

INBALANCE

Fall 2026

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President's Column

Building the Next Chapter of SCCAP

By Adam B. Lewin, PhD, ABPP

I ran for SCCAP President to broaden our relevance—to make our organization meaningful to practitioners as well as researchers and to psychologists across career stages and practice settings. Yet much of this year has necessarily focused on stewardship, transition, and organizational leadership. Every SCCAP President inherits the Society for only a brief time. Our responsibility is not simply to manage it well, but to leave it stronger than we found it and better prepared to meet the needs of the future.

Over the past decade, SCCAP has grown tremendously. We now support two journals, webinars, continuing education programs, special interest groups, awards, committees, conferences, leadership initiatives, and a growing portfolio of member services. We have expanded not only in size, but also in our ambitions for what SCCAP can be: the professional home for clinical child and adolescent psychologists across research, practice, education, and training.

Growth, however, often creates new demands and responsibilities. For many years, SCCAP was able to thrive because of exceptional individuals. Longtime members will remember the dedication of Karen Roberts, whose commitment to our field helped guide the Society through an important period of growth and development. More recently, Lynn Canty brought management and financial expertise that helped SCCAP continue to mature as an organization.

Simply put, this model has worked well as our organization continued to grow and expand our reach to professionals in child and adolescent psychology. It worked because it was built on trust, commitment, and relationships. In many ways, Karen and later Lynn became part of the SCCAP family. They supported generations of volunteer leaders, preserved institutional knowledge, and helped SCCAP accomplish far more than organizations our size would typically expect. Their continuity and commitment made them enduring representatives of SCCAP across many presidential terms. For that, we owe them our profound gratitude.

At the same time, the Board found itself asking an important question: What infrastructure will SCCAP need for the next decade? The answer was not different people. The answer was a different model.

Today, SCCAP requires expertise in membership services, communications, conference management, technology, sponsorship development, financial systems, continuing education compliance, and strategic planning. Equally important, we need an organizational structure that provides continuity and is not dependent on any one

individual, no matter how talented or dedicated. Organizations eventually reach a point where continued growth requires more than asking good people to do more. SCCAP has reached that point.

That realization led to one of the most significant decisions SCCAP has made in many years: transitioning to an Association Management Company (AMC) model. Earlier this year, the Executive Committee unanimously approved a national search for a professional management partner capable of helping SCCAP build the infrastructure necessary for its next phase of growth. As I write this column, we are in the final stages of negotiations and expect to announce our new partner soon—so please watch the listserv for an update. I am extraordinarily optimistic about what lies ahead.

This transition is not about changing who SCCAP is. It is about strengthening our ability to do what we already do well and continuing to do the work that aligns with our mission of improving the mental health and resilient development of children, adolescents, and families . An AMC provides depth, continuity, and specialized expertise in organizational leadership, growth, and strategy. It allows volunteer leaders to spend less time managing operations and more time doing what only they can do: developing programs, mentoring future leaders, advancing science and practice, and setting a vision for the profession. Most importantly, shifting to this new organizational model creates the capacity to innovate, grow, and build a more sustainable future with and for our members.

I have spoken often this year about relevance. If SCCAP is going to remain the professional home for all clinical child and adolescent psychologists, we must continue creating value throughout the career span. We need compelling reasons for students and early career psychologists to stay engaged. We need resources that are meaningful to practitioners across diverse settings. We need opportunities for educators, mentors, researchers, and clinical leaders. And we need an organizational structure capable of supporting all of it. That is what this transition is ultimately about. Success will not be measured by smoother operations alone. Success will be measured by greater impact: stronger member engagement, new professional opportunities, enhanced programming, a more sustainable financial model, and a Society that is positioned to thrive for years to come.

Years from now, I suspect many members will not remember the details of the contracts, negotiations, or transition plans. What I hope they will see is an SCCAP that became stronger, more sustainable, and better able to fulfill its mission because of decisions made during this moment.

My deepest thanks go to Lynn Canty for her years of service, to our search consultants, and to the many volunteers who have devoted significant time and thoughtful leadership to this effort. Most of all, thank you to our members. SCCAP's future has never been defined by a single leader, employee, or initiative. It has always been defined by a community committed to improving the lives of children,

adolescents, and families. This transition is an investment in that community—and in the future we will build together.

In Focus: Social Determinants in Adolescent Mental Health Research and Their Integration in Clinical Practice

By Theemeshni Govender, MS
Clinical-Community Psychology Graduate Student, University of Illinois Urbana-Champaign

Social determinants of health (SDOH), defined as "conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks" (Healthy People 2030), have been gaining increased attention in research in the past 5 to 10 years. A simple search of "social determinants of health" in PubMed in May of 2025 elicited 878 articles published in 2015, 3152 articles published in 2020, and 5098 in 2024, demonstrating its significant growth in the literature. This increased attention in recent years reflects greater recognition that SDOH play an important role in people's well-being and contributes to health inequities via upstream factors. Healthy People 2030, which sets objectives to improve health over the next 10 years based on current research findings, groups social determinants of health into 5 domains: economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context. All domains have been found to influence adolescent mental health outcomes, with there being more research on certain domains (i.e., economic stability) and specific factors within those domains (e.g., poverty) receiving considerably more attention than others.

Within the economic stability domain, determinants specified by Health People 2030 include factors such as employment, food insecurity, housing instability, and poverty. Economic stability represents the SDOH domain that is generally most examined, particularly poverty, within a U.S. context. However, there is much variability in findings and strength of associations when looking at the relationship between measures of poverty and adolescent mental health, given the vast measures used to assess poverty (e.g., receipt of welfare benefits, income, wealth, etc.). Examination of economic stability factors occur within the family unit (i.e., food insecurity, housing insecurity) and at the neighborhood level (i.e., unemployment rates, area-level socioeconomic disadvantage) when looking at adolescent mental health outcomes. Overall research in the past 5 years indicates a strong association between family and neighborhood measures of economic instability and exposure to adverse childhood experiences, depression, anxiety, and substance use among adolescents (e.g., Bradette-Laplante et al., 2020; Trucco, 2020). However, additional research is needed in order to integrate

these different measures of poverty across different contexts, including subjective social status, given its consistent relation to adolescent mental health (McLaughlin et al., 2012).

