



INBALANCE

Fall 2024

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President's Message

By Andrea Chronis-Tuscano, PhD

Caregivers need care, too.

This month I want to highlight the U.S. Surgeon General, Dr. Vivek Murthy's recent advisory on the parent mental health crisis, entitled: Parents Under Pressure: The U.S. Surgeon General Advisory on the Mental Health and Well-Being of Parents. According to this report, in 2023, one-third of parents reported experiencing extreme stress over the past month, compared to only 20% of other adults; 48% reported that they are completely overwhelmed on most days, compared to 26% of other adults.

Awareness about youth mental health has grown considerably in recent years, and it is exciting to see this long-overdue focus on parent well-being, as well! After all, we can only get so far helping our youth without engaging and enlisting the help of parents! Given the heritability of many psychological disorders and the stress of parenting, parents may have unmet mental health needs that pose challenges with parenting and scaffolding their children's progress in therapy.

Many parents put aside their own needs for the good of their children. This has increased in recent years and contemporary terms like "overparenting" refer to the fact that many of today's parents are going above and beyond in terms of enrichment activities and packed schedules to a degree that most of us do not remember from our own childhood. Indeed, 70% of parents reported feeling like parenting is far more stressful than it was 20 years ago. It is very likely that social media (or the "culture of comparison," as Dr. Murthy astutely put it) is leading many parents to have high, often unrealistic, expectations for themselves and their children, which can lead to feelings of guilt and inadequacy.

Stress is, of course, compounded for parents living in **poverty**, who are additionally concerned with housing and/or food insecurity, neighborhood safety, social isolation, and the like. A whopping one in four parents in the U.S. said that there have been times in the past year when they didn't have enough money to cover basic needs. Dr. Murthy's report highlighted that families living with social disadvantage are especially in need of support and policies to enhance their well being, for their sake and their children's. We simply need to do better.

What can we, as mental health providers and clinical researchers, do to help?

First and foremost, we can take a moment to ask parents how they are doing, and to give them time and space to express their thoughts and feelings. Some might challenge us and say that parent mental health is outside our purview as clinical child and adolescent psychologists; however, **parent mental health is highly relevant to our clinical work on parenting and child's mental health.** Indeed, decades of

research (including from my own lab) demonstrates the profound impact of parent mental health on child mental health.

Now, not all parents will feel comfortable talking about their own mental health. But, over time, as they come to trust their provider, hopefully that will change. It is important to recognize that all parents, not just those with a diagnosis, could benefit from well-established cognitive-behavioral tools like pleasant activities scheduling, thought challenging, mindfulness, acceptance, and organizational skills. Integrating these parent-focused components into our evidence-based treatments (EBTs) for youth could be helpful. Research conducted in my lab has shown that parenting interventions for youth with ADHD that integrate a parent mental health component result in better outcomes than a standard parenting program without a focus on parent mental health.

Our research should continue to incorporate a focus on how to support parents' mental health and wellness, including: how to screen in a manner that is acceptable to parents; how best to raise such discussions sensitively for parents from different cultures; when to incorporate parent wellness into child therapy; and when to refer out. In line with the theme of the 2024 APA Conference, qualitative approaches in which we ask parents about their lived experience with parenting and the day-to-day stressors they face can be particularly useful in helping us to understand how we can help.

Universally, we want to spread the message that parenting is not always easy, and normalize feelings of stress, perhaps by creating communities of parents who can support one another. Policymakers can work to acknowledge the challenges parents face and identify ways to support them. This is particularly necessary for parents living in poverty and isolation.

The evidence is clear that we simply cannot ignore parent mental health in our work with youth! I am thrilled to see Surgeon General Dr. Murthy using his platform to send the message that “caregivers need care, too.”

The Surgeon General's full report can be found [here](#).

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In Focus: Crisis Management in Childhood Mental Disorders – The Collaborative Work of a Village

By **Monica Arora, MD**, Child and Adolescent Psychiatric Inpatient Unit, CHI Health

& **Ayse Coskun, MD**, Creighton University School of Medicine

In addressing crises in childhood mental health disorders, a comprehensive, multidisciplinary approach is essential. The goal is to provide care that is tailored to the unique needs of each child and family, involving a diverse team that includes psychologists, social workers, psychiatrists, occupational therapists, recreational therapists, and music therapists. This approach ensures continuity of care across various settings—inpatient and outpatient. Our multidisciplinary team works together closely to provide integrated, patient-centered care. Daily rounds and collaboration between the psychiatrist, psychologist, and broader care team ensure that every aspect of the child's needs is addressed. Additionally, our team prioritizes teaching and training staff and residents, equipping them with the skills necessary to deliver high-quality mental health care to children in crisis.

Age of consent for mental health services varies by state and type of treatment. In most states, the age of majority is 18 although in Nebraska the age of majority is 19. Although a minor who is 18 years old may consent to mental health services. Parents or legal guardians must consent to the treatment of minors under the age of 18.

The Mental Health Continuum of Care

Navigating through the process can be challenging. Our program offers integrated child- and family-centered care through the spectrum of services. The services are organized into a coordinated network to meet the diverse and changing needs of our patients and their families within the system and also collaboration with different child serving agencies within the community. Emphasis is on serving the youth and their families in the least restrictive setting that meets their needs. Services include outpatient, partial hospital program, residential program and psychiatric immediate care clinic (PICC). Before inpatient or residential hospitalization is considered, families should utilize available services across the child mental health continuum of care. Service options at various levels of care are described below.

Outpatient services

Our program is community-based psychiatry and behavioral health services and offers outpatient psychiatry and psychological evaluation services by the team of

psychiatrists, nurse practitioners and psychologists. The focus is on promoting mental health through direct care, research, training, family support groups and collaborative treatment.

To assist with the access to care we have a psychiatry immediate care clinic. This clinic offers immediate access to a psychiatrist and mental health therapist. The goal of this clinic is to provide crisis intervention and bridge the gap in services until the patients and families can be established with appropriate outpatient services.

Inpatient Admission Process and Criteria

Understanding the admission process can help outpatient providers and families navigate the system more efficiently. Referrals for inpatient treatment often come from outpatient providers or emergency services, particularly when a child's situation meets the American Academy of Child and Adolescent Psychiatry (AACAP) criteria for acuity and crisis management. Factors such as acuity, or the severity of the symptoms and imminent danger to self or others, and whether it's a first-time admission or a return to inpatient care play a role in determining whether hospitalization is appropriate. Some cases, however, may not warrant inpatient admission, such as children who visit the emergency room but are better served by lower levels of care.

Acute Care and Crisis Intervention Unit

Once admitted to our inpatient unit, the average stay is 2-5 days, with the primary focus on acute care and crisis intervention. Patients' treatment plan is established through the multidisciplinary team approach. Services include daily psychotherapy, participation in the therapeutic milieu, case management services, psychiatric evaluation, family-care team communication, appropriate referrals, and coordination of care if already have established outpatient care and outreach services. Our family care team approach includes a care conference that is held within 24 hours of admission, during which the psychiatrist contacts the family to discuss the child's needs and priorities for treatment.

Throughout hospitalization, patients work closely with their therapists to identify personal goals and family therapy sessions are organized to ensure caregivers are involved. The therapeutic team also assesses potential community resources, medications, and safety planning to ensure the child is adequately supported after discharge.

Discharge Planning and Connecting Families with Resources

Discharge planning is led by a dedicated discharge coordinator, who works to tailor the plan to each patient's specific needs. This includes the creation of a safety plan in collaboration with the family, as well as ensuring follow-up care is arranged. The 7-day discharge plan aims to bridge the gap to routine care by scheduling at least one appointment with an outpatient provider within the first-week post-discharge. If the

family's regular provider is unavailable or if the family has never established care with outpatient providers, PICC services or other psychotherapeutic support is provided. Additional resources, such as Families Forever (for adopted children and parents), developmental disability services, and substance use disorder assessments, are available to assist families with specific needs.

Intensive Outpatient Programs and Partial Hospitalization Program

For children who no longer require inpatient care but still need structured interventions, intensive outpatient programs (IOP) and partial programs provide a critical bridge. It provides intensive care for patients who need more than outpatient care but do not require 24-hour monitoring. Partial hospitalization programs (PHP) can help prevent hospitalization and facilitate safe discharges for children and adolescents who are struggling with emotional distress and dysregulation. PHPs can also support transition care for patients who may be awaiting residential care or who require long-term therapeutic intervention.

