologist* in 2014. If you have interest in being nominated, or ideas about geropsychologists for leadership roles in the Division, please do let me know.

**Treasury.** Division 12 is a bit below budget for 2013, in part due to decreased membership. It is unclear at this point how the current APA budget deficit may affect the Division.

**Membership.** Ongoing discussion of membership loss. Survey of non-renewers finds feedback that there are not enough specific benefits from Division 12 membership; other professional homes are more closely aligned to what people are doing in their professional lives. Discussion of outreach to and benefits for student members. There is no plan to increase Division membership dues.

**APA Convention.** For those of you who will be in Honolulu, Division 12 has 70 hours of programming, 24 hours of which is Section programming. Kudos to Dr. Katie Witkiewitz, Chair of Division’s 2013 Program Committee, for putting together excellent program. Check out three invited speakers: Nadine Kaslow (The Grady Nia Project), David Barlow (Diversity in Dissemination and Implementation of Practices: The Challenges Ahead), and Josef Ruzek (Implementation of Best Practices in PTSD Research). There will be no Division 12 hospitality suite this year due to cost. Note that the Division 12 Award Ceremony will be held in Coral Ballroom A on Thursday night from 6:00 to 8:00 pm. For information about award winners, see the spring issue of *The Clinical Psychologist*, at [http://www.div12.org/TCPs/TCP_Spring2013.pdf](http://www.div12.org/TCPs/TCP_Spring2013.pdf). Note that Distinguished Student Research and Distinguished Student Service award winners will also be announced at convention. (Students and Faculty: Do consider applying for Division 12 student awards – no one was nominated this year for the Div 12 Student Practice Award!)
**Continuing Education Initiative.** The Division continues to plan a monthly webinar series, with months alternating between a luminary speaker and an early career/professional development focus. The idea is to provide a membership benefit, and to help retain early career folks in the Division. The project committee, chaired by Dr. Deb Drabic, will be reaching out to Sections to contribute possible speakers or professional development topics. The committee would welcome any assistance! Let me know if you are interested.

**Principles for Training in Evidence Based Psychology: Models for the Graduate Curricula in Clinical Psychology.** See this link at the Division 12 website for report written by the Division 12 Task Force on Teaching Evidence-Based Practice in Clinical Psychology (Gayle Beck, Chair; Louis Castonguay, Andrea Chronis-Tuscano, E. David Klonsky, Lata McGinn, and Eric Youngstrom): http://www.div12.org/FilesDocs/Principles_for_Training_2.htm

**Phone calls with Section leaders.** Div 12 President Mark Sobell initiated phone meetings with each Section’s leadership in order to stimulate communication and collaboration between Sections and Division and, hopefully, between Sections. Dr. Sobell and Div 12 President-Elect Dr. David Tolin, and Division Administrative Office Lynn Peterson met with the Section 2 Board on March 12, 2013. Topics discussed included anticipated decline in Convention hours in the future and strategies for Divisions, and Sections within Div 12, to collaborate; opportunities for Sections to highlight updates on topics of broad interest in *The Clinical Psychologist*; and cost challenges for bringing all Section representatives to annual Division Board meeting (with possible consideration of videoconferencing; issue not resolved).

**Clinical Psychology Science and Practice:** New Editor is Dr. Gayle Beck.

**Website.** It has been a difficult year for Div 12 website (www.div12.org), with technical problems and changes in technical support people. A search is on for an Editor for the Empirically Supported Treatments section of the website. Div 12 has decided not to pursue advertising on the website. Web Editor, Dr. Damion Grasso, spoke of need for content generators for the website, including ideas of greater student involvement, spotlights on senior members, information for practicing professionals, and Section contributions. Any ideas are welcome.

**Fellowship Committee.** Chaired by Dr. Michelle Newman, Fellowship Committee has done outreach to members for Fellowship application and forwarded nominations to APA. Deadline for APA Fellowship application is December 1st.

**Diversity Committee.** Dr. Cheryl Boyce reported on conference call with Section diversity reps, plans for a Society survey, and plans for a grant proposal. Thanks to Section 2 Diversity Committee Chair Dr. Yvette Tazeau for representing our Section to Division 12 efforts.

**Council Reports.** Division 12 Representative to APA Council, Dr. Irv Weiner, provided update at Board meeting (Drs. Larry Beutler and Danny Wedding are the other Div 12 Council Representatives). APA budget deficit this year due in large part due to lack of renewal of publications; most of APA operating revenue comes from publications. The APA Good Governance Project update: APA Council appears divided between maintaining status quo or re-designing governance from scratch. There is Task Force on educating and training psychologists in ACD-10 in 2014. Funds have been allocated for efforts on guidelines for telepsychology, and the prediction and prevention of gun violence.
Students and early career investigators are invited to attend….