Examples of determinants within the social and community context specified by Healthy People 2030 include civic participation, incarceration, and social cohesion. Within the past 5 years, the most common factor examined within this domain has been experiences of discrimination and racism. Recent studies support the relationship between racism and discrimination and higher exposure to adversity (Pumariega et al., 2022) and poor mental health outcomes (e.g., Kim et al., 2025). Less frequently examined factors within the social and community domain include immigration, perceived neighborhood safety, social cohesion and disorganization and Juvenile Justice Services involvement (JJS). These studies altogether demonstrate higher and disproportionate risk for poor mental health outcomes among immigrant and undocumented adolescents (Pumariega et al., 2022) and racial/ethnically diverse adolescents, particularly African American and Latine adolescents (Njoroge et al., 2021; Tynes et al., 2019). The aforementioned disparities are particularly noteworthy given these populations are less likely to seek out and receive mental health resources (Ma et al., 2025; Mohammadifirouzeh et al., 2023).

Similar to the prior domains, research examining the neighborhood and built environment domain demonstrates evidence for the impact of community violence, neighborhood disadvantage, and public housing on adolescent wellbeing. These factors have been associated with increased substance use, exposure to adversity, and externalizing and internalizing behaviors among adolescents. The remaining two domains- health care access and literacy and education access and quality- represent the less frequently examined social determinants compared to the other domains. In particular, there is scarce research on the role health literacy (Zarate et al., 2026) and education quality play in influencing adolescent mental health outcomes. Thus, while there is robust research demonstrating the importance of social determinants, there are gaps in knowledge that deserve more attention. This includes attending to a wider breadth of social determinants, further understanding how multiple social determinants relate and reinforce one another, and considering how cultural factors may influence the relationship between these determinants and mental health outcomes. In addition, improvements must be made in how these determinants are assessed in clinical settings and how they are used to inform treatment services and decisions regarding additional resources that may be needed for individuals and families.

Understanding and assessing social determinants in clinical settings is extremely important given the impact that these factors may have on the onset of mental illnesses, maintenance of symptoms, and treatment efficacy and engagement. In order to holistically account for social determinants and support individuals and families impacted by them, clinicians should seek to systematically assess social determinants at intake and throughout treatment, document them within electronic health records and in case conceptualizations, consider how these determinants may impact engagement and treatment planning, and coordinate with those seeking care and other

providers to problem solve these barriers and connect them to community resources. Awareness of what determinants are impacting individuals and families is the first step toward integrating social care into clinical practice (National Academies of Sciences et al., 2019). This includes not only identifying determinants that confer risk but also working with individuals and families to highlight protective factors. While there are ways to document social determinants within electronic health records (e.g., ICD-10-CM), a recent scoping review found that these codes are documented at very low rates within health care settings that provide mental health services (Hendricks-Sturrup et al., 2024). This can, in part, be attributed to a lack of standard procedures regarding the routine use of documentation. Practically, not all social determinants can be assessed. Jeste et al. (2025) recommends starting by identifying the social determinants that apply to the communities being served, and when working with individual patients or families, identifying which determinants may be modifiable and are of concern to the patient. Once these determinants are known, adjustments must be made and assistance provided, such that clinical interventions are modified to accommodate barriers identified and individuals and families are connected to relevant community resources (National Academies of Sciences et al., 2019). Importantly, developing a stronger relationship between organizations providing mental health support, individuals with mental illnesses, and community organizations is needed to maximize the positive benefits of interventions targeting social determinants and mental illnesses. Without this holistic approach to integrating social determinants in mental health care, disparities in access and treatment benefits will remain pervasive.

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Expert Recommendation: Helping Children and Adolescents Through the Holidays

By Maria Khan, PhD & Michelle Roley-Roberts, PhD
Licensed Psychologists

For many families, Holidays bring a lot of fun traditions and are a bustling time of year. No matter what Holidays a family celebrates, engaging in holiday activities brings changes to typical routines and can add stress to parents' and kids' plates. To help families better prepare for Holidays, here are some tips.

It is recommended to pay particular attention if a child or teen has a history of traumatic event exposure, a developmental disability like autism spectrum disorder, more difficulty with emotion regulation, impulsivity, or experienced loneliness, seasonal affective disorder, or loss of important people in their lives as they may have a harder time adjusting to Holidays and back to routines from Holidays.

Considering Traumatic Event History

Children's responses to traumatic events are very diverse and require individualized attention to each child's specific needs. However, we know that exposure to traumatic events such as abuse, neglect, parental substance use, life-threatening accidents or medical illness, causes disruptions to children's lives and sense of safety.

Safety is built through consistent routines, having your needs met, and engaging in anticipated rituals (like family traditions and Holiday Celebrations!)

But wait, how do we stay consistent in routines and incorporate changes in routines, too?!