Partial programs typically run Monday through Friday, offering full-day (PHP) or half-day (IOP) sessions depending on the child's needs. An example of such a program is the Immanuel Medical Center's Partial Program, a 2-3-week program that includes a combination of medication management, psychotherapy, recreational therapy, music therapy, and family visits.

Psychiatric Residential Treatment Facility

When lower levels of care prove insufficient, residential programs, also known as PRTF, offer a longer-term treatment option. Children typically stay 8-16 weeks, with the program length determined by clinical needs and insurance. Residential care is reserved for cases where other levels of care have been exhausted. These facilities differ from inpatient units in that they offer subacute care, including an academic program to help patients maintain progress toward educational goals and opportunities to transition back into the community with extended home visits and overnight visits with family. Children can also transition back to the school.

The Role of Psychiatrists and Psychologists in Collaborative Care

At every level of care, psychiatrists and psychologists work together to provide comprehensive care. Psychologists play a crucial role in completing cognitive assessments, including IQ and adaptive functioning testing and diagnostic clarification. They collaborate with the clinical team to implement evidence-based interventions tailored to each patient's needs. Daily multidisciplinary rounds, involving physicians, trainees, therapists, and discharge coordinators, ensure that treatment plans are physician-guided and reflect the contributions of the entire team.

In conclusion, effective crisis management in childhood mental health disorders requires a collaborative, village-like approach. By leveraging the strengths of a

multidisciplinary team, connecting families with essential resources, and ensuring continuity of care, we strive to meet the complex needs of children at every stage of the mental health continuum.

Resources:

[https://www.aacap.org/AACAP/Policy_Statements/1989/
Inpatient Hospital Treatment of Children and Adolescents.aspx](https://www.aacap.org/AACAP/Policy_Statements/1989/Inpatient_Hospital_Treatment_of_Children_and_Adolescents.aspx)

Expert Recommendations: Suicide Prevention Resources for Clinicians and Caregivers

By Lucas Zullo, PhD

Clinical Director of the David Farber ASPIRE Center at Thomas
Jefferson University

Lucas Zullo is a clinical psychologist and expert in youth suicide prevention. He is the Clinical Director of the David Farber ASPIRE Center at Thomas Jefferson University in Philadelphia. The ASPIRE Center is a suicide prevention specialty center that provides evidence-based care through a family focused and trauma-informed lens. Dr. Zullo has expertise in Cognitive Behavioral Therapy (CBT) and Dialectical Behavioral Therapy (DBT) and has trained hundreds of providers across the country in evidence-based approaches for youth depression and suicide prevention through the National Child Traumatic Stress Network (NCTSN) as a part of the UCLA-Duke ASAP Center. He is also an on-call consultant for 988 and the Trevor Project. Dr. Zullo's research is focused on youth suicide prevention, with an emphasis on improving care for LGBTQ+ youth at risk for suicide. In recognition of September as Suicide Prevention month, we asked Dr. Zullo to share helpful resources for clinicians and caregivers.

Here is his list:

1. Zullo, L., Seager van Dyk, I., Ollen, E. W., Ramos, N., Asarnow, J. R., & Miranda, J. (2021). Treatment recommendations and barriers to care for suicidal LGBTQ youth: A quality improvement study. *Evidence-Based Practice in Child and Adolescent Mental Health*, 6(3), 393-409. <https://doi.org/10.1080/23794925.2021.1950079>
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8. Ryan, C. (2019). Family behaviors that increase your LGBTQ child's health and well-being [Flyer]. Family Acceptance Project. <https://familyproject.sfsu.edu/posters>

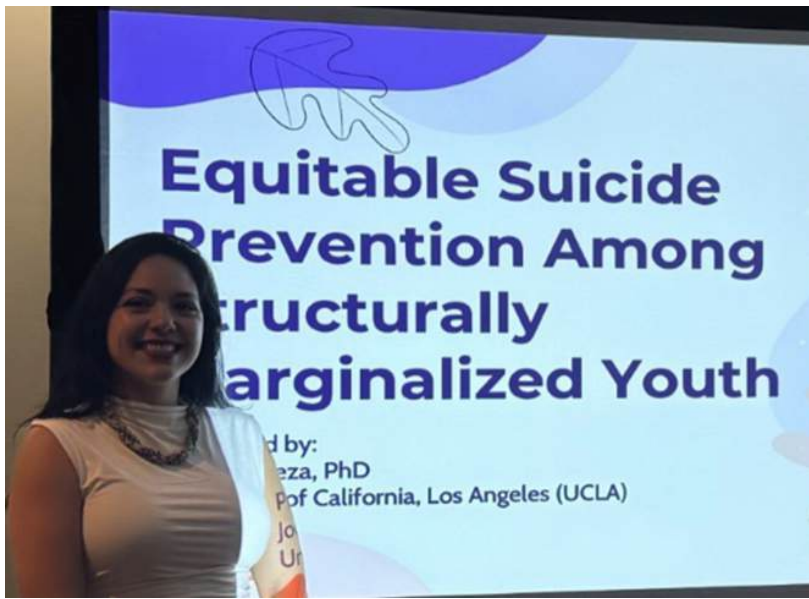
APA 2024 IN SEATTLE WAS ONE FOR THE BOOKS!

By **Nicole Lorenzo, PhD** (Program Co-Chair)
& **Kelsie Okamura, PhD** (Program Co-Chair)



It is our honor to have shared the experience of APA 2024 with amazing presenters and attendees and the SCCAP community. We are inspired by the work you all are doing and presented in Seattle, WA for the 2024 APA convention! It was a wonderful experience to be able to come together in person to share knowledge and passion about the field of clinical child and adolescent psychology. The Social Hour and 25th Anniversary panel were special highlights, with time for friends and colleagues to reconnect and new relationships to form!

Our SCCAP program at the 2024 APA convention was a reminder of how far we've come and the work there is still to do! We had the unique opportunity to hear from our past presidents Dr. Yo Jackson, Dr. Elizabeth McCauley, Dr. Joan Asarnow, and Dr. Steve Lee in an exciting panel. Our distinguished career award winners Dr. Ann Masten and Dr. Jarrod Leffler provided us with perspectives on resilience in development using multisystem models and treating youth in need of acute intensive interventions, prospectively. Our early career diversity award winner, Dr. Jocelyn Meza also presented her work on equitable suicide prevention among structurally marginalized youth.



Our members also engaged with our programming at the “Space Noodle” including events held by the Leadership Education to Advance Diversity (LEAD) program and our Special Interest Groups (SIGs). We hope this type of informal programming provided you with the opportunity to learn more about SCCAP and that type of opportunities available, as well as networking and sharing with members within the SCCAP community. If you were not able to attend the Main Stage and Feature Stage programming, you can still access presentations at <https://convention.apa.org/> on demand if you registered for APA.



We are hopeful that these presentations at APA 2024 will inspire you to stay engaged with SCCAP until next year’s conventions!

2025 will be an exciting year for SCCAP!

APA in Denver

APA 2025 will be held in Denver, Colorado from August 7-9. We are thrilled to add Co-Chair, Sarah Dickinson, Ph.D., to the convention programming team! Dr. Dickinson is an Assistant Professor of Pediatrics at the University of South Florida, with expertise in early childhood intervention for trauma and disruptive behavior disorders, trauma-informed systems of care, and equitable access to early intervention. We appreciate the tremendous contributions her unique perspective will bring to the team!

Posters, Symposia, and Skill-Building Sessions: Due Date TBA but likely January 2025

The SCCAP programming at APA provides you with the opportunity to dive into clinical child and adolescent psychology within the larger APA program. We look forward to receiving submissions for posters, symposia, critical conversations, and skill-building sessions. As always, we encourage individuals from marginalized and underrepresented groups to apply and share their unique perspectives, as well as proposals that represent the unique needs of underserved and/or underrepresented populations. Lastly, we value our members across settings and degree status (i.e., trainees, early career professionals, practicing psychologists, researchers, and academics) and encourage you to contribute and participate in the proposal submission process! Be on the lookout for the 2025 Call for Proposals portal on the APA website and on our listserv in late October/early November.

