

HAWAI'I PSYCHOLOGIST NEWSLETTER

2024 | March / June Double Edition

Warm Mahalo from the Editor, by Diane Logan, PhD, ABAP, CSAC dr.dlogan@gmail.com


Aloha all, and welcome to 2024 (although if we're rounding, it's already 2025). This DOUBLE FEATURE newsletter includes updates and events from the beginning of the year all the way up through present day. For me, 2024 has brought a series of learning experiences ranging from devastating to enlightening to humbling to (thankfully) humorous. Here's a few:

- 1) Comic book stores are very different here than they are in Japan. I learned this last month in Osaka. While visiting one. With my teenage son. And three of his classmates. On a school trip.
☆☆☆☆☆ Do not recommend.
- 2) Saturday Night Live helps me endure anything from politics to genocide while offering skits for patients while also ruining my childhood cartoons (so long Scooby and Beavis) and icons (bye Barbie).
★★★☆☆ Mostly recommend.
- 3) Connecting with HPA colleagues, online or in person, in Honolulu or Seattle or Washington DC, offers (delicious) opportunities that fill my heart and mind (and belly). Join when and where you can!
★★★★★ Definitely recommend.

Here's what's in store for you this edition:


- Ψ Ways to get involved and help
- Ψ A not-to-miss Grand Rounds
- Ψ Upcoming Save the Dates
- Ψ CEUs and committee meeting times
- Ψ Member columns and publications
- Ψ Board member updates
- Ψ Recent events recaps (pictures!!!)
- Ψ And (my favorite) SPOTLIGHTS!


♥ Diane



Compassion & Resilience in a Polarizing World

2024 Hawai'i Behavioral Health & Wellness Convention
September 19 & 20, 2024 Honolulu, HI


Hawaiian Islands Association for
Marriage and Family Therapy


NASW HAWAII CHAPTER
National Association of Social Workers



Hawaii
Psychological
Association
For a Healthy Hawaii

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2024 HPA BOARD OF DIRECTORS



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HPA President



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Clinical Division Rep



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Amithea Love, PsyD
Kaua'i Representative



Adrianna Flavin, PhD
Maui Representative



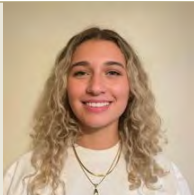
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Chaminade Student Rep

PRESIDENTIAL THOUGHTS

Presidential Corner... by HPA President Sean Scanlan, Ph.D.

Presidential Corner

Sean Scanlan, Ph.D.

sean.scanlan@chaminade.edu

Aloha!

I am honored to be writing this as the current HPA President, especially when I consider all the great leaders that have come before me. Having been a private practitioner and psychology professor for many years, I hope to bring a different perspective to this position, seeing how the needs of the community are met by all the excellent current psychologists, but also how future needs can be met by psychologists of the future. This is important as we realize that the mental health needs of society are in constant flux (e.g., increased awareness of trauma, increases in internalizing vs. externalizing issues), and how we as a profession need to have the training and flexibility to respond to those changes. Society's awareness of the value of psychologists has never been higher, so I think we're all fortunate to be able to use that awareness to help those in need.



Attending the APA conference of SPTAs (our counterparts from across the nation) for the last two years has really broadened my perspective of psychological services across the nation, and as a result, made me appreciative of the position of the Hawai'i psychologist. First, although things can be better here, we are extremely fortunate to be in a state whose laws and health care systems generally support mental health services. Other states don't have that, and their psychologists struggle to give even basic care. Also, Hawai'i is doing *relatively* well in mental health care as a state (although it is in no way sufficient and not indicative of all metrics). In other words, if it feels like we're behind, we are nowhere near the desperation of psychologists in other states (e.g., other states have tragically high percentages of residents that do not have any or sufficient healthcare). Moreover, Hawai'i is exceptional in terms of equity/diversity/ inclusion efforts; whereas other states have moved to not only reject EDI efforts but have even rejected the premise of EDI altogether.

As for our organization, HPA is recognized by APA as exceptional (winning the 2024 Outstanding SPTA Award). We are fortunate to have a seasoned and nationally respected Executive Director in Ray Folen. We are very active in our state legislature, getting bills heard and passed to help the profession. We have ample training opportunities (e.g., grand rounds, CE opportunities, an annual convention). Our membership numbers are good, our dues are relatively low, and our budget is solid. Finally, we have an active membership, supported with past, present, and future board members. In sum, there are some states that have none of this and very few that have all, so I am very appreciative of being a part of a respected organization of Hawai'i psychologists.