- Anticipate how your child will respond to changes in routines
- Make a plan for how to help your child adjust to the change
- Follow your plan and be flexible to help best support your child's needs throughout the holiday season. *This can look like: if you know your child gets overstimulated when the environment is chaotic and loud, you build in time and space in a holiday ritual for your child to be in a quiet space to decompress or wear headphones while in the chaotic environment.*
- Safety is also built by helping your child have opportunities to have control through information and choice *This can also look like: I have to be the parent and there are many things that my child cannot be in control of because if it were up to my child, we wouldn't participate in Holidays.*

- Offer forced choices (e.g., do you want to put your right shoe or your left shoe on first? We're going to Uncle Niknak's house. Do you want to sit behind Dad or Mom on the ride over?)
- Anticipate whether your child does better knowing ahead of time what the plan is. If so, provide sufficient notice of the plan. Many kids do well when they know what is going to happen before it happens. Though, some kids may dwell on the change in routine and knowing ahead of time creates a lot of unhelpful anxiety. So, anticipate what will work best for your child. This is how you approach holidays flexibly.
- Anticipate whether your child experiences trauma and/or loss reminders for certain holiday activities. For example, if your child experienced the traumatic event right before Halloween, they may feel more stressed and scared when seeing Halloween decorations. The Halloween decoration may be a trauma reminder.

Considering Grief/Loss

If their loved one passed away, is incarcerated, hospitalized, or if your child was removed from their biological parents' care, holidays, themselves, may serve as loss reminders. They may be thinking about what they used to do with their loved one(s), how the new rituals are different from the old ones, and feel sad because they miss the loved one(s) that are no longer present. They may attempt to avoid the loss reminders by not participating in new holiday rituals. They could have temper tantrums or shut down, be angry, and/or avoid all things related to holidays.

- Anticipate what the loss reminders are.
- If you've noticed a shift in your child's emotions or behaviors, consider whether there is a loss or trauma reminder that came up for them.
- Although difficult, rather than avoiding the topic of grief/loss, create a safe space for your child to talk about their loved one.
- Consider ways to celebrate or honor the loved one or those traditions your child engaged in with their lost loved one.

Considering Autism Differences

For children and teens with autism spectrum disorder, Holidays that bring disruptions in routines may be hard to adjust to. Your child may have sensory sensitivities or other differences that make the environment or holiday celebration(s) challenging.

- Anticipate what your child needs ahead of time. If having alerts ahead of time about changes in routines are helpful, provide the alerts. If having fidgets or access to a beloved special object will help your child adjust to the change in routines, then plan for your child to have those things.
- Introduce Holiday plans with a social story being sure to review expectations, and paint a realistic picture of what the holiday celebration

will be like. Be sure to include your child's triggers and what to do if triggered in your social story.
- Plan ahead for safety concerns that you anticipate. For example, if your child tends to wander away, especially when the environment is chaotic, make a plan for how you will keep an eye on them, how you can reduce the chaos in the environment, and how you can help your child re-regulate when you start to notice early signs of dysregulation.
- Review safety rules with your child ahead of time and have them repeat the rules back to you. Make the rules simple. (e.g., "stay next to me"; "ask first")

Parental Expectations

Sometimes as grownups, we have certain expectations for what Holidays are supposed to be like. For example, with Halloween, we go to the pumpkin patch, carve pumpkins, go on a hayride, decorate the house inside and out with Halloween/fall decorations, pick out costumes for trick or treating, listen to spooky music, watch all the Halloween movies, participate in the school's Halloween party, go to Trunk-or-Treat, and do Trick-or-Treating in two different neighborhoods. If this sounds familiar to you, your family is not alone and this may be too much!

- Here's a chance to let your child make a choice. You could have your child rank order the activities from most distressing/least enjoyable to least distressing/most enjoyable. Then you can decide as a family what activities to cut.
- You may have to adjust your expectation for what the Holiday means if cutting out experiences or changing the experience from what you expected it to be.
- Consider swapping out an activity chocked full of sensory overwhelm with an activity that has considered autistic differences in the development of the activity. For example, some zoos offer sensory friendly times so your autistic child and your entire family can enjoy 'Boo at the Zoo' without all the added sensory overwhelm factors.
- Give yourself and your child grace – you and your child are doing the best that you can. Remind yourself that the experiences you do engage in will still honor the Holiday traditions of being together, connecting and creating memories with your child, and celebrating.

Helpful Resources and References

National Traumatic Stress Network. (2022). Supporting Children and Teens who have experienced loss during this holiday season. https://www.nctsn.org/resources/supporting-children-and-teens-during-this-holiday-season