SCCAP Conference: The Inaugural

This coming year, SCCAP will be hosting our inaugural SCCAP conference at the University of Illinois, Chicago from June 5-7. Keynote speakers include Dr. John Weisz, Dr. Rebecca Ford-Paz, Dr. Sarah Burgamy, and Dr. Olivia Moorhead-Slaughter. Topics will include immigrant and refugee mental health, legal and ethical issues in gender affirming care, and multicultural issues in youth mental health. The conference will also provide opportunities for panel discussions, continuing education credits, networking, and presentations from our SCCAP Special Interest Groups (SIGs). The Leadership Education to Advance Diversity (LEAD) program and Clinical Practice Institute (CPI) sessions, that you all have become familiar with, will also be linked within the SCCAP conference. We couldn't be more excited about the inaugural SCCAP conference and look forward to seeing you all there! Also, keep a lookout for a call for poster submissions soon!

Please feel free to reach out to us at our SCCAP conference email address: APAConvention@sccap53.org. We are happy to give feedback and provide more information as you prepare your proposals.

SCCAP Conference Update

By Mary Louise Cashel, PhD
Chair, SCCAP Conference Planning Committee

Please mark your calendars and plan to attend the inaugural [SCCAP Conference](#) on June 6-7, 2025, in Chicago, Illinois. The conference will be held on the University of Illinois at Chicago (UIC) campus. Registration will open on January 15, 2025.

We are excited to bring you keynote speakers who will address working with gender-diverse, immigrant, and multicultural youth broadly. There will be opportunities to obtain CE credits and networking sessions for practicing professionals, researchers, and students.

Keynote Addresses:

- **Sarah E. Burgamy, PsyD** – PhoenixRISE – Owner, Lead Psychologist. Presenting on Legal/ Ethical Issues in Gender Affirming Care
- **Rebecca Ford-Paz, PhD** – Lurie Children’s Hospital of Chicago. Presenting on Immigrant/refugee mental health
- **Olivia Moorehead-Slaughter, PhD** – Boston University Chobanian & Avedisian School of Medicine and Boston Medical Center. *Presenting on Multicultural Issues in youth mental health*
- **John Weisz, PhD** – Harvard University. Celebrating the Past, Present, and Future of SCCAP

Juried Poster Sessions:

Students are invited to submit poster presentations on a research project, thesis, or dissertation. The poster session is a good opportunity for you to showcase your academic work and receive feedback from other scholars, faculty, and professionals in a context that is friendly, engaging, and supportive.

The Poster Application period closes December 1. \$300 and Ribbons will be presented for the four best overall posters. SCCAP Special Interest Groups will also award ribbons.

Please also note that the Clinical Practice Institute (CPI) and the Leadership Education to Advance Diversity Institute (LEAD) will both occur onsite the day before the conference on June 5.

For more details check out the [conference webpage](#) on [sccap53.org](#)!

We are looking forward to all these events and hope to see you there!

Updates From the SCCAP Student Development Committee

By Amanda Bennett & Hong Bui
Student Development Committee Co-Chairs

The SCCAP Student Development Committee (SDC) was formed in 2010 to provide students with an opportunity to become involved in SCCAP's governing activities. The SDC is responsible for initiatives geared toward supporting student development from undergraduate to postdoc at all stages in their career trajectories. Discover current SDC projects to help you take advantage of everything we offer and let us know what you would like to see more of!

What We've Been Up To:

- **Mentorship Program:** Thank you to Emily Shah and Caterina Obenauf for coordinating our Student Mentorship Program this year. Each summer the SDC Mentorship Program partners undergraduate students/graduate students interested in clinical child and adolescent psychology careers with graduate students/early career professionals in the field. More information about the SDC Mentorship Program is available [here](#). (Members will need to log in to their SCCAP account to view and sign up for the mentorship program.)
- **Internship Webinar:** The SDC organizes an annual webinar focused on applying to clinical internships every summer! This summer, the internship webinar included a fantastic panel of three internship training directors and one intern. Thank you to Dr. Kelly Lowry, Dr. Linda M. Fleming, Dr. Amanda Jensen-Doss, and Lindsay Druskin, M.S., for a wonderful panel. A recording of this year's webinar is available [here](#).
- **SDC at APA:** It was wonderful to meet some of our fellow SCCAP student members at the Student Social Hour at the APA Convention this past August. The SDC hosted a networking social hour for student members, and many new connections were formed. Thank you to those who stopped by to grab a bite, network, relax, and share thoughts on what they would like to see from the SDC!
- **Student Awards:** Thank you to Margot Barclay, Kristin Aho, and Jackie Corrigan for coordinating our Awards Subcommittee this year! Each year, SDC awards five **Student Achievement Awards** to undergraduate and graduate students in recognition of their contributions to the field (research and clinical work), as well as six **Professional Development Awards**, to fund student conference and/or training opportunities. This year, student awards will be announced during the fall

semester. Be on the lookout for awards application announcements this fall! To learn more about student award opportunities, please visit [this page](#).

What To Expect

- **Annual Joint Webinar:** The SDC collaborates with the student committee of Division 37 every year to organize a webinar focused on an area of graduate student development. This year's webinar will be hosted in October and focused on translatable skills to hone in graduate school. Keep your eyes on the lookout for an announcement with more information about the webinar and our special panel later this fall! We always welcome feedback to ensure we are best serving you, if there are any topics you would appreciate being discussed on the panel, please feel free to email us: students@sccap53.org!

Finally, we want to thank all of the students who applied to be a member of the SDC starting in 2025. We look forward to finishing 2024 strong and are excited for a productive 2025!

Congratulations to Our Graduates!

SCCAP would like to congratulate all of our student members who recently celebrated graduation! We are pleased to acknowledge this accomplishment and look forward to watching your careers develop.

Name	Degree	Year	Institution	Department
Adrian J. Hernandez	PhD in Counseling Psychology	2024	Western Michigan University	Counselor Education and Counseling Psychology
Alexis M. Brewe	PhD in Clinical Psychology	2024	University of Alabama	Psychology
Allison Paige Falls	BS in Psychology	2024	Duke University	Psychology & Neuroscience
Alvalyn Dixon-Gardner	BS in Clinical Psychology	2024	Tufts University	Clinical Psychology
Bodunde Damilola Seun	BS in Psychology	2020	Obafemi Awolowo University	Psychology
Borundiya Keerthi	MA in psychology	2024	Osmania University of Arts and Social Sciences	Psychology
Briana Williams	PhD in School Psychology	2024	Michigan State University	Department of Counseling, Educational Psychology, and Special Education
Casie Morgan	PhD in Medical/Clinical Psychology	2024	University of Alabama at Birmingham	Department of Psychology
Catalina Uribe Rini	PsyD in School Psychology	2024	Nova Southeastern University	College of Psychology
Chinwendu Duru	PhD in Combined Clinical Child/School Psychology	2024	The University of Texas at Austin	Educational Psychology
Daniella Ortiz	BS in Psychology	2024	New York University	College of Arts and Science
Danielle Citera	PhD in Child Clinical Psychology	2024	St. John's University, Queens, NY	Psychology
Dylan Giancarlo Aguirre	MA in Clinical Psychology (Clinical Research Emphasis)	2024	California State University, Northridge	Psychology
Elizabeth Capps	PhD in Clinical Psychology	2024	Ohio University	Psychology
Emily C. Kemp	PhD in Clinical Psychology	2024	Louisiana State University (LSU)	Psychology
Emily McNamara	BS in Psychology	2023	University of Miami	Psychology

Emily Scarpulla Raymond	PhD in Clinical Psychology	2024	University of Maine	Psychology
F. Nanda Mamane	PhD in Clinical Psychology	2023	Nova Southeastern University	College of Psychology
Grace Margaret Bartholomae	BS in Psychological Sciences	2024	Loyola University of New Orleans	Psychology
Irene Jacobs	PhD in Clinical Child Psychology	2024	Virginia Commonwealth University	Department of Psychology
Irene Zhang	PhD in Clinical Psychology	2024	The Catholic University of America	Psychology
Jae Hyung Ahn	PhD in School Psychology	2024	Lehigh University	College of Education
Jasmine Ionie Hobson	MA in Clinical Psychology	2024	Michigan School of Psychology	
Jaylynn Floyd	BS in Psychology	2024	Virginia Commonwealth University	Psychology
Jee Ern (Grace) Nga	MA in Clinical Psychology	2024	Northwestern University	Department of Psychiatry and Behavioral Sciences
Jennifer Kurian	PhD in Clinical Psychology	2024	Illinois Institute of Technology	Psychology
Jesus Solano-Martinez	PhD in Clinical-Child Psychology	2024	DePaul University	Psychology
Jiselle Cervera	PsyD in Clinical Psychology	2024	University of Indianapolis	College of Applied Behavioral Sciences
Justyce L.P. Harris	Bachelor of Arts in Liberals Arts and Sciences	2024	University of Illinois Chicago	Psychology
Kahyah Pinkman	PhD in Educational Psychology/School Psychology	2024	University of Georgia	Educational Psychology
Kate Homer	BS in Psychology	2024	Brigham Young University	Psychology Department
Katie Galbraith	PhD in Clinical Psychology	2024	University of Southern California	Clinical Science
Kelsey Jong	PhD in Clinical Psychology	2024	Eastern Michigan University	Department of Psychology
Kristin Aho	PhD in Clinical Psychology	2024	Eastern Michigan University	Psychology
Lauren Eales	PhD in Developmental Psychopathology and Clinical Science	2024	University of Minnesota	Institute of Child Development
Li Shen (Jesslyn) Chong	PhD in Clinical Psychology	2024	University at Albany, State University of New York	Psychology