HPA Member Resources

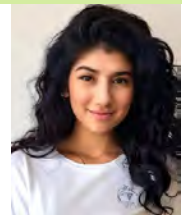
Hawai'i Groups Database

Lisa Casados, PsyD

lisacpsyd@gmail.com

Huge thank you to Dr. Lisa Casados for creating and sharing [this link](#) for all Hawaii groups going on (everyone has the ability to edit so please keep link within professionals).

"I wanted to create a resource for all us clinicians to be able to easily add and access running therapeutic groups in Hawaii. Anyone with the link can add/edit. I added a section under the groups for clinicians to add NEEDED/requested groups."



Check out Lisa's SPOTLIGHT in this edition!

HPA HELP WANTED!

HiBHC: Hawai'i Behavioral Health Connection

Join the Hawai'i Behavioral Health Connection (HiBHC)!

About Us

- Hawai'i's most vulnerable individuals face *significant delays* in accessing behavioral health services, given provider shortages and waitlists, which were exacerbated during the Maui wildfires. Hawai'i Behavioral Health Connection (HiBHC) hopes to establish a statewide referral network to link Hawai'i residents in need with licensed behavioral health providers, including **PhD/PsyD, LCSW, LMFT, LMHC, APRN**.
- HiBHC aims to be an *accessible referral coordination system* that prioritizes cultural and community elements, fosters connections and partnerships, and provides opportunities for community and clinical training, engagement, and outreach.

What is our mission?

- To increase access to clinically and culturally appropriate care for all people of Hawai'i

We are looking for licensed volunteers to:

- Offer pro bono services
- Receive clinical referrals
- Provide clinical trainings
- Provide supervision
- Attend community events

Join us in:



- **Giving back** to our community
- Preparing for the future together and **uniting our communities**
- **Making a difference post-Maui wildfires** by helping residents experiencing significant delays in receiving behavioral health services
- **Receiving free evidence-based clinical and traditional cultural trainings**
- Helping **nurture the next generation** of behavioral health providers
- **Fostering partnerships** with organizations and clinicians at all levels



For more information, contact
Dr. Jill Oliveira Cabbab
HiBHCoutreach@gmail.com

Scan here to indicate your interest!



Committee Corner

Ready to join a committee? Email hpaexec@gmail.com for info!

HPA Committees

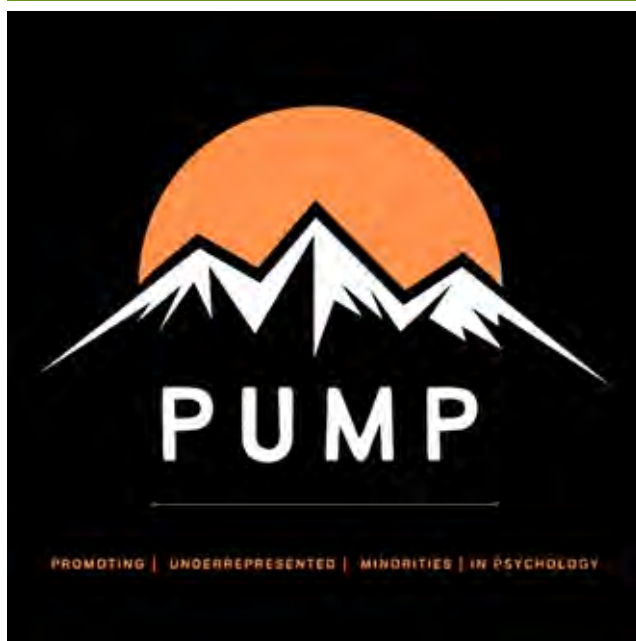
- ❖ *Business Practice & Insurance Committee*
- ❖ *Child & Adolescent Team Committee (CHAT)*
 - ❖ *Continuing Ed / Convention Committee*
 - ❖ *Disaster Response Committee*
- ❖ *Diversity and Equity Steering Committee (DESC)*
 - ❖ *Legislative Action Committee (LAC)*
 - ❖ *Membership Committee*
- ❖ *Public Education & Information Committee*
 - ❖ *Rural Health Committee*
 - ❖ *RxP Subcommittee*
- ❖ *WRJ (Walk Run Jog) Group*

Committees are open to **ALL!**



We encourage participation from students, associate members, and of course our full members!