Autism Speaks. Holidays. https://www.autismspeaks.org/holidays

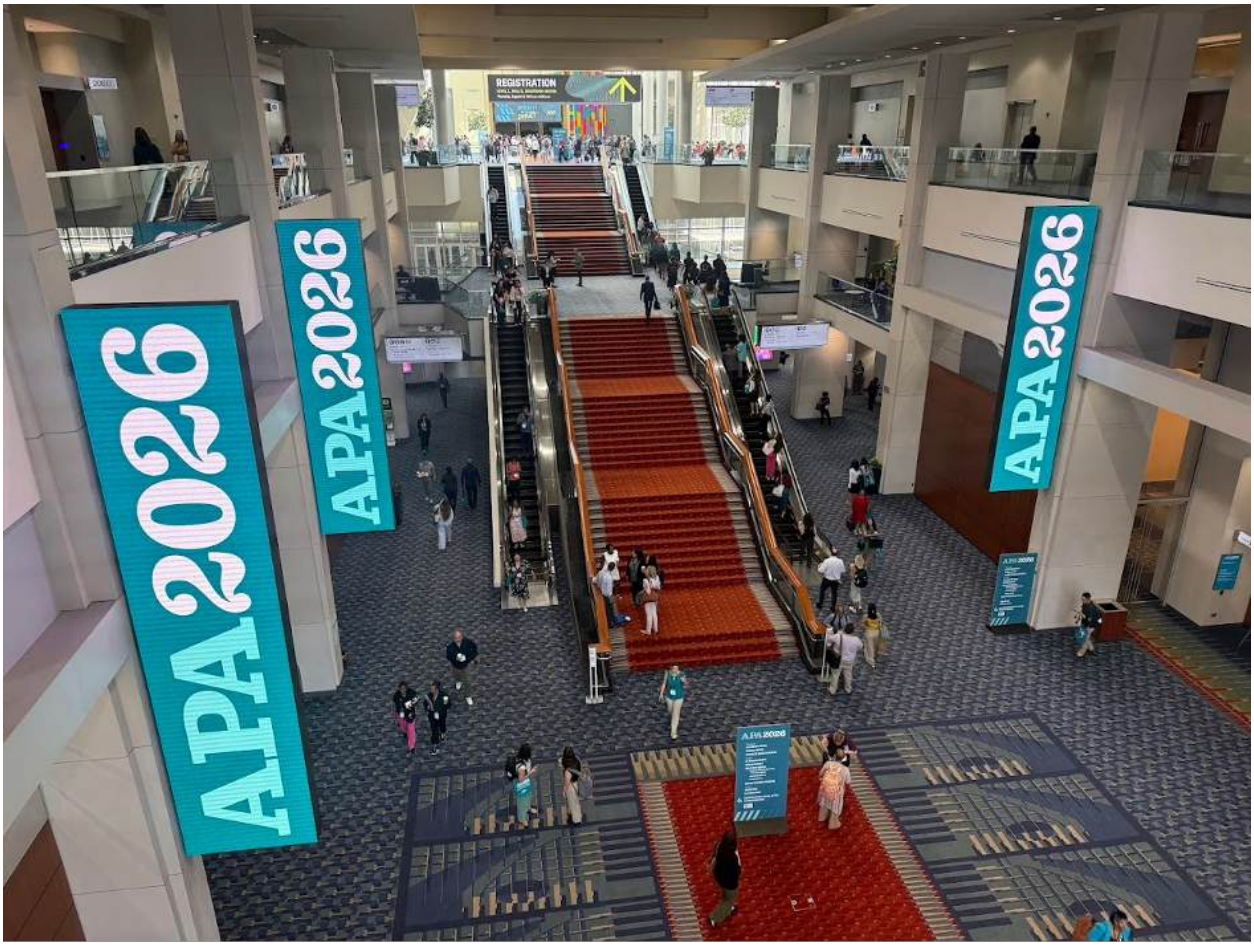
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APA 2026 Convention Recap

By Samantha Gregus-Slade, PhD & Sarah Dickinson, PhD
SCCAP Program Co-Chairs

It was our honor to share the APA 2026 experience with outstanding presenters, attendees, and the SCCAP community. Gathering with colleagues to exchange expertise, clinical insights, and enthusiasm for the field of clinical child and adolescent psychology was truly energizing. Our sessions were well attended and fostered thoughtful discussion, meaningful connections, and wonderful opportunities for professional development.



This year's APA program showcased advances in child and adolescent mental health across clinical practice, training, and advocacy. Presentations highlighted evidence-based assessment and intervention, innovative approaches to service delivery, and strategies for supporting youth and families across a variety of settings. A recurring theme was the integration of research, lived experience, and advocacy to improve services while strengthening the preparation of the next generation of psychologists.

The program also emphasized workforce development, diversity, psychological safety in training, and efforts to expand equitable access to care and address systemic barriers to mental health services. Collectively, these sessions reflected a commitment to bridging science and practice in ways that promote the well-being of children, adolescents, families, and the professionals who serve them.

We are proud of our SCCAP members for showcasing their important work at APA and for contributing to the continued growth and impact of our field.



At the SCCAP Membership Meeting, our members were recognized for their contributions and service to the field of clinical child and adolescent psychology. Among those honored was SCCAP's Director of Operations, Lynn Canty, whose years of commitment and leadership has helped shape Division 53 and support its mission. As Lynn begins her retirement, we extend our heartfelt gratitude for her service and wish her the best in this next chapter.



We are hopeful the presentations at APA 2026 inspired you to stay engaged with SCCAP until next year's convention! If you were not able to attend the Main Stage and Feature Stage programming, you can still access presentations at https://convention.apa.org/ if you registered for APA.

2027 will be an exciting year for SCCAP!

APA 2027 Convention in San Francisco.

APA 2027 will be held in San Francisco from August 12-14. We are thrilled to add Co-Chair, Joshua Golt, Ph.D., to the convention programming team! Dr. Golt is a Fellow at Children's National Hospital, and he specializes in supporting children and young adults with Autism Spectrum Disorder. We appreciate the tremendous contributions his unique perspective will bring to the team!

Posters, Symposia, Critical Conversations, and Skill-Building Sessions: Expected Due Date January 2027

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. We also encourage proposals that represent the unique needs of underserved and/or underrepresented populations. Lastly, we value our members across settings, professional status, and career stages (i.e., trainees, early career professionals,

practicing psychologists, researchers, and academics). We encourage all of our members to contribute and participate in the proposal submission process! Be on the lookout for the 2027 Call for Proposals portal on the APA website and for more information regarding the APA convention on our listserv in late October/early November.

The Student View

Updates from the Student Programming Committee

By Katie Moskowitz, MA & Annika Quam, MS
SCCAP Student Representatives

The SCCAP Student Programming Committee aims to bring together students in Division 53 through engaging educational and training opportunities. The purpose of these events is to foster community among members and provide valuable insight and professional development for the attendees. Our annual webinar on pre-doctoral internships returned this summer with a panel of training directors and recent applicants who shared their perspectives on every stage of the internship process.

Our panel included **Dr. Colleen Byrne**, Psychology Clinic Training Director at the University of Maryland, College Park, who brought 25 years of experience supporting students through the internship process. She completed her own internship at a VA hospital in Tampa and a child postdoctoral fellowship in Atlanta, and works closely with clinic directors and training sites across the region. **Dr. Sunita Lay**, Training Director of the psychology internship program at Cincinnati Children's Hospital Medical Center, also participated in the panel and offered the perspective of someone who reads hundreds of applications each cycle. Dr. Lay earned her PhD in Clinical Psychology at Brigham Young University and practices as a pediatric psychologist.