Liam Davis-Bosch	BA in Psychology and Data Science	2024	Pitzer College	
Lisa Toler	MA in general psychology	2024	University of Arizona Global Campus	
Maria Jimenez-Salazar	PhD in Clinical Psychology	2024	Fordham University	Psychology
María Paula Yávar Calderón	BA in Psychology	2024	University of Texas at Austin	Psychology
Meghan Dontha	BAH in Psychology	2024	Stanford	Psychology
Melissa Engel	PhD in Clinical Psychology	2024	Emory University	Psychology
Olaofe Abayomi Israel	MEd Early Childhood Education	2024	Lagos State University, Ojo, Lagos	Educational Foundations and Counselling Psychology
Page Suzanne Perey	MA in Applied Child & Adolescent Psychology: Intervention & Prevention	2024	University of Washington	Psychology
Puja Prashant Patel	PhD in Clinical Psychology	2024	University of North Carolina at Greensboro	Psychology
Rabia Brown	Master of Arts in Counseling Psychology	2024	University of Maryland, College Park	Department of Counseling, Higher Education, and Special Education
Raquel Rose	PhD in Clinical-Counseling	2024	New York University	Applies Psychology
Rose Haley	BS in Psychological and Brain Sciences	2024	The Catholic University of America	Psychology
Sarah Ahmed-Weidmna	BS in Psychology	2023	Siena College	Psychology
Sarah Jessica Gann	PsyD	2024	Indiana University of Pennsylvania	Psychology
Sophia Magro	PhD in Developmental Psychopathology and Clinical Science	2024	University of Minnesota	Institute of Child Development
Tia Tyndal	PhD in Clinical Psychology	2024	The Catholic University of America	Psychology
Tiffany Dangleben	School Psychology	2024	North Carolina State University	Psychology
Zoe Adogli	MA in Clinical Psychology	2023	Temple University	Psychology and Neuroscience

**Note: If you are a student member who missed this year's call to have your name included above, it's not too late to be recognized! Please email your name and graduation information to Lindsay Holly at InBalanceEditor@SCCAP53.org if you would like to be included in the Fall 2025 announcement!*

Fall 2024 Treasurer Update

By David A. Langer, PhD, ABPP
SCCAP Treasurer

I am pleased to report that our society remains in strong financial condition, using our funds to support the many projects and initiatives that further our society's mission. In this column, I will summarize the financial updates I presented at APA:

- Our total assets, the vast majority of which (~90%) are in our protected endowment continue to put us on sound financial footing and have grown considerably (~56% growth in the past 5 years). This growth is a combination of investment gains and careful management of society income resulting in multiple budget surpluses in recent years.
- With our strong financial base, we have not raised membership dues in nearly 20 years, and we continue to provide free membership to students.
- We have used our funds to support a myriad of member-benefit initiatives in recent years, including: our Clinical Practice Institute, Special Interest Groups, webinars, LEAD Institute, Future Directions Forum, awards for those in training and those being recognized for their distinguished careers, the establishment of our practice-oriented journal (*Evidence-based Practice in Child and Adolescent Mental Health*), public- and member-facing websites, newsletters (like this one!), and conference programming at APA.
- The SCCAP board approved a preliminary version of our 2025 budget at the 2024 APA Convention and will vote on a final 2025 budget when the board's executive committee meets for their midwinter meeting in early 2025.
- Lastly, a new endeavor, which we are excited to fund exclusively, is the upcoming 2025 SCCAP Conference. We hope to see you there!

Leading into the Future with SCCAP LEAD Institute

By Erlanger “Earl” Turner, PhD

Chair, Leadership Education to Advance Diversity (LEAD) Institute

This year marked 5 years since SCCAP launched the [Leadership Education to Advance Diversity \(LEAD\) Institute](#). To celebrate this milestone, LEAD collaborated with the Diversity Committee to host a thought-provoking fireside chat at the 2024 APA Convention in Seattle. The fireside chat entitled “LEADing us Forward”, focused on exploring valuable lessons learned through LEAD about professional and career development. The panel featured insights from distinguished LEAD fellows Dr. Tahlia Bragg (a 2021 fellow and Clinical neuropsychology postdoctoral associate at Boston University) and Dr. Jasmin Brooks Stephens (a 2023 fellow and postdoctoral fellow at Harvard Medical School).



Since its inception in 2019, the LEAD Institute has made a significant impact, engaging over 100 SCCAP students and early career professionals (ECPs) over the past five

years. LEAD fellows have explored a diverse range of topics including cultural competence, media psychology, salary negotiation, and leadership challenges. During the recent fireside chat, Drs. Tahlia Bragg and Jasmin Brooks Stephens reflected on how LEAD has been instrumental in advancing their careers and fostering valuable peer mentorship opportunities. This event, held at the APA Convention, has become a key platform for fellows to reconnect during the off years between institutes. Looking ahead, we are eager to continue this tradition, expand virtual opportunities to stay connected, and host the next LEAD Institute in 2025.



Call for Applications – 2025 LEAD Institute

We are thrilled to announce the application process to select the 4th LEAD cohort! The upcoming LEAD Institute will take place at the University of Illinois Chicago on June 5, 2025. Fellows will receive travel and housing accommodation, free CEUs, and registration for the SCCAP conference. To apply and learn more, please visit the SCCAP website at [LEAD's vision remains steadfast in advancing diversity, equity, inclusion, and belonging](#). I look forward to collaborating with the committee to design an engaging and impactful one-day conference that fosters learning and sense of community.

The 2025 LEAD Committee members are:

- Randi Cheatham-Johnson, PhD
- Trista Perez Crawford, PhD
- Lynda Gibson, PhD
- Melissa Hall, MA
- Khiela Holmes, PhD
- Joyce Lui, PhD
- Briana Williams, PhD

Co-chairs:

- Erlanger Turner, PhD
- Marilyn Sampilo, PhD, MPH

Election Results

Please join us in congratulating the newly elected SCCAP Board members:

- President-Elect: Adam Lewin, PhD, ABPP
- Secretary: Michael Meinzer, PhD
- Member-at-Large – Membership and Public Interest: **Nicole Lorenzo, PhD**

As a volunteer-run society, SCCAP could not operate without the support and involvement of its many members. We are appreciative of our dedicated volunteers and encourage members to participate by running for the board or joining one of the many SCCAP committees.



Adam Lewin, PhD, ABPP
President-Elect



Michael Meinzer, PhD
Secretary



Nicole Lorenzo, PhD
Member-at-Large: Membership & Public
Interest

SCCAP is Seeking Nominations for Upcoming Board Positions

All positions assume responsibility on January 1, 2026

SCCAP is seeking nominations for the following board positions:

President-Elect: The President-Elect has a term of three (3) years sequentially serving as President-Elect (2026), President (2027) and Past President (2028). The President-Elect shall be a member of the Board of Directors, shall appoint a Program Co-Chair and Student Representative, and performs duties traditionally assigned to a Vice-President to assist with steering the society. The President-elect will work with the APA programming Committee to develop the Convention programming for their Presidential year. During the president-elect year an optional presidential initiative may be selected. The President-Elect must be a member of BOTH SCCAP and APA.

Treasurer: The Treasurer is a voting officer of the Board of Directors. The Treasurer shall oversee the custody of all membership funds and property of SCCAP, shall oversee the receipt of all funds to SCCAP, direct disbursements as provided under the bylaws, oversee the Director of Operation's financial bookkeeping, prepare the annual budget in consultation with the President and Board of Directors, create annual reports, review and lead negotiations for all contracts, oversee the tax filing, and ensure the annual budget is not exceeded. The treasurer must be a member of both SCCAP and APA.