PUMP: Promoting Underrepresented Minorities in Psychology



Do you hold underrepresented identities, broadly defined? Are you looking for additional professional mentorship on topics like career development, manuscript development, grant writing, or navigating the academy?

Consider submitting a mentorship request through PUMP! The mentorship framework is intended to formalize mentorship for underrepresented individuals to increase their representation in the field of psychology.

Through this framework, students with underrepresented identities (or early career researchers) can reach out for mentorship on anything from a manuscript or grant application to career stage advice or assistance (such as applying to graduate school or internship) to more general short-term or long-term mentoring. Like the peer review process, we will

then send out a mentoring request to academics within our mentoring database.

PUMP is a collaboration between Divisions 12, 28, 45, and 50 of the American Psychological Association. Check out our [website](#) to learn more, to sign up as a mentor, or to submit a mentorship request!

This project was funded by the APA's Committee on Division/APA Relations (CODAPAR) Interdivision Grant Program.



Hawai'i Pro Bono Mental Health Project

No cost services for those without health care insurance



While our state faces unprecedented times during and following the COVID-19 pandemic, the Hawai'i Pro Bono Mental Health Center realizes that the mental health and well-being of Hawai'i's residents is of utmost importance.

To help individuals seeking psychological support during this time, mental health experts, including psychologists, marriage and family therapists, clinical social workers, and mental health counselors, are offering free telehealth services to those who are uninsured or underinsured.

The project is still looking for **VOLUNTEERS** to provide services as well as accepting **NEW REQUESTS** for services.

For more information, please visit <https://hawaiipsychology.org/>
Prospective volunteers, please email HPACOV19PROJECT@yahoo.com

HPA Newsletter Pop Up!

Dear HPA Members,

The listserv continues to provide a fantastic opportunity for members to connect clients with providers, receive notifications of training and continuing education opportunities, and chances to network with other HPA members.

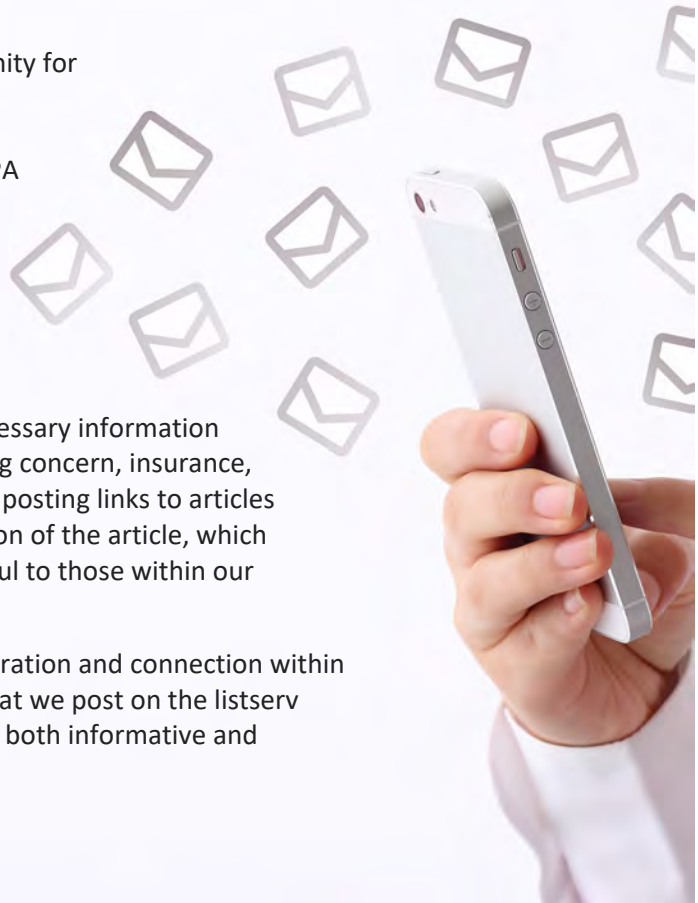
Thank you to members who follow the HPA Listserv Policies regarding proper use of the listserv. The support and genuine words of encouragement given to other members is greatly appreciated.

Just as a reminder to deidentify and only include necessary information when posting referrals on the listserv (e.g., presenting concern, insurance, preferences for tele-health or in-person, etc.). When posting links to articles on the listserv, make sure to include a brief description of the article, which could also include how the information may be helpful to those within our profession.