We were also joined by two trainees who recently navigated the process. **Dr. Hannah Grassie** earned her PhD from the University of Miami, where her work focused on treatment effectiveness and mechanisms of change. She completed her internship at the Institute of Living in Hartford, Connecticut, and is continuing there as a postdoctoral fellow in the Anxiety Disorders Center. **Hong Bui**, a doctoral candidate at the University of Maryland, College Park, recently began her internship at Boston Children's Hospital/Harvard Medical School.

Key Insights and Takeaways

There was one common theme throughout the entire conversation. **Applicants should tell their own story rather than leaving programs to piece it together.** Panelists encouraged students to think of the application as a narrative of where they have been, where they want to go, and how a particular site can help them get there.

Panelists recommended beginning formal preparation about a year before applications are due, noting that many program websites are not updated until August. A useful first step is deciding on a general population of interest, then setting aside time to browse sites in the APPIC Directory, review program brochures, and ask students in older

cohorts to share their lists. Applicants were encouraged to start with their long-term goals in mind and ask what they could learn at a site that they could not learn elsewhere.

When preparing materials, applicants should make their foundational child and adolescent competencies explicit, even when applying to specialty tracks. Training directors also look for consistency between the cover letter and letters of recommendation. Applicants should speak with their letter writers in advance to make sure they know the applicant's current goals and which experiences to highlight. Gaps in training, whether from limited access to placements, leave, or a nonlinear path, can be addressed directly and framed as areas for growth, rather than leaving it to the program to fill in the gaps.

For interviews, panelists reminded attendees that an invitation means the program already wants to get to know them. Applicants were encouraged to balance confidence with openness to learning, ask questions that go beyond what is on the website, and speak authentically rather than from memorized scripts. Keeping brief notes after each interview day can help when finalizing rankings weeks later.

Panelists emphasized that the Match algorithm favors applicants' preferences, so applicants should simply rank programs in the order they would most like to attend. For those who do not match, Phase II offers many strong opportunities, and an additional year of training can strengthen a future application or allow time to complete the dissertation before internship begins.

Additional Insights

Quotations edited for length and clarity.

"When I was a trainee, I just wanted the site to like me and think I was a good fit. But really, we're a part of your journey. Can we help you in your journey or not? If not, we're not a great fit… Oftentimes we have to piece the story together, and you don't want us to piece the story together. You want to be in charge of the narrative." – Dr. Lay

"Your letter writers don't need the encyclopedic volume of your life, but it is really helpful if you can specify for them: here's what's important about me that I hope you can share. Your letter writers are going to know you from a very narrow standpoint." – Dr. Byrne

"I remember feeling like I didn't have a lot of experience in higher acuity settings, and that it would be so obvious from my application. But I realized I was drawn to sites that had some of that exposure, so I thought about these gaps as potential growth areas and areas of fit, and then about what skills I did have that could set me up well in that setting." – Hong

“Your final rankings could be due a month or six weeks after your first interview, and it can be hard to remember your gut reaction or your connection to a site. So after every interview day, I jotted down things I liked, things I didn’t like, and any red flags or green flags, and referenced those when I was ranking.” – Dr. Grassie

“Stay off of the listservs. Trust what you see on the websites, and trust the folks who have been there before you… It’s okay to feel stressed, but there’s no secret and there’s no conspiracy either.” – Dr. Byrne

Thank You

We are grateful to our panelists for taking the time to share their perspectives and for their encouragement to attendees at every stage of training. As Dr. Lay reminded us, internship is one year in a long career, and there are many great opportunities ahead.

Students preparing to move for internship may also be interested in the National Register of Health Service Psychologists’ travel scholarships, which Dr. Byrne shared during the webinar.

If you were unable to join us for the event, or you would like to re-watch the session, a recording of this webinar will be available on the SCCAP website. Last year’s internship webinar, featuring a different panel, is also available for viewing.

Election Results

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

- President Elect: Susan W. White, Ph.D., ABPP
- Treasurer: David Langer, Ph.D., ABPP

All terms will start in January 2027.

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 get involved by running for a SCCAP Board Member position or joining one of the many SCCAP committees.



Susan W. White, Ph.D., ABPP
President-Elect



David Langer, Ph.D., ABPP
Treasurer

SCCAP is Seeking Nominations for Upcoming Board Positions

All positions assume responsibility on January 1, 2028

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 (2028), President (2029), and Past President (2030).

Responsibilities for the President-Elect year:

- The President-Elect shall serve as an active voting member of the BOD and attend all meetings
- Work with the Program Chair and Associate Chair to develop the APA program for the following year (President-Elect's Presidential year)
- Before January of the Presidential year, in consultation with the Student Board members, appoint a Student Representative to serve during the Presidential and Past presidential years
- Plan the Mid-Winter Meeting to be held during your presidential year
- Meet with the President and Central Office during the APA annual meeting to review duties and timelines for the presidential year
- Trio Assignment- Serve as the chair of the Awards Committee
- Read Annual reports, minutes, Operations Manual, bylaws and other historical documents
- Select optional Presidential Initiative or focus for the year.
- Serve on the Finance Committee
  Complete online APA Division Leadership Training
- Participate in general duties of the Board of Directors
- Serve on Committees and complete tasks as assigned by the President

Secretary

The Secretary has a term for two (2) years (2028-2030).

Responsibilities include:

- The Secretary is an officer and voting member of the Board of Directors and serves as recording secretary and parliamentarian of all official board meetings As well as performing all other duties of a Secretary as required

- The Secretary is responsible for documenting the work of the society and the orderly storage of Board documents
- Serves as a signatory on the SCCAP bank accounts and assumes check authorization if the treasurer is unable
- Serves on committees as appointed by the SCCAP president

Member-at-Large (Membership)

The Membership Member-at-Large (MAL) has a term for two (2) years (2028-2030). The overarching responsibilities for this position are increasing society membership and members' connectedness to the society through the development of programs and membership benefits. The focus of this MAL is to create programs and incentives that retain members, recruit new members, and transition students to full members.