Member-at-Large Science and Practice: The MAL-Science and Practice is a voting member of the Board of Directors. This Member-at-Large chairs or appoints a designate to chair both the Practice Committee and Science Committee, and shall appoint all Committee members. The Committees shall monitor scientific and professional developments, and review ethical issues about child and adolescent psychology, and share this information with SCCAP members. The Committees will sponsor practice and research-related webinars, create Practice and Science-related content for the websites and newsletter, administer the Practice and Science committees' awards, support EffectiveChildTherapy.org, and provide social media content.

APA Council Representative: The Council Rep is a voting member of the Board of Directors. Representatives to APA Council must be Members or Fellows of SCCAP and members of APA. They are elected for three (3) year terms. The Representative to APA Council shall perform those duties required of Representatives to APA Council as specified in the Bylaws of APA. They shall be responsible for advising the Board of Directors about significant matters of business scheduled to come before APA Council. They shall also be responsible for informing the Board of Directors and SCCAP

Membership of significant actions taken by APA Council. APA Council Representatives will sit on committees as appointed by the SCCAP president. The APA Council Rep must be a member of both APA and SCCAP.

Candidates must have a strong commitment to the SCCAP mission and have the available time to successfully accomplish the tasks defined for the specific position.

- All positions assume responsibility on January 1, 2026.
- Each term runs for three years (2026-2028). In addition to the responsibilities listed below each board member is expected to participate in monthly conference calls and attend two Board of Directors meetings per year.
- Each board member should identify best practices for implementing evidence-based and culturally informed practices to support mental health professionals that work with children and adolescents as it relates to their board position.
- All candidates must be a member of the Society of Clinical Child and Adolescent Psychology (Division 53). Some positions require membership in APA. See specific position descriptions.
- All candidate must agree to and sign the Board Conduct, Confidentiality and Conflict of Interest Agreement
- Personal Statements, CVs, and headshots of the official slate will be posted to the SCCAP53.org Elections page.
- Read the full position descriptions on the SCCAP website here: <https://sccap53.org/sccap-elections-candidates-sought/>

Email the application information listed below to SCCAP@SCCAP53.org:

1. Vita
2. Headshot
3. Signed SCCAP Conduct, Confidentiality, and Conflict of Interest Agreement
4. Personal statement

Personal statements should be divided into two sections: (1) a bio describing your background, and (2) a statement describing your interest in the position and SCCAP. The full statement should not exceed 500 words. Self-nominations are accepted.

After the review of all nominations, the Elections Committee will present the slate of candidates to the Board of Directors to be voted on and approved during the January

Board of Directors meeting. Candidates will be notified in late January about the official slate of candidates.

Announcing SCCAP Award Opportunities

To advance its mission and support the professional development of its members, SCCAP has developed a series of awards to recognize and promote excellence across specific child and adolescent focused domains, as well as across the career span.

These awards are a members-only benefit and are part of SCCAP's mission to promote psychologists' work and advance the profession. SCCAP encourages and welcomes applicants with diverse backgrounds with respect to age, ethnicity, disability, gender, geography, nationality, race, religion, and sexual orientation.

Our awards program has the ability to help support developing professionals and students or acknowledge valuable contributions by our members. We need your assistance to seek candidates throughout our diverse fields of educators, researchers, and practitioners who are worthy of recognition.

Beginning with the 2025 SCCAP awards, ALL AWARDS TO A CONSOLIDATED APPLICATION PERIOD of October 1 – January 5. Awardees will be announced in late February.

The SCCAP nomination process is straightforward and self-nominations are accepted. Nominations can be submitted online through the specific award pages listed below.

Please visit the Awards tab on [SCCAP53.org](https://sccap53.org) for a full listing of opportunities and specific requirements.

Questions may be emailed to SCCAP@sccap53.org.

This Year's Slate of SCCAP Awards:

- [Distinguished Career Contributions to Practice or Training](#)
- [Distinguished Career Contributions to Science](#)
- [Abidin Early Career Award and Grant](#)
- [Early Career Contributions to Diversity Science](#)
- [Routh Dissertation Grant](#)
- [Bob Smith Excellence in Assessment Award](#)
- [Student Achievement Award](#)
- [Diversity Professional Development](#)
- [Student Development Committee \(SDC\) Professional Development](#)
- [Leadership Education to Advance Diversity \(LEAD\) Fellow Awards](#)

- Fellow Status*
- Poster Awards*
- Future Directions Launch Awards*

**Please note that [Fellow Status](#), [Poster Awards](#), and [Future Directions Launch Awards](#) will remain on their own application and award schedule. See program pages for more details.*

Journal Update: Evidence-Based Practice in Child and Adolescent Mental Health

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

EPCAMH is delighted to note that our annual downloads for the Jul 1, 2023-Jun 2024 period are 21% higher than in the prior academic year. We have a 3.1 CiteScore in Scopus and are in the Q2 CiteScore Best Quartile. Our acceptance rate continues to decline, which is sad for authors, but is suggestive of a higher quality journal, as the quality and quantity of manuscripts submitted continues to increase.

We have published two special issues this year –check them out, if you haven't already! 9(2) focuses on Tic and Tourette Disorder while 9(3) addresses Education of the Behavioral Health Workforce. Keep your eyes out in 2025 for an upcoming special section on Bilingual Youth Mental Health Services and a special issue on Summer Treatment Programs.

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

Update from SCCAP

Representatives to APA Council

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

Division 53 Representatives Mary Louise Cashel and Stephen Hupp attended the APA Council Meeting (just prior to the APA annual convention) on August 6-7, 2024, in Seattle, Washington. At the meeting, the Council of Representatives voted to approve the following guidelines:

- Clinical Practice Guidelines for Psychological and Nonpharmacological Treatment of Chronic Musculoskeletal Pain in Adults
- Guidelines for Working with Adults with Complex Trauma Histories
- Guidelines on Key Considerations for Working with Adults with PTSD and Traumatic Stress Disorder
- Guidelines for the Practice of Telepsychology
- Guidelines for Psychological Evaluations in Child Protection Matters
- Guidelines for Behavioral Projects with Nonhuman Animals in Schools (K-12)

Council also voted to approve the following items:

- A policy statement on immigrant health. The policy supports “a population health-based approach to working with immigrants, which aims to address the cultural, economic, systemic, historical, environmental, relational and occupational contexts that influence health status, well-being, and functioning across the patient’s lifespan.” Relatedly, Council voted to receive (accept) a report titled, “Psychological Science and Immigration Today,” written to highlight the importance of supporting the mental health of immigrants.
- A policy on “Artificial Intelligence and the Field of Psychology.” The policy “recognizes the critical role of psychological science and knowledge in guiding the many forms, applications and analyses of AI, and the real and potential impacts of artificial intelligence on psychological research and the training, practice, and application of psychology.”
- A statement “Calling for an Immediate, Permanent, and Comprehensive Ceasefire in the Israel-Gaza Conflict.” As part of the statement, “APA urges all actors to prioritize the protection of civilians, to adhere to international humanitarian law, and to engage in meaningful dialogue and negotiation toward just and sustainable resolutions, the resolution states.”
- A resolution on “Supporting Psychologists’ Education and Research about, and Advocacy against Violations of Girls’ and Women’s Human Rights Globally.” In part, the resolution emphasizes the “right to choose if, when and who[m] to marry; and the rights of self-expression and self-determination.”

- A resolution on “Individual, Collective, and Intergenerational Trauma Recovery: Considering the Restorative Roles of Restitution and Reparations.” The resolution commits “APA to advocate for restitution and reparations for the survivors of individual and collective trauma and their descendants.”

Our next meeting will be held in Washington, DC, February 21-22, 2025.

ABCCAP Board Certification

Individualized Review of Training/Credentials &
Mentorship, in the Style of Dear Abby

By David A. Langer, PhD, ABPP
President, American Board of Clinical Child & Adolescent
Psychology

Dear ABCCAPy,

I'm excited to be board certified, but a bit daunted by the process. Is there any help available?

**Sincerely,
I'M SO EXCITED**

Dear EXCITED,

I love your excitement about board certification (as well as your love of 1980s hits), and I'm glad that the answer to your question is a resounding yes! Every ABCCAP board member is ready to answer your questions about each stage of the process that they manage. AND, *ABCCAP has a mentorship program led by mentorship chair Dr. Sunnye Mayes*. If you're looking for a mentor, reach out to her at sunnyem@med.umich.edu. Readers who are already ABCCAP board certified should reach out to Dr. Mayes if you'd like to be a mentor. As Dr. Mayes says, "mentorship is a great way to help others, participate in the ABCCAP process, and engage in an enjoyable professional development activity."

