

APA Council Report
August 13, 2008

The second annual meeting of the APA Council of Representatives is held each year on the day prior to, and the last day of the annual convention in August. This year's convention in Boston, sandwiched between the two full agenda Council days, was itself a very rich experience.

There are always a mix of exciting, controversial, and every day business items before Council. One of the highlights included our endorsement of a new mission statement for APA. Jay Younger, the consultant retained by APA to facilitate development of a new strategic plan, mission and vision statement, led us through the process of consensus building to agree on a new mission statement. He reminded us that the mission should convey the organization's fundamental reason for being, and the vision should spell out what successful accomplishment of the mission looks like. We were also asked to find "the sweet spot" in the overlapping Venn diagram between what APA can actually influence, and what Psychology has the potential to accomplish. After a lot of on the floor and small group wordsmithing, the new APA mission statement we approved is: "The mission of the APA is to advance the creation, communication, and application of psychological knowledge to benefit society and improve people's lives."

Council was pleased to support a welcome first time opportunity for psychology to have a leadership role in development of the Mental Health chapter of the 11th version of the International Classification and Related Disorders (ICD). There are 2 project officers for the development process based at the World Health Organization (WHO) in Geneva. Both project officers for all previous versions have been psychiatrists. The current proposal, which APA agreed to support, is to have 1 project officer be a psychologist, and the 2nd to be a psychiatrist. The psychologist who will accept the position, Dr. Jeffrey Reed, is already working within the WHO. The reason APA had to approve this proposal is that the 2 project officer positions require funding. We were reminded that all medical specialties worldwide, except psychiatry (and other US mental health care providers), use the free and open source ICD to diagnose disorders. Whereas the DSM, published by the American Psychiatric Association (ApA), which must be purchased, is a significant source of revenue for the ApA, the ICD-10 does not generate income or funding for the work on its revision. The DSM is also currently undergoing planning for its next revision, and we were told ApA and WHO are negotiating how the two codes will interface. The funding that APA authorized will fund the psychologist consultant expert to work full time as part of the core revision team in the WHO through completion of the ICD revision in 2012, pending the contract being reviewed annually by the APA Board of Directors (BOD). We were told that a psychology representative was asked to co-lead the revision process to draw on our 1) cognitive, behavioral, and social expertise, and 2) our expertise in research methodology.

A piece of good news for our local community, Dr. Jenny Cornish, a long-time CPA member who has served CPA as Secretary, and as Colorado's APA Council Representative, was approved as a Fellow of the APA from Division 17, Counseling Psychology. Congratulations Dr. Cornish!

A second issue of local import was postponed until the February 2009 Council meeting. This issue has to do with a concern raised by many psychologists that it is expensive to pay dues to both the APA and the CPA. Some members have decided that they had to make a choice between the 2 associations based on limiting their dues payment, rather than following their preference to be affiliated with both groups. I can tell you that every year the CPA Board re-considers the dues structure, and considers the idea of reduced dues for psychologists who are academics, belong to other professional associations, are early career psychologists, psychologists who have fallen upon hard times, etc. We have instituted a number of revisions over the past few years in response to hearing these concerns from our members. We also have

to balance these revisions with a commitment to maintaining the financial health and viability of the association. It is always hard to predict what the actual financial impact will be despite our best attempts to forecast. The APA is in the same position. The proposal to be re-visited in February would extend a dual dues discount to individuals who are members of both APA and a state, province, or territory association member (SPTA). This would mean that members of CPA would have their APA dues discounted by a certain percentage. There is clear recognition of the possible benefit this would provide to association members and SPTA's. The obstacle to passage is the uncertainty about the financial impact this would have on APA. The APA officers have been charged with developing an impact assessment. If this proposal matters to you, please email me or contact APA directly so your voice is heard.

To update you about the current financial status of APA, Council receives a budget report at each biennial meeting, and we are charged with making final budget approvals. We voted to approve the projected 2008 year-end budget with a net probable deficit of \$937 million. The budget deficit was traced to a 3% decrease in member dues and a decrease in publication sales, which is a major source of APA non-dues revenue. APA long-term investments also recorded losses as did most Americans, but our assets are being well managed compared to market index rates. This is the first in many years that APA has had a deficit budget year, so changes were made to remedy this problem. One decision, which is antithetical to the dual dues discount, was to slightly raise APA dues. We approved a 2009 dues increase of \$8 to the 2008 rate of \$287. The APA also refinanced the two Washington DC buildings where APA is housed at a 4.96% interest rate, with predictions that this will save the association \$3.3 million through 2012. The buildings continue to be wise and stable investments. The buildings' second largest tenant, the National Association of Social Work (NASW), and most other lessees, are committed to the space through 2019. The buildings themselves are also gaining in stature. This year the main building earned the prestigious TOBY award for "The Building of the Year" in Washington, DC. Apparently the competition and review progresses are considerable. Now the building will advance to the regional TOBY contest.