General Responsibilities

- Attend all SCCAP Meetings, Serves as a voting member of the Board
- Oversee the Membership drive and renewal process
- Supervise and develop plans to recruit and maintain Early Career Professionals
- Supervise the university liaison program that communicates membership benefits through department chairs, training directors, and student liaisons
- Supervise and recruit the Special Interest Groups
- Chair or appoint a chair to the Membership Committee, appoint members, and report activities back to the board
- Continually update the board on the membership statistics
- Work with the Central Office to approve copy for member-related documents, membership brochures, stock advertisements, banners, etc.
- Work with the Treasurer to establish dues rates
- Provide articles for the newsletter
- Provide Social Media content

Maintain information relevant to membership on the SCCAP website

Candidates must have a strong commitment to the SCCAP mission and the availability to accomplish the tasks outlined for their specific position.

- All positions assume responsibility on January 1, 2028
- Each term runs for three years (2028-2030). 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 candidates 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 SCCAP53.org under the Events and News tab

Nominations and self-nominations are welcome! Please email the application information listed below to SCCAP@SCCAP53.org:

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

The Elections Committee reviews all applications and selects a slate to be presented to the Executive Committee for a vote. Candidates will be notified in late January about the official slate of candidates.

The deadline for nominations is December 15, 2026

Please direct any questions to the Central Office at SCCAP@SCCAP53.org

Update from SCCAP Representatives to APA Council

By Stephen Hupp, PhD, Joaquin Borrego, PhD, and Jarrod Leffler, PhD, ABPP

SCCAP Representatives to APA Council

Division 53 Representatives Stephen Hupp, Joaquin Borrego, and Jarrod Leffler attended the APA Council Meeting on August 4-5, 2026, in Washington, D.C. During the meeting, the Council of Representatives voted to approve the following items:

- Resolution on "the psychological impact of immigration-related enforcement, detention, forced deportation, and persecution"
- Resolution on "eliminating gender-based violence against women and marginalized populations"
- Updated resolution on "family caregivers"
- Updated guidelines on "education and training competencies for psychology practice in primary-care"
- Guidelines on "diagnosing intellectual disability in forensic settings"
- Policy and position statement on "seclusion and restraint in psychiatric settings"

More details regarding the actions taken at APA Council meetings can be found by visiting this page.

The next APA Council Meeting will be held February 19-20, 2027, in Washington, D.C.

Programming Committee Update

By Tamara Del Vecchio, PhD
Member-at-Large, Programming and Education

It has been a busy year for SCCAP programming! Throughout 2026, SCCAP has offered programs on a range of topics, including therapeutic work with children and families experiencing high-conflict divorce, disseminating evidence-based strategies through children's books, developing a private practice, practical approaches to involving caregivers in treatment, and functional neurological disorder. We are grateful to the many presenters who have shared their expertise and to SCCAP members who have participated in these programs.

Several programs are still ahead this fall. On November 20, SCCAP will host Smith Award recipient Cecil Reynolds, Ph.D., for "A Neuroscientist and Clinical Practitioner Looks at Executive Functioning." We are also excited to close out the year with a Virtual Symposium on AI in Child and Adolescent Psychology on Friday, December 11, 2026. The symposium will address the growing role of AI in child and adolescent development, clinical practice, and research.

Looking Ahead

Planning is already underway for future SCCAP programming. Our next Clinical Practice Institute is scheduled for March 1, 2027, and we are also beginning to plan for the next SCCAP Conference, which will be held in 2028.

We have also expanded access to SCCAP programming. In addition to our longstanding status as an APA-approved sponsor of continuing education (CE), SCCAP is now an approved CE provider for psychologists in New York State. We have also opened our webinars to non-members, allowing us to share SCCAP programming with a broader professional community. In addition, we continue to offer webinars and CE opportunities at no cost to SCCAP members.

We welcome ideas for future webinars, symposia, conference programming, and other educational activities. If there are topics you would like SCCAP to address, or if you are interested in becoming involved in programming, please reach out to Tamara Del Vecchio at delvecct@stjohns.edu, Programming Committee Chair.

Thank you to everyone who has contributed to SCCAP programming this year, including our presenters, organizers, committee members, and attendees. Your involvement makes it possible for SCCAP to offer programming that reflects the breadth of our field and the evolving needs of our members.

SCCAP Webinar Committee Updates

By Jamie Micco, PhD, ABPP, LP
Webinar Committee Chair

We're pleased to announce that, beginning September 2026, SCCAP webinars are now approved for continuing education (CE) credit for New York licensed psychologists. Many thanks to Lynn Canty, SCCAP Director of Operations, for leading the application process.

Our Fall webinar series kicked off on September 28 with Sarah Taylor-Cavelier, PhD, who presented *Bringing Caregivers Into the Room: Practical Family Involvement in Inpatient and Partial Hospitalization Care for Youth.* A recording of this webinar is now available on the SCCAP website.

The rest of our fall and early winter lineup covers a wide range of timely topics:

Friday, October 9 | 12:00–1:00 pm ET

Julio Quezada, MD
An Overview of Functional Neurological Disorder in Children and Adolescents

Friday, November 20 | 12:00–1:30 pm ET

Cecil Reynolds, PhD
Executive Functioning: An Integrative View (Smith Award Presentation)

Friday, December 11 | 12:00–2:00 pm ET
Symposium on Artificial Intelligence and Youth

12:00–1:00 pm ET: Keynote. Linda Charmaraman, PhD (Wellesley College), will discuss how AI is shaping child and adolescent development.

1:00–2:00 pm ET: Concurrent panels (choose one).