As the Pointer Sisters might have said, "This year's the year you're gonna make it happen." Good luck!

Dear ABCCAPy,

I'm a clinical child and adolescent psychologist through and through – I even supervise clinical child psychologists-in-training! – but my graduate school training wasn't specific to clinical child and adolescent psychology and I'm not sure about my internship and brief post-doc. Am I eligible for ABCCAP specialty board certification?

**Sincerely,
BEMUSED BY BOARDING**

Dear BEMUSED,

You're right to be considering board certification to demonstrate competence in your specialty. Bravo! ABCCAP has standard training requirements (as you've read in the exam manual available [online](#)), but also recognizes that many competent specialists have varied training experiences. ABCCAP is working to formalize guidelines to review applicants whose training varies from the standard requirements. BUT you need not wait to apply – *ABCCAP already reviews applicants with varied training experiences through an individualized review process to determine if an applicant's training and experiences is consistent with the expectations for specialists in clinical child and adolescent psychology.* Reach out to our credential reviewer, Dr. Kelsie Hendrickson at hendrick@slhs.org to find out more and/or consult on your specific application.

Acute, Intensive, & Residential Services SIG Update

By Alysha Thompson, PhD
AIRS Special Interest Group Chair

The AIRS SIG board and members continued their hard at work over the last quarter! We recently sent out our annual newsletter to the AIRS SIG community, and it can also be found on the [AIRS SIG page of the SCCAP website](#) for those who want a more in depth look at what we've been up to! This includes links to upcoming virtual AIRS SIG events, a great research roundup of recent publications by AIRS SIG members, and a more thorough overview of AIRS SIG at APA this August!

AIRS SIG at APA

We had a great turnout at APA this year, with a number of presentations by AIRS SIG members, as well as a great social hour where we got to meet in person (some of us meeting each other in person for the first time!) and presented our inaugural awards to Drs. Jarrod Leffler and Patricia Garibaldi. Congratulations again to Jarrod and Patricia! See photos for many of our AIRS SIG members at our social hour at APA.



Upcoming Conferences

We are excited to see folks at some upcoming conferences! Look for AIRS SIG Members at the following upcoming presentations

AACAP – October in Seattle

- Symposium: *Meeting the Moment: New Program Development for Adolescents with Acute Psychiatric Needs*. Presenters include Drs. Elisabeth Frazier, Alysha Thompson, Miriam Rubenson, Hilary Mead, Molly Hedrick, Emily May, and Kyrill Gurtovenko

ISITDBT and ABCT – November in Philadelphia

- Danielle Citera, Ph.D. and team from Stony Brook will be presenting at ISITDBT on November 14th, 2024 in Philadelphia: *Implementation of DBT Skills Training and Education for Staff Working on an Acute Adolescent Psychiatric Inpatient Unit*.
- Hawks organized Symposia, 1791554: *Implementing Evidence-Based Practices in a Pediatric Inpatient Psychiatric Unit*, to be held November 14 – 17, 2024. Presenters include Drs. Jessica Hawks, Alysha Thompson, Jarrod Leffler, Evadine Codd, Matthew Luehring, and Elizabeth Reynolds.

Upcoming AIRS SIG Events

The AIRS SIG has a number of upcoming virtual events we would love to see folks at!

- ***Monthly Medical-Psychiatry Consultation:*** There has been growing interest among AIRS SIG members to share information and knowledge about treating medically and psychiatrically complex patients in acute and inpatient settings. In response, we identified a need for regular times for consultation, focused on specific areas. We have also set up a Google Drive folder as a way to share resources and information on medical psychiatric programming. We hope that members can have a space to gather, share their expertise, and asks questions.

Information on times and dates of meetings are below. Topics will cover strategies for program building, including considerations for leadership buy-in, staff training needs, and physical space, clinical programming models and modalities, managing multi-disciplinary teams, safety policies and procedures, and financing. Please feel free to distribute to colleagues of other discipline or those across Div 53 or 54, and email Jaclyn.aldrich@nationwidechildrens.org with questions.

Dates/Times:

- October 17, 2PM
- November 21, 2PM
- December 19, 2PM
- January 23, 2PM

Zoom meeting links with information on the meeting topic will be sent out prior to the meeting to the AIRS LISTSERV.

- **AIRS Early Career Consultation Group:** Join early career AIRS SIG members in a monthly, informal opportunity to discuss topics and issues relevant to early career psychologists (earning your doctoral degree no more than 10 years ago) working in acute care settings. Every 3rd Tuesday at 8pm Eastern / 5pm Pacific. Link here: <https://jhjm.zoom.us/j/99077666958>

Upcoming Board Elections

As 2024 comes to a close, we mark the end of this 2-year cycle for our AIRS SIG board. We will be sending out information in the coming month regarding nominations for the AIRS SIG Board members. Please nominate yourself or a colleague if you are interested in becoming a board member. Board membership has been a wonderful way to connect with other psychologists who are working in AIRS settings and to continue to improve our connections with other psychologists doing this work. After nominations are received, the AIRS SIG team will confirm with nominees that they would be willing to serve on the board and then will send out an election ballot via the AIRS SIG Listserv. Thank you for continuing to engage in the AIRS SIG, nominating yourself and colleagues for board membership, and voting in our upcoming election!

Bilingual Psychologists SIG Update

By Hannah Jones, PhD
Bilingual Psychologists SIG Co-Chair

The Bilingual Psychologists Special Interest Group has been hosting monthly virtual networking events throughout the year. The topics for our most recent virtual networking events included discussing and sharing resources on:

- Professional language proficiency
- Bilingual supervision
- Bilingual assessment

We also hosted a virtual networking event exclusively for bilingual students on Saturday, October 5th. The focus of the event was on building a student-focused community.

The Bilingual Psychologists SIG also hosted an in-person networking event in collaboration with the Bilingual Issues in Latinx Mental Health Special Interest Group (SIG) at the National Latinx Psychological Association (NLPA) Conference in Puerto Rico.

We want to thank everyone who participated in these events. We really enjoyed connecting with our members at these events.

Look to the listserv for more information about our next event and the zoom invite. Grab a coffee or tea and come meet, network, and strategize with other bilingual providers from across the United States!

For those interested in learning more about the Bilingual Psychologists Special Interest Group, please email Hannah.jones@choa.org and Erika.Garcia-Rocha@childrenscolorado.org

From the Emerging Adulthood SIG

ADHD in Emerging Adults: Conceptualization & Treatment Considerations

**By Traci M. Kennedy, PhD, University of Pittsburgh
& Lauren Oddo, PhD, LCP, Partners in Parenting, PC**

Attention-deficit/hyperactivity disorder (ADHD) affects about 10% of children in the United States (Danielson et al., 2024). Although historically believed to be constrained to childhood, ADHD is a neurodevelopmental disorder that can affect individuals across the lifespan. In particular, ADHD can be a prominent challenge during the key period of emerging adulthood (ages 18-25), an often complicated transition from adolescence to adulthood. ADHD in emerging adulthood is garnering increased recognition among providers, researchers, educators, young people, and caregivers, as ADHD diagnoses and treatment during this developmental period are on the rise. This article provides an overview of key considerations for ADHD in emerging adulthood, including symptom presentation and course, treatment, and management of ADHD as young people increase their autonomy during this critical transition.

ADHD Diagnosis, Presentation, & Course in Emerging Adulthood

Despite past estimates that ADHD persists into adulthood for about 2/3 of youth (Faraone et al., 2006), more recent evidence suggests that the course of ADHD over time may actually be more nuanced. Whereas previous estimates of persistence have assessed whether an individual, followed from childhood, meets diagnostic criteria at a single point in time, data from the Multimodal Treatment of ADHD Study (MTA) illustrate that when viewing symptom trajectories *across time*, most individuals with ADHD fluctuate in their symptom presentation and their diagnostic ADHD status. Sibley et al. (2022) found that 64% of individuals diagnosed with ADHD – Combined Presentation in childhood experienced a “fluctuating” symptom course across adolescence and emerging adulthood, characterized by waxing and waning symptoms and impairment, including periods of complete remission (in the absence of treatment) and periods of ADHD recurrence. Only 9% of the sample experienced long-term, sustained recovery from ADHD over multiple years through the end of the MTA follow-up period. Therefore, the course of ADHD across emerging adulthood is likely for most to be characterized by substantial change rather than stability. Research examining contributors to fluctuations between periods of ADHD remission and recurrence is needed to better understand this course.