We also voted to approve new discretionary funding items in the 2009 budget including: funds to create accomplishment reports on the activities of APA, funding for the upcoming Future of Psychology Practice Summit in San Antonio, TX, the primary initiative of the incoming APA President, Dr. James Bray, and limited travel expenses for Division representatives to their annual meeting. We approved the proposed change to have the CEO take initial responsibility for setting financial goals for each service program during the budgeting process rather than having the programs set those initial goals.

The controversies usually stem from proposed amendments and reports. Before an item reaches the Council floor, it has been created, reviewed, and edited throughout the year by task forces, committees, the relevant APA Office or Division, and the Board of Directors. Council members are informed of which groups have reviewed and supported the proposed item, and which oppose its acceptance. Council, the elected representative branch of our association governance structure, has final decision authority.

This August we voted to receive a number of reports submitted by appointed task forces. I learned that a Council vote to *receive* the report does not mean we *accept* the recommendations of the reports, or that the recommendations will become APA policy. That takes another step. The reports are accessible to members and interested other parties. President Alan Kazdin encouraged us to take action beyond the creation of these reports, which incorporate much effort and discussion, but often do not become implemented. Some of the reports we voted to receive include:

Ψ Report of the Task Force on Mental Health and Abortion. The task force was convened to review new findings published during the intervening 15 years since the Reproductive Choice Working Group, established in 1989 as a task force by the APA Board, published their review of the literature in 1990 and 1992. The new report will be disseminated via the web. The report will include a

disclaimer that the report does not constitute APA policy nor commit APA to the activities described therein.

- Ψ A report from the Board of Educational Affairs Task Force on Strengthening the Teaching and Learning of Undergraduate Psychological Sciences.
- Ψ The Report Recommending Changes to the APA Convention that would appeal to Scientists.
- Ψ The Report of the Task Force on Evidence based practice with Children and Adolescents. There was not much discussion of this report on the Council floor, but in the Child and Family Caucus meeting, we were informed about the report, and the upcoming Society for Research in Child Development (SRCDD) conference that will be held in Denver, April 2-4, 2009. At the conference, there will be meetings to propose models for the treatment of children and families. If you are interested in attending, the website is <http://www.enertianetwork.com/~srcdcom/>
- Ψ The Report of the Task Force on Gender Identity and Gender Variance.

We took the next step to adopt as APA policy certain resolutions and amendments. We voted to adopt:

- Ψ The Resolution on Transgender, Gender Identity, and Gender Expression Non-Discrimination, which was adopted with loud applause.
- Ψ The proposed revision to the Principles for the Recognition of Proficiencies in Professional Psychology. The new definition of proficiency reads as follows with the changes in bold: “A proficiency is a circumscribed activity in the general practice of professional psychology or one or more of its specialties **that is represented by a distinct procedure, technique, or applied set of skills used in psychological assessment, treatment and/or intervention within which one develops competence.**” This change amends previous APA Council policy from February 1995. In contrast, the broader specialty designation from August 2007 states, “A specialty is a defined area of psychological practice which requires advanced knowledge and skills acquired through an organized sequence of education and training.”
- Ψ The proposed Criteria for the Evaluation of Quality Improvement programs and the use of Quality Improvement data.
- Ψ Report of the 2007 APA Presidential Task Force on Institutional Review Boards and Psychological Science. This agenda item was postponed until Sunday and the implementation plan was amended before acceptance to increase posting and distribution of the report. The task force was convened by past APA President Sharon Stephens Brehm as one of her presidential initiatives. The task force was charged with identifying the “disconnects” between psychologists and IRBs that can lead to perceived or actual conflict, and to identify opportunities to build collaboration.

The issue of an APA proposed publication fee of \$2,500 for authors publishing in APA Journals to deposit their papers in PubMed if the studies were NIH funded will *not* be enacted. The proposal will be sent through the committee and board review process, and it may re-emerge in some other form, so stay tuned.

It was a pleasure to represent you on Council and to be able to bring these updates back to you. If you are curious about any of the reports or decisions, please feel free to contact me or the APA. I can be reached by email at Kaley-Isley.Lisa@tchden.org