Speed Mentoring: Building Research Careers in Geropsychology and Neuropsychology

This *interactive* mentoring program will include:

- Brief presentations about navigating entry into a research career and involvement in multidisciplinary and collaborative research
- Informal small-group and one-on-one discussions on issues regarding the development and implementation of early career research programs with prominent, senior investigators in geropsychology and neuropsychology
- **Refreshments provided**

**Saturday, August 3, 2013**
12 noon – 1:50 PM
**Hilton Hawaiian Village Beach Resort, Iolani Suites V, VI, VII**
2nd Floor- Tapa Conference Center

Sponsored by:
- Division 20 (Adult Development and Aging)
- Division 40 (Society for Clinical Neuropsychology) Science Advisory Committee
- APA Committee on Aging
- APA Committee on Early Career Psychologists

Cochairs: Jennifer Vasterling, PhD & Susan Krauss Whitbourne, PhD

**Confirmed Mentors**

Lauren Ayr, PhD, Connecticut Resource Group, LLC
Heather Belanger, PhD, University of South Florida
Neil Charness, PhD, Florida State University
Munro Cullum, PhD, UT Southwestern Medical Center
Monica Rivera Mindt, PhD, Fordham University
Victor Molinari, PhD, University of South Florida
Patricia Parmalee, PhD, University of Alabama
Jennifer Vasterling, PhD, VA Boston Healthcare System/Boston University School of Medicine

Erin Bigler, PhD, Brigham Young University
Jamila Bookwala, PhD, Lafayette College
Suzanne Corkin, PhD, MIT
John DeLuca, PhD, Kessler Foundation, NJ
Denise Park, PhD, UT Dallas
Jennifer Moe, PhD, VA Boston/Harvard University
Forrest Scogin, PhD, University of Alabama
Susan Krauss Whitbourne, PhD, University of Massachusetts – Amherst

**For additional information about this research mentoring program contact:** Shawn McClintock, Ph.D.
Shawn.mcclintock@duke.edu
Did You Know…

- That the Society has two Facebook pages?
  - One is for all members: https://www.facebook.com/#!/ClinicalGeropsychology
  - The second is for student members: https://www.facebook.com/groups/53793187809/
- That you can spotlight members with a newsletter submission? If you’re interested in doing this, email the newsletter editors!
- That you can receive listserv messages in a daily digest form? Go to http://listserv.wvu.edu/archives/wvuger-l.html and click on “Join or Leave WVUGER-L” to manage your listserv settings.
- That you should encourage your colleagues and students to join the Society? Please distribute the membership form on the next page to encourage others to join!

2013 Officers of the Society of Clinical Geropsychology

President: Amy Fiske
President Elect: Brian Yochim
Past President: Erin Emery
Secretary: Sherry Beaudreau
Treasurer: Norm O’Rourke
Division 12 Representative: Michele Karel
Nominations and Elections Committee: Erin Emery
Mentoring Committee Chair: Julia Kasl-Godley
Membership Committee: Rebecca Allen (Chair) and Morgan Eichorst
Newsletter Editors: Erin Woodhead & Kaci Fairchild
Awards Committee Chair: Barry Edelstein
Training Committee Chair: Erin Emery
Interdivisional Healthcare Committee Chairs: Margie Norris and Cheryl Shigaki
Student Representatives: Jeffrey Gregg and Annie Mueller
Diversity Committee Chair: Yvette Tazeau
Public Policy Committee: Margie Norris and Mary Lewis
Continuing Education Committee Chair: Michelle Hilgeman
**APA Division 12, Section II: The Society of Clinical Geropsychology**  
2012 MEMBERSHIP DUES FORM  
RENEW ONLINE AT: http://www.geropsychology.org/membership-application

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**APA Member No.** (Required)  
(You must be a member of APA to join Section II. Student applicants must have their application endorsed by a faculty advisor who is an APA member)

**APA Membership Status** (Please check one)  
____Fellow   ____Member   ____Associate   ____Emeritus (retired member of APA)   ____Student Member  
(graduate, internship, postdoc)

**Street Address**

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**E-mail ___________________________________________________________**  
(Note: Your email address is crucial for our records, and therefore strongly encouraged)

_____ Check here to opt OUT of the LISTSERV  
_____ Check here to opt OUT of the membership directory

Are you a member of Division 12 (The Society of Clinical Psychology)?  
| ___Yes | ___Yes (as a student) | ___No |

Please list other Divisions and Societies you are affiliated with:

Please list your special Interests within Geropsychology

**What is your PRIMARY emphasis as a Geropsychologist?** (Define primary as 51% or greater)  
____Clinical practice   ____Research   ____Teaching   ____Administration

**PAYMENT OF DUES (USD)** – Please check one of the following boxes:  

- $35 for 1-year membership  
- $100 for 3-year membership  
- $10 for 1-year student membership  
- Emeritus members are dues exempt  

| B. Added Contribution to Section II (donations are strictly voluntary, but greatly appreciated!) |
| $________ |

| C. Total Amount Enclosed (Please make your check in U.S. dollars payable to APA Division 12, Section II) |
| $________ |

**Signature**  

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**Faculty endorser** (if joining as student)  

**Faculty Signature**  

| Date |

Mail this form, along with your check payable to “APA Division 12, Section II” to Norm O'Rourke, Ph.D., R.Psych. IRMACS Centre, Simon Fraser University, 8888 University Drive, Burnaby (BC), Canada V5A 1S6

*Please be aware that an $0.85 stamp is required if mailing from the U.S.*