Turning to individuals who never received a diagnosis of ADHD in childhood, emerging adults and older adolescents are increasingly presenting for a first-time ADHD diagnosis and/or medication (e.g., Olfson et al., 2014). For instance, between 2009 – 2013, diagnoses of ADHD increased 36% in adults – twice the increase in youth over the same time period (Fairman et al., 2020). This is more than 8 times the adult ADHD prevalence in 1996 (though is likely partially due to the increase in age of onset criterion from 7 to 12 per the DSM in 2013). Evidence from longitudinal birth cohort studies seemed to initially suggest that this pattern represents a “late-onset” type of ADHD (Agnew-Blais et al., 2016; Caye et al., 2016; Moffitt et al., 2015), contrary to the widely accepted conceptualization of ADHD as a childhood-onset disorder. However, more recent examination of the details of “late-onset” cases indicates that in 95% of cases, co-occurring disorders could not be ruled out as better explaining the symptoms and impairment (most commonly heavy substance use; Sibley et al., 2018). Thus, providers must take care to avoid false positive diagnoses in adults and carefully assess the potential influence of comorbid symptoms and diagnoses – particularly since comorbidities with ADHD are extremely common (e.g., substance use disorders, anxiety disorders, mood disorders), making it difficult to tease apart whether comorbid symptoms represent separate disorders co-occurring with ADHD or differential diagnoses better explaining the ADHD symptoms (Danielson et al., 2024; Kessler et al., 2006; Sobanski, 2006). Among the minority of adolescent-onset cases that persisted into adulthood, the authors of this study from the MTA concluded that they more likely represent “late-identified” ADHD rather than late-onset, given histories of high IQ and other potentially compensatory strengths in childhood that may have masked early symptoms and/or impairment (see also Rivas-Vazquez et al., 2023 and Taylor et al., 2022).

A number of factors may contribute to a first-time ADHD diagnosis in adulthood versus childhood. College students, for instance, may have unique considerations when assessing for ADHD, in part given their likelihood of cognitive strengths and high academic achievement throughout childhood (Lefler et al., 2021). It is especially common for women to receive a first-time ADHD diagnosis in adulthood (Skoglund et al., 2024). In fact, although ADHD is more prevalent in boys than girls in childhood (2:1), this ratio nearly equalizes by adulthood (1:1; Chung et al., 2019; de Zwaan et al., 2012; Debjani et al., 2012; Nussbaum, 2012). This may be related to their greater likelihood of having the inattentive presentation of ADHD, which is more easily missed throughout school age than typically more disruptive and obvious hyperactive/impulsive presentations (Owens et al., 2015) or may be misattributed to internalizing disorders, which predominate in girls (Young et al., 2020). The higher executive functioning demands imposed by college, full-time work, and other adult responsibilities can make the inattentive symptoms of ADHD and their functional impairments more evident for young women, leading them to seek a diagnosis and treatment (Young et al., 2020). We know little about whether the racial/ethnic disparities in ADHD diagnosis in childhood (Cenat et al., 2021) continue into adulthood, highlighting a critical focus for future research.

Treatments for Emerging Adults with ADHD

For young adults with ADHD, evidence-based interventions typically fall into three overarching categories: pharmacological treatment (Tcheremissine et al., 2008), psychosocial interventions (Nimmo-Smith et al., 2020), and academic accommodations (e.g., extended time on tests, testing in a distraction-reduced environment; Weyandt & DuPaul, 2008). Stimulant medications are effective in reducing ADHD symptoms; still, even those who report positive effects may require additional support to manage ADHD-related impairment. The most effective treatment approach for many emerging adults involves combining pharmacological and psychosocial interventions, in addition to academic accommodations as needed (Li & Zhang, 2024). Cognitive Behavioral Therapy (CBT) is among the most well-researched psychosocial interventions for ADHD. In CBT, emerging adults learn self-regulation strategies to better manage the thoughts and behaviors that contribute to impairment (e.g., Eddy et al., 2021; Hartung et al., 2022; Solanto et al., 2021).

When implementing CBT for emerging adults with ADHD, clinicians should be mindful of a few special population characteristics. Emerging adults should be viewed as a collaborator in their own care. Emerging adults with ADHD likely have prior intervention experiences and many express ambivalence about behavior change, as learning self-regulation skills to manage their symptoms and impairment can be effortful and require lifestyle modification. To resolve ambivalence, some CBT approaches work to explore the emerging adult's intrinsic motivations and values, for instance through motivational interviewing (Meinzer et al., 2021). Understanding the emerging adult's treatment history (including their perceptions of how helpful prior treatments were), is a key component of case conceptualization and treatment planning.

A common dilemma in CBT for emerging adult ADHD is how to appropriately increase the young adult's autonomy and independence while also maintaining the external supports needed. This is particularly difficult given that ADHD is characterized by self-regulation problems; caregivers often feel compelled to step in and manage tasks for their child – like organizing their time or reminding them of responsibilities. While this support can be helpful in the short term, it can inadvertently hinder the young adult from developing the necessary skills and strategies to manage their life independently in the long term. It is important to consider how to involve caregivers and others in treatment, as the right level of involvement will vary for each individual and may change over time. The most effective approach is likely to gradually reduce caregiver support as the emerging adult develops the self-regulation strategies needed to manage their symptoms and impairment.

An emerging challenge in treatment is effectively incorporating technology. Digital tools can enhance treatment for ADHD, especially apps for self-management like task managers, alarms, and calendars (Knouse et al., 2022). However, more research is needed to determine the most effective digital approaches for various presenting problems in this population. One challenge is that digital tools often involve using phones or computers, which may present distractions that are difficult to manage.

Collaborative planning with the emerging adult around how to incorporate digital tools, including monitoring the usefulness of the tool(s), is likely the best bet.

Given the high rates of comorbidity in emerging adults with ADHD, many treatments must also address commonly co-occurring issues, such as anxiety, depression, and problem substance use. Of note, a challenge in treating ADHD and co-occurring issues can be deciding how to sequence/structure care. Transdiagnostic CBT interventions are emerging to focus on shared mechanisms underlying ADHD and common comorbidities, which have the potential to streamline treatment. For instance, some have targeted behavioral activation and enhancing substance-free rewards to reduce depressive symptoms and problem alcohol and drug use in ADHD (Meinzer et al., 2021b). Other approaches, such as mindfulness-based interventions may help with anxious distress in adult ADHD (Cairncross et al., 2020).

Conclusion

ADHD persists well beyond childhood, and can be especially impairing as children transition into adulthood. Thus, increased focus on ADHD during emerging adulthood in research, clinical practice, and education will benefit the many young people with ADHD needing support to successfully navigate promises and pitfalls of young adulthood.

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Infant & Early Childhood SIG Update

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

The Infant and Early Childhood SIG has recently announced our new leadership team who began their term of service in September 2024. We are also very happy to have the newly created committee of student representatives who will each also serve on a SIG-wide committee of their choice. Stay tuned for detail about our next all membership IEC SIG meeting!

New leadership team (continuing leaders in italics)

SIG Co-Chairs

Brooke Yancy-Ward, PsyD

Miller Shivers, PhD

Training and Education Committee

Glenn Mesman, PhD

Amanda Costello, PhD

Rebecca Burger-Caplan, PhD

Clinical Practice Committee

Claire Noonan, PhD

Maribeth Wicoff, PhD

Research Committee

Brenda Salley, PhD

Jaelyn Russo, PhD

Secretary

Jenny Carlson, PhD

Student Representatives

Janisa Hui

Ellie Deveaux

Vinaya Thomas

Emily Baines

Noelle Warfford

The Summer Treatment Program SIG Updates

By **Katie Hart, PhD & Sarah Tannenbaum, PsyD, ABPP**
Co-Chairs, STP SIG

Summer! Summer! Summer! We love summer and all the excitement it brings for our programs. We hope those of you who ran an STP had a successful season and are feeling ready for back to school. Before you know it, we will all be back to summer planning. If you are like us, you think about summer all year long.

Our goals for this fall are to increase subscribers to our listserv and increase connections between STP communities. We hope you take advantage of the rich exchange of information between our members about best ways to prepare for your STP. If you have a question or have opportunities to share, please feel welcome to post them. We also plan to organize quarterly outreach to members around common topics that come up in gearing up for summer. For more information about our SIG, including how to join (and access the listserv) visit [our SCCAP website](#).