The listserv offers a great avenue to promote collaboration and connection within our profession. Let's all continue to be mindful of what we post on the listserv and help to create a culture within the listserv that is both informative and supportive.

Sincerely,

HPA Listserv Task Force



UPCOMING EVENTS

08/05/24 HPA Grand Rounds

CPT for Diverse Populations: Global to Local

12-1pm

Dr. Debra Kaysen

The PTSD literature has demonstrated support for brief, effective interventions but there is a gap in access to these treatments for ethnically and culturally diverse clients, for clients who are gender or sexual minorities, and for individuals residing in low and middle income countries. Psychotherapies occur within a multicultural context where clients and therapists each bring their own cultural lens to the process. Yet often PTSD treatments are not developed for or tested with diverse patient populations. There is increasing evidence that evidence-based practices and cultural competency can be complementary. This talk will discuss one of the evidence-based psychotherapies for PTSD, Cognitive Processing Therapy and will review the research conducted adapting this psychotherapy for various diverse patient populations, both within and outside of the United States. The talk will review various models and approaches for adaptation and Dr. Kaysen will discuss her work culturally adapting CPT across diverse contexts and populations. Dr. Kaysen will discuss how to help make PTSD treatment more acceptable and accessible and close the treatment gap.



Objectives:

At the end of this presentation learners will be able to:

1. Describe approaches to cultural adaptation and give at least one example of a modification to increase cultural fit.
2. Understand the current evidence base for CPT's effectiveness when adapted for differing cultural groups.
3. Identify core elements of CPT that have remained consistent across adaptations for various patient populations.

Debra Kaysen, PhD ABPP.

Professor, Department of Psychiatry & Behavioral Sciences, Stanford University

Debra Kaysen is a clinical psychologist, Professor, and Chief of the Division of Public Mental Health and Population Sciences in the Department of Psychiatry & Behavioral Sciences at Stanford University. She is a past President of the International Society for Traumatic Stress Studies (www.istss.org). Her area of specialty both in research and clinical work is in treatment of those who have experienced traumatic events including PTSD, mood and substance use disorders. Dr. Kaysen is a leading expert on adaptation of evidence-based PTSD treatments for diverse populations and for delivery outside of specialty care. Her research has been funded by the National Institute of Alcohol Abuse and Alcoholism, the National Institute of Drug Abuse, the National Institute on Minority Health and Health Disparities, the Department of Defense, and PCORI.



REMEMBER Grand Rounds CEs are FREE for HPA Members AND volunteers in the HiBHC database (previously the Maui Strong Mental Health volunteer list)! Please complete this [registration form](#) to be included in special offerings and future free CEs through [HiBHC](#) (Hawai'i Behavioral Health Connection)!



This event was made possible in part by Hawai'i Department of Health Grant Number 6H07SM089538 from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views, opinions or policies of SAMHSA, or the U.S. Department of Health and Human Services (HHS).

UPCOMING EVENTS, CONT.

08/08-08/10/24

HPA at APA 2024

HPA at APA! We hope to see you there!!!

Thursday 10am-10:50am

Symposium: *Building the Plane as We Flew It: Coordinating International Disaster Response to the Maui Wildfires*

Division 31 - State, Provincial and Territorial Psychological Association Affairs

Presenters: **HPA, Maui Strong Mental Health**

Response: Diane Logan, Victoria Liou-Johnson, Julie Takishima-Lacasa, Dug Lee, Bernadette Heid, Jessica Rosenfeld, Richelle Concepcion

Thursday 1pm-1:50pm

Symposium: *Implementation of Massed CBT for PTSD: Improving Outcomes for Patients and Therapists*

Division 18 - Psychologists in Public Service

Presenters: **VA Pacific Islands Health Care System**

Thursday 3pm-3:50pm

Poster: *Healthcare engagement toolkit for providers of Native American and Pacific Island Veterans*

Division 18 - Psychologists in Public Service

Critical Conversations: *Weaving Wisdoms: Decolonialism and Culture-as-Health in Clinical & Community Settings*

Division 27 - Society for Community Research and Action: Division of Community Psychology

Presenters: **Kanaka Ōiwi Doctoral Students** Joanne Qina'au, Caleb Rivera, V. Pauahi Souza