- AI in Clinical Practice with Children, Adolescents, and Parents. Pilyoung Kim, PhD (University of Denver); Jonathan Perle, PhD (West Virginia University); and Shannon Wiltsey Stirman, PhD (Stanford University)

- AI in Child and Adolescent Psychology Research, including ethical use of AI in grant writing and publishing. Mary Fristad, PhD (The Ohio State University; Nationwide Children's Hospital; Editor, *Evidence-Based Practice in Child and Adolescent Mental Health*); Mohammad Hosseini, PhD (Northwestern University Feinberg School of Medicine); and David Resnik, JD, PhD (NIH)

Webinars are free for SCCAP professional members and student members. We hope you'll join us for one or more of these presentations!

SCCAP Fellows Committee Update

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

APA/SCCAP Fellow status is a valued honor and recognizes outstanding contributions, with national impact, to Psychology overall and to SCCAP specifically.

Our new SCCAP Fellows (those who were already Fellows in other APA Divisions) were previously announced in our July Newsletter. I'd like to congratulate them again on receiving this well-deserved honor. Congratulations Roberto Abreu, PhD, Julie Cerel, PhD, Meghan McAuliffe Lines, PhD, Sunnye Mayes, PhD, ABPP, Leo Wilton, PhD, and Wendy Ward, PhD, ABPP!

I would also like to acknowledge our Initial Fellows (those who were not yet Fellows of any APA Division but are now), who were announced at the APA Convention in August. These new APA and SCCAP Fellows include Anthony Puliafico, PhD, Jamie Ostrov, PhD, and Marni Axelrad, PhD, ABPP. A hearty congratulations to all!

As Fellows Chair, I am delighted to showcase our amazing SCCAP Fellows. This month the Fellows Committee would like to introduce (or re-introduce to many of you) Dr. Amanda Jensen-Doss, who became a Fellow on January 1, 2026.

Featured Fellow: Amanda Jensen-Doss, PhD

Dr. Amanda Jensen-Doss is a Professor and the Director of Clinical Training in the Department of Psychology at the University of Miami. She is the principal investigator of the CIELO (Child Implementation and Effectiveness) Lab at the University of Miami. She conducts effectiveness and implementation studies focused on improving mental health care services for youth, with a primary emphasis on the integration of assessment and treatment to improve clinical and organizational decision-making in community mental health settings. While the population of interest in her lab is youth outpatient mental health populations in general, many of her studies have focused on internalizing disorders and trauma. Dr. Jensen-Doss's research has been funded by the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, and the Institute of Education Sciences. She currently is the co-PI of an R01 from the National Institute of Mental Health to develop and test a multi-method, multi-informant approach to measuring fidelity to measurement-based care, and also supports her community partner, Kristi House, as the program evaluator for their National Child Traumatic Stress Network grant implementing evidence-based, trauma informed practices in Miami-Dade County.

Dr. Jensen-Doss also contributes substantial service to the field. She has previously served as a standing member of the National Institute of Mental Health Mental Health Services Research Committee (SERV) review pane, leader of the ABCT Dissemination and Implementation Science Special Interest Group, a Member at Large for Science & Practice for SCCAP, and the Chair of the Coalition for the Advancement & Application of Psychological Science, a national consortium of organizations dedicated to advancing the public health impact of psychological science. She recently chaired the American Psychological Association's committee to develop professional practice guidelines for measurement-based care and continues to serve on their committee on measurement-based care.

I would like to acknowledge and thank the members of the Fellows Committee – Rhonda Boyd, PhD and Jarrod Leffler, PhD, ABPP – for all their contributions.

If you are interested in becoming an SCCAP Fellow, you are encouraged to apply! Applications for the 2027 cycle are due December 1, 2026, so you have time to prepare your materials. Please note 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**.

Are You Getting the Most Out of Your SCCAP Membership?

By Nicole Lorenzo, PhD
Member-At-Large: Membership and Public Interest

As the fall season gets underway, it is a great time to reconnect with your professional community—and perhaps discover a few SCCAP resources you have not been using.

Whether you are a student taking your first steps into the field, an early-career psychologist building your professional identity, or an established clinician, researcher, or educator, your SCCAP membership may offer more than you realize.

Here are FOUR things you might not know your SCCAP membership gives you—and ways to make the most of them this fall:

1: Free Webinars—and Free CE

SCCAP offers professional development webinars throughout the year on topics relevant to clinical child and adolescent psychology. For SCCAP members, webinar registration and continuing education (CE) credit are free.

Members can also access previously recorded webinars through SCCAP's webinar library, making it easy to fit professional development into your schedule.

Try it this fall: Browse the webinar library or register for an upcoming webinar.

2: Access to Two SCCAP Journals

Your membership includes online access to SCCAP's two scholarly journals: the *Journal of Clinical Child & Adolescent Psychology (JCCAP)* and *Evidence-Based Practice in Child and Adolescent Mental Health (EPCAMH)*.

Together, these journals provide access to research and evidence-based clinical scholarship across child and adolescent mental health—resources that can support your research, teaching, training, or clinical practice.

Try it this fall: Take a look at a recent issue and find one article relevant to your work.

3: A Professional Community Within SCCAP

Looking for colleagues who share your specific professional interests? SCCAP's Special Interest Groups (SIGs) provide smaller communities centered around particular populations, settings, and areas of clinical practice and research.

SIGs offer a way to meet colleagues, exchange ideas, collaborate, and become involved in SCCAP without needing to take on a formal leadership role.

Current SIGs span interests ranging from infancy and early childhood and emerging adulthood, to autism spectrum disorder, exposure-based interventions, professional development and mentoring, and acute, intensive, and residential services. SCCAP members can join one or more SIGs at no additional cost.

Try it this fall: Explore the current SIGs and join one that overlaps with your interests.

4: Recognition at every career stage

SCCAP offers a range of awards recognizing the contributions of students, trainees, early-career professionals, and established members across research, practice, mentorship, and service.