Of special note, *Evidence Based Practice in Child and Adolescent Mental Health* is publishing a special issue on STPs, which is even more meaningful this year in the wake of STP Trailblazer Dr. William E. Pelham, Jr.'s tragic death. A few of the papers have already been published online and are available on the journal's [homepage](#). Please check them out!

We are planning to have a meeting of STP directors during the ADHD SIG pre-conference meeting at ABCT. If you will be in Philadelphia, please join us. The pre-conference meeting is scheduled for **November 14th, 9am-4:30pm**.

For those of you interested in joining, the primary goal of the STP SIG is to provide a professional forum that supports clinicians, researchers, students/trainees, and administrators in the successful implementation of STPs. We invite you to join our listserv and share emerging or promising practices and interventions that can enhance the STP by increasing access, promoting equity, increasing diversity, improving training practices for the next generation of child mental health practitioners, and incorporating more family/stakeholder feedback and voice into intervention strategies.

As we have said before, an STP takes a village, and we are here for you! Please join us in connecting around the world through this program that has changed our lives and so many others. We welcome all your feedback, questions, comments, and insights about STPs! Let's keep STPs and Dr. Pelham's legacy going.

Diversity Committee Update

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

The APA conference was fantastic and showcased a dynamic range of diversity-related research and clinical practice initiatives. Sessions on mental health care barriers faced by marginalized youth highlighted ongoing systemic difficulties many families face when trying to access mental health care while sessions on listening to youth highlighted the power of collaboration to improve service delivery systems. The Diversity Committee was thrilled to see many Diversity Professional Development Award winners at the conference. Their dedication and innovative approaches serve as inspiration and help promote equity and inclusion. Overall, the conference and SCCAP-related offerings highlighted the great diversity-focused work being done in our division. Personally, I am excited about the upcoming SCCAP Conference scheduled for June 5-7, 2025. This standalone event promises even more focused discussion on clinical child and adolescent diversity research and clinical practice. The Diversity Committee, in collaboration with the conference committee and LEAD Institute committee, is putting together programming that highlights cutting-edge diversity research, promotes dialogue, and encourages positive change.

The SCCAP Diversity Committee is currently looking for new committee members! Our committee focuses on diversity and multiculturalism initiatives within SCCAP. Some current and past initiatives have focused on developing research awards for student and early career members and enhancing leadership skills. If interested in learning more, please contact me at Juventino.hernandezrodriguez@csun.edu

SCCAP Fellows Committee Update

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

Our Initial Fellows were announced in Seattle at the APA Conference in August. This exemplary group recommended by the SCCAP Fellows Committee, was positively reviewed by the APA Fellows Committee, and will officially be Fellows of APA/SCCAP in January 2025.

Congratulations to this outstanding group of Initial Fellows:

- Jennifer Hughes, PhD, MPH
- Matthew Lerner, PhD
- Tara Mehta, PhD
- Jonathan Perle, PhD, ABPP
- Martha Wadsworth, PhD.

As noted in our previous newsletter, we also have seven SCCAP Fellows (already APA Fellows in another Division):

- Diane Chen PhD
- Robin H. Gurwitsch, PhD
- Christopher A. Kearney, PhD
- Barbara A. Mowder, PhD
- Kenneth H. Rubin, PhD
- Jenelle R. Shanley, PhD
- Jonathan Woods Weinand, PhD

The Fellows Committee unanimously agreed that each of these Initial and SCCAP Fellows had made outstanding and extraordinary contributions to the field of child and adolescent mental health.

Consider becoming an Initial APA and/or SCCAP Fellow! Applications for the 2025 cycle are due until December 1, 2024. SCCAP Fellow status is less involved and does not require LOR. Please be aware that your APA dues must be up-to-date, and membership in both APA and SCCAP must be current at the time of application. For information on requirements, please visit the SCCAP [website](#).

Featured Fellow: Dr. Cheryl McNeil

Fellow status is a valued honor and recognizes outstanding contributions, with national impact, to Psychology overall and to SCCAP specifically. As Fellows Chair I am taking opportunities to showcase some of our wonderful SCCAP Fellows. This month we introduce (or re-introduce to the many who know her and follow her outstanding work) Dr. Cheryl McNeil, who became a Fellow on January 1, 2024.

After a 28-year career at West Virginia University, Cheryl B. McNeil, Ph.D. is now a tenured Professor in the Department of Psychiatry at the University of Florida. Dr. McNeil obtained her Ph.D. in the Department of Clinical and Health Psychology at UF in 1989 and is excited to be conducting research at her alma mater. Her academic interests are focused on program development and evaluation, specifically with regard to managing the disruptive behaviors of young children in both the home and school settings. Dr. McNeil has co-authored seven books (e.g., *Parent-Child Interaction Therapy: Second Edition*, *PCIT-Toddler*, *Time-out in Child Behavior Management*, *Handbook of PCIT for Children with ASD*, *Short-Term Play Therapy for Disruptive Children*), a continuing education package (*Working with Oppositional Defiant Disorder in Children*), a classroom management program (*The Tough Class Discipline Kit*), and a Psychotherapy DVD for the American Psychological Association (*Parent-Child Interaction Therapy*). She has a line of research studies examining the efficacy of Parent-Child Interaction Therapy and Teacher Child Interaction Training across a variety of settings and populations, including over 150 research articles and chapters related to the importance of intervening early with young children displaying a range of mental health concerns. Dr. McNeil is a Global Trainer for PCIT International and has disseminated PCIT to agencies and therapists in many states and countries, including Norway, New Zealand, Australia, Taiwan, Hong Kong, and South Korea.

Science & Practice Committee Update

By Jennifer L. Hughes, PhD, MPH
MAL, Science & Practice

A Change of Plans!

Given our preparations for THE SCCAP Conference in June 2025 (and the first in-person Clinical Practice Institute – the day before), we are adapting the 2024 Clinical Practice Institute (CPI) to a one-session event later this year. The topic for BOTH 2024 and 2025 is “**Improving Clinical Practice through Enhanced Case Conceptualization,**” inspired by our colleagues’ paper:

Christon, L. M., McLeod, B. D., & Jensen-Doss, A. (2015). Evidence-based assessment meets evidence-based treatment: An approach to science-informed case conceptualization. *Cognitive and Behavioral Practice*, 22(1), 36–48. <https://doi.org/10.1016/j.cbpra.2013.12.004>

Even as one session, the 2024 CPI will retain the qualities that have made it a highly rated event by our members! The 3-hour session will be an interactive seminar, with a focus on tangible, evidence-based practices and recommendations to take straight to clinical practice.

Please watch the SCCAP listserv for an upcoming announcement about our featured speakers and how to register!

If you have any questions or wish to serve a role on the Science Committee or the Practice Committee, please contact me at Jennifer.Hughes@nationwidechildrens.org.

Membership Committee Update

By **Chrissy Cammaratta, PhD, ABPP**

Member-At-Large: Membership and Public Interest

On behalf of the membership committee, we wanted to say thank you to everyone who completed our membership survey. We had 493 responses, and we will use this data to target programming so that we can continue to tailor SCCAP benefits to you!

Congratulations to the 10 winners of the drawing who each won a \$50 Amazon gift card:

- Anya Keomurjian
- Ashley Schiros
- Kristen Boog
- Lauren Hindt
- Elise Placke
- Elizabeth Wayne
- Sarah Jolie
- Sophie Rintell
- Malerie McDowell
- Jordan Scheuler

Our SIGs are growing! If you haven't already, please check out our [Special Interest Group list](#). See below for our current groups, which are free to all members- join now at [SCCAP53.org](https://www.sccap53.org).

- Acute Intensive and Residential Services (AIRS)
- Infancy and Early Childhood
- Emerging Adults
- Clinical Child and Adolescent Practice
- Bilingual Psychologists
- The Summer Treatment Program (STP)
- Professional Development and Mentoring

While you're at [SCCAP53.org](https://www.sccap53.org), remember to [renew your SCCAP membership](#) by December 31, 2024 so you can stay connected and continue to receive all the [benefits](#) that are free to you as an SCCAP member!

Join/renew via:

1. Our website and select join/renew your membership.

2. You can also renew when you renew your APA membership.

****APA membership is not necessary to join SCCAP.**

Remember: **Student and Post-Bac Student Memberships are ALWAYS free, but you do need to renew each year.** Don't miss out on the student listserv and mentorship opportunities free to students/trainees (including postdoctoral trainees!)

We wish you all a wonderful rest of the year and hope to hear from you on the listserv!!