Symposium: *Global Perspectives: Contemporary Violations of Women's Rights*

Division 52 - International Psychology

Session Chair: **HPA Superstar** Nancy Sidun

Thursday 4pm-4:50pm

Symposium: *Independent Practitioners and Psychological First Aid: Maui, Miami Building Collapse, COVID & Campus: "Psychologists Supporting Survivors from the Maui Fire"*



Division 42 - Psychologists in Independent Practice

Presenter: Judi Steinman

Friday 9am-9:50am

Symposium: *Safety and Efficacy of Prescribing Psychologists in New Mexico's Underserved Communities*

Division 55 - Society for Prescribing Psychology

Presenter: Judith L. Steinman

Friday 10am-10:50am

Poster: *Psychological Features by Subtypes of Model Minority Stereotype Response*

Division 17 - Society of Counseling Psychology, Poster Session II

Presenter: **UH Hilo:** Han Na Suh

Poster: *A Latent Class Analysis Exploring Interpersonal Risk Factors for Suicide-Related Behaviors in Youth*

Division 53 - Society of Clinical Child and Adolescent Psychology, Poster Session I

Presenters: **UH Mānoa:** Caroline Acra, Holly Turner, Taylor Stacy

Poster: *A Psychometric Evaluation of PEEBS-39R:*

Parents' Planned Behaviors in Evidence-Based Services

Division 53 - Society of Clinical Child and Adolescent Psychology, Poster Session I

Presenters: **UH Mānoa:** Jinke Sun, Dorian Higashi, Brad Nakamura

Friday 11am-11:50am

Poster: *Negative Response to Model Minority stereotype and Somatic Symptoms among Asian STEM Students*

Division 45 - Society for the Psychological Study of Culture, Ethnicity and Race

Presenters: **UH Hilo:** Han Na Suh

Poster: *Moderation of Maladaptive Perfectionism between Model Minority stereotype and Depressive Symptoms*

Division 45 - Society for the Psychological Study of Culture, Ethnicity and Race

Presenters: **UH Hilo:** Han Na Suh

Poster: *A Scoping Review of Mental Health and Substance Use among Indigenous LGBTQ2S+ in US and Canada*

Division 12 - Society of Clinical Psychology

Presenters: **HPA Member:** Danielle Eakins

Friday 1pm-1:50pm

Critical Conversations: From APA-logies to Action: Dismantling Workplace & Personal Complicity in Oppressive Systems

APA Committee on Early Career Psychologists

Presenters: **CAMHD/DOH:** Stephanie Campbell

Symposium: Intensive Virtual Unified Protocol (UP) Therapy: Is Massed UP Feasible, Acceptable, and Effective?

Division 12 - Society of Clinical Psychology

Presenters: **VA Pacific Islands Health Care System**

Friday 3pm-3:50pm

Symposium: Urgent Need to Modernize Child and Family Disaster Response: "Rising from the Ashes: Response and Recovery Efforts after the Lahaina Wildfires"

Division 56 - Trauma Psychology

Presenter: Melissa Brymer

Saturday 9am-9:50am

Data Blitz: Public Perception of Farmers and Local Purchase Among Hawai'i Residents: A SEM Study
Division 09 - Society for the Psychological Study of Social Issues (SPSSI)

Presenters: **UH Mānoa:** Min Liu, Thao Le

Saturday 10am-10:50am

Poster: *Enhancing Work-Based Learning for Students with Disabilities: A School-Based Enterprise Approach*

Division 16 - School Psychology; Division 16 Poster Session III: Communities, Families, and Educators

Presenters: **DOE:** Heather Chapman

Saturday 12pm-12:50pm

Poster: *Developing an Indigenous Evaluation Toolkit for American Indian/Alaska Native Public Health Programs*

Division 45 - Society for the Psychological Study of Culture, Ethnicity and Race

Presenters: **HPA Member:** Danielle Eakins

Saturday 1pm-1:50pm

Skill Building: Finding Order Amidst Chaos: Therapy Prioritization and Progress with Families in Significant Crisis

Division 53 - Society of Clinical Child and Adolescent Psychology

Presenters: **CAMHD/DOH:** Stephanie Campbell

Saturday 4pm-4:50pm

Poster: *Comparing the Experiences of Black and African American Women Attending HBCUs and non-HBCUs*