Fall is a particularly good time to take a look: **the consolidated application period for SCCAP's 2027 awards will open soon.** Whether you are considering applying yourself or know a colleague or trainee whose work deserves recognition, now is a great time to explore the available awards and eligibility requirements.

Try it this fall: Review SCCAP's awards and consider whether there is one that fits you—or someone whose work you would like to recognize.

Make One Connection This Fall

You do not have to take advantage of every SCCAP resource at once. **Start with one.**

Watch a webinar. Read an article. Join a SIG. Ask a question on a listserv. Explore the Career Center. Check out an award opportunity. Introduce yourself to another member.

Your SCCAP membership is more than access to information—it is an opportunity to be part of a professional community dedicated to improving the lives of children, adolescents, and families.

This fall, find one new way to make your SCCAP membership work for you.

Remember to Renew Your Membership!

Help SCCAP grow by sharing this information with your colleagues, students, and friends! First time members can use the FREE CODE: **Div53New**

- **You do not need to be a member of APA to join SCCAP or use the APA registration platform.**
- Non-APA members and APA members may begin the process on SCCAP53.org. Under the Membership tab, you will find a description of the different membership levels and if appropriate, the Free Membership Code. The Registration/Renew button will take you to the APA website to officially register. All registrations will be done on the APA website.
- Renewal does NOT change for current APA members. You can renew your division memberships with your usual APA membership.
- SCCAP Dues are still $40.
- FREE Membership is offered for students, post bacs, post docs, members from low-income countries, APA-defined disabled members, life members, for those taking gap years, and for first time members.
- Student Membership is FREE, but you must renew every year.
- **FREE, FREE, FREE:**
    - To receive your free membership, you must **use a code** that will be provided on the SCCAP membership website. Do NOT PAY if you think your membership should be free. Contact APA Membership.
    - APA closes membership registration for the current year in July of that year. Those who join after July 1 will have their membership applied to the following year.

Why join SCCAP?

Are you new to the child and adolescent mental health profession and looking for networking opportunities? Are you a seasoned professional looking for continuing education opportunities and ways to stay current on the latest research and practice in the field? SCCAP membership provides child mental health professionals with a wealth of resources and professional support including webinars with FREE CEs, Special Interest Groups, mentoring, and so much more. Please explore all the benefits of membership to SCCAP on our website SCCAP53.org

For questions or to change membership levels, please contact the APA Service Center at 1-800-374-2721 or email Membership@APA.org

Clinical Child & Adolescent Practice SIG Update

By Megan Lawson, PsyD, ABPP
Chair, Clinical Child and Adolescent Practice SIG

The Clinical Child and Adolescent Practice SIG has exciting programming ahead! We have been busy planning several continuing education offerings for 2027, with presentations addressing a range of timely issues relevant to psychologists working with children, adolescents, and families.

Upcoming presentations include:

- **Ashley Powell, PhD**, who will present on **working with child sex trafficking victims.**
- **Alex Roberts, PhD**, who will present **"Same Disability, Different Rules: IDEA, Section 504, and the ADA Across the Educational Pipeline."** This presentation will focus on the differing legal frameworks governing testing accommodations and disability supports across educational settings.
- Our own former SIG Chair, **Jill Thurber, PhD, ABPP**, who will present on her trademarked model, **The Integrated Parent**.
- Amy Gorniak, PsyD, who will present on **climate psychology with children and adolescents.**

We are excited about the breadth of expertise represented in these upcoming programs and look forward to sharing dates and additional details as they become available.

Our current board includes:

Chair: Megan Lawson, PsyD, ABPP
Secretary: Mary Collins, PsyD
Student Representative: Leslie Musgrove, PsyD
Members at Large: Cynthia Diaz de Leon, PhD; Alex Roberts, PhD; Priscilla Morrison, PsyD
Liaison to SCCAP Practice Committee: Jacqueline Herrera, PsyD

We always welcome new members to serve with us!

The Summer Treatment Program SIG Updates

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

Happy Fall!

We hope those of you who ran a Summer Treatment Program (STP) had a successful summer season and are settling into the school-year routine. Before you know it, we will all be back to summer planning. If you are like us, you think about summer all year long!

STP SIG Updates

We are excited to share that we have established an annual STP Special Interest Group (SIG) gathering as part of the annual ADHD SIG meeting during the Association for Behavioral and Cognitive Therapies (ABCT) convention. This year's meeting will take place in Baltimore.

Following our gathering last year, we officially launched quarterly STP SIG calls and have held three meetings so far. These calls have provided a wonderful opportunity to build camaraderie among current and former STP professionals, share stories about the joys and challenges of summer programming, and exchange knowledge and resources that support the successful implementation of STPs.

We will have our next call on January 22, 2027, from 3:30-5:00pm EST. If you are interested in attending, please email khart@fiu.edu.

Join the STP SIG

If you are interested in learning more about STPs and connecting with colleagues who are experiencing the magic of summer programming, we invite you to join us!

The primary goal of the STP SIG is to provide a professional community that supports clinicians, researchers, students, trainees, and administrators involved in the successful implementation of Summer Treatment Programs.

We invite you to join our listserv and participate in ongoing conversations about emerging and promising practices that can strengthen STPs by:

- Increasing access to evidence-based services
- Promoting equity, diversity, and inclusion

- Enhancing training experiences for the next generation of child mental health professionals
- Incorporating family and stakeholder feedback into program development and intervention strategies
- Sharing resources, innovations, and lessons learned across programs

As we often say, an **STP takes a village—and we are here for you.**

We hope you will join us as we continue to connect professionals across the country and around the world through a program that has changed so many lives, including our own. We welcome your feedback, questions, comments, and insights about STPs.

Together, let's continue to advance Summer Treatment Programs and honor the enduring legacy of Dr. William E. Pelham Jr., STP Visionary and Trailblazer.