Division 35 - Society for the Psychology of Women

Presenters: **HPU:** Veronica Acosta & Jenairia Lewis



Virtual Posters

Virtual Poster: *Racism, Interdependent Self-Construal, and Racial Group Identification among Asian/Asian American*

Division 17 - Society of Counseling Psychology
 Presenters: **UH Hilo**: Han Na Suh

Virtual Poster: *Measurement Invariance of the Engineering Interests Measure Across Gender Groups: Network Analysis*

Division 35 - Society for the Psychology of Women
 Presenters: **UH Hilo**: Han Na Suh

Virtual Poster: *Longitudinal Measurement Invariance of the Negative Outcome Expectations in Engineering Scale*

Division 45 - Society for the Psychological Study of Culture, Ethnicity and Race
 Presenters: **UH Hilo**: Han Na Suh

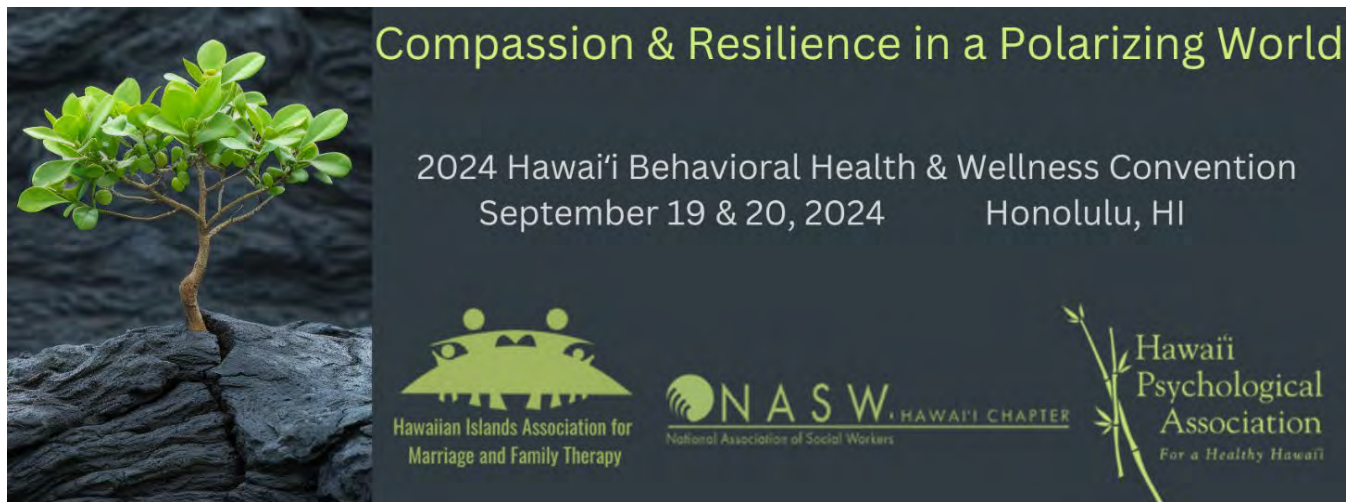
Virtual Poster: *Development and Initial Validation of the Third Culture Experience Scale*

Division 52 - International Psychology
 Presenters: **UH Hilo**: Han Na Suh

Virtual Poster: *Contrapuntal Framework of Accessing Mental Health Services Among Pacific Islanders in the US*

Division 45 - Society for the Psychological Study of Culture, Ethnicity and Race

09/19-09/20/24 Hawai'i Behavioral Health and Wellness Convention Honolulu, HI



We have a star-studded line up of presentations and workshops for you this year!

Save the dates and book your rooms at/near the **Ala Moana Hotel**.

Registration opening soon!

ONGOING GROUPS AND CEs

HPA Grand Rounds

FIRST Mondays 12-1pm

hpaexec@gmail.com

The **HPA Grand Rounds** series includes a monthly formal presentation by an expert on a topic relevant to psychologists. Please reach out anytime with suggestions or clinical needs for future presentations. 1 hour APA-Approved CE is available, free for HPA Members.



Clinical Case Consultation (C³)

THIRD Mondays 12-1pm

hpaexec@gmail.com



The **Clinical Case Consultation Series** is designed to allow clinicians to discuss and better understand complex cases with guidance from peers and experts. Unlike webinars, this live online consultation program is fully interactive. The series has alternated between semi-structured consultant-led programs and less structured peer-led discussions of challenging or interesting cases. 1 hour APA-Approved CE is available, free for HPA Members.

Rural Health Committee

LAST Wednesdays 5:30-6:30pm

amithea.love@gmail.com

The **Rural Health Committee** has begun monthly meetings on the LAST Wednesday of each month (resuming in September) from **5:30pm-6:30pm** on Zoom. This committee strives to identify the unique needs of our rural communities and providers, provide education and consultation to members and the public about rural communities and their concerns, and advance solutions that will enhance the quality of mental health care for those living in rural areas. *Co-Chairs Amithea Love and Marina Matsui*



Virtual Peer Professional Group

ALL Mondays 5:30-6:30pm

drroseevelyn@gmail.com



A collective of trainees and clinicians passionate about establishing a virtual supportive peer community have formed the **Aloha Mental Health Providers Hui!** Clinicians from any stage of training and early career are welcome ~ we all would benefit from the connection! Regular meeting times are currently on **Mondays from 5:30-6:30pm HST**.

This accessible, non-hierarchical space focuses on navigating training, self-care for work-life balance, obtaining licensure, career development, or anything else that would support our professional growth! Case consultation and brief presentations are also welcome!

Please [SUBSCRIBE](#) and we will send you the link. *In solidarity, Rose Evelyn Friedheim & Timothy Hand*

Brain Injury Oahu Support Group (BIOSG) LAST Saturdays 10am-12pm braininjuryofhawaii@gmail.com

Support group title: Brain Injury Oahu Support Group (BIOSG)

Format: In-person on Oahu

Dates: The last Saturday of each month

Times: 10:00 am – 12:00 noon HST

Location: Catholic Charities Clarence TC Ching Campus,

1822 Keeaumoku Street, Room 3, Honolulu, HI

Additional information: Call or text BJ Wade at 808-221-8330.

Facebook: <https://www.facebook.com/BrainInjuryAssociationOfHawaii/>

Email: braininjuryofhawaii@gmail.com

Web: <https://www.biausa.org/find-bia/hawaii>



HPA MEMBER AWARDS, ACCOMPLISHMENTS, AND ACTIVITIES

HPA Member Awards and Accomplishments

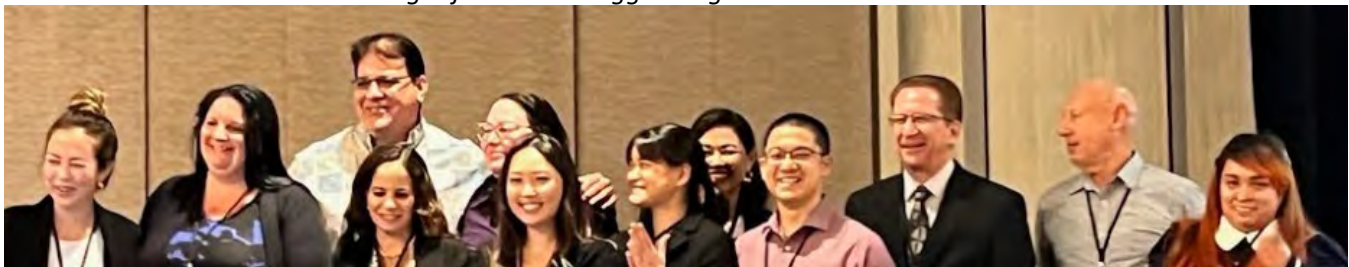
Hawai'i Psychological Association

HPA received the Div 31 **Outstanding SPTA Award** at the annual Practice & State Leadership Conference. This award honors a psychological association that provides a model for other associations to emulate, by achievements and outstanding accomplishments.

Sponsor: [Division 31](#)



We might just need a bigger stage...



Julie Takishima-Lacasa, Ph.D.

Dr. Julie Takishima-Lacasa was awarded the **Committee of State Leaders PSLC Excellence in EDI Award**, recognizing her years of advocacy advancing specific EDI issues and initiatives within APA governance.

**Nancy Sidun, PsyD, ABPP, ATR**

Dr. Nancy Sidun was selected by the American Psychological Association (APA) Board for the Advancement of Psychology in the Public Interest as the recipient of the **2024 APA Award for Distinguished Contributions to Psychology in the Public Interest- Senior Career**. This award recognizes people who have advanced

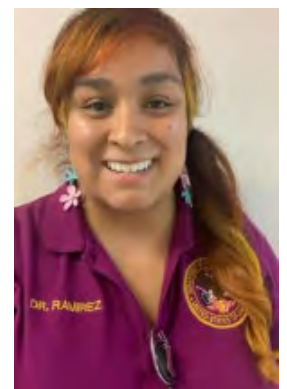
psychology as a science and/or profession by a single extraordinary achievement or a lifetime of outstanding contributions in the public interest.



PUBLIC INTEREST DIRECTORATE
Board for the Advancement of Psychology in the Public Interest

Roxanne Ramirez, Psy.D.

Dr. Roxanne Ramirez (she/her/ella) has been appointed **Chair of the I*DEA Committee at the VA Pacific Islands Health Care System (VAPIHCS)**. Previously, VAPIHCS had a committee dedicated to addressing diversity, equity, and inclusion, called the Diversity, Equity, and Inclusion (DE&I) Committee. However, the VA has made some national-level changes and renamed the committees to Inclusion, Diversity, Equity, and Access (I*DEA), which now falls under the [Office of Resolution Management, Diversity, and Inclusion \(ORMDI\) Department](#). At the local level, changes include the appointment of Paul Renigar as the first full-time Diversity, Equity, and Inclusion Program manager at VAPIHCS, as well as the appointment of Dr. Ramirez as the new Chair of the I*DEA Committee. Dr. Ramirez is a Clinical Psychologist for the VAPIHCS inpatient psychiatric unit located within Tripler Army Medical Center.



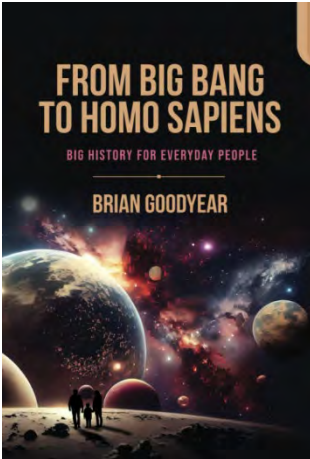
Roxanne Ramirez, Psy.D.



Dr. Roxanne Ramirez and her colleague Dr. Stephanie Houk presented a poster in May at the VA Psychology Leadership conference on “Enhancing Well-being in LGBTQIA+ and Female Patients with SMI in VA Settings.”

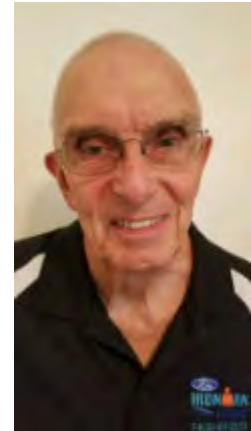


Brian Goodyear, Ph.D.



Dr. Brian Goodyear has published a book entitled **From Big Bang to Homo Sapiens: Big History for Everyday People**. It is not psychology but it may be of interest to some of our members. It is available on Amazon as an ebook or in print via [this link](#).

From Big Bang to Homo sapiens: Big History for Everyday People takes readers on a fascinating and sometimes mind-boggling journey down a long evolutionary road that leads from the beginning of our universe to the population of planet Earth by modern humans. It is an introduction to “Big History” – the telling of comprehensive stories about the history and evolution of our universe and our planet -- for ordinary folks with no scientific expertise.



HPA Member Publications

Brian Goodyear, Ph.D.

New Publications

bsgoodyear@aol.com

Goodyear, B. (2023) Mandatory Mental Capacity Evaluations for Patients Requesting Medical Aid in Dying: Are They Necessary? *Journal of Forensic Psychology, 9*, 318.

ABSTRACT: Medical aid in dying is now legally authorized in 11 jurisdictions within the United States of America. The State of Hawaii is the only jurisdiction in which mental capacity evaluations are mandatory for all patients who request medical aid in dying. Previous research and the results of the author’s evaluations of 161 patients who requested medical aid in dying in the State of Hawaii between January 2019 and December 2023 support the conclusion that mental capacity evaluations should not be legally mandated for all patients who request medical aid in dying.



ISSN: 2475-319X
Journal of Forensic Psychology

Diane Logan, Ph.D., ABAP, CSAC

New Publications

dr.dlogan@gmail.com

Logan, D.E. (2024). Building the Plane as We Fly It: A Psychologist Responds to the Maui Wildfires. *On Board with Professional Psychology, Issue 2*.

ABSTRACT: In August 2023, the Hawaiian Island of Maui experienced the deadliest U.S. wildfire in over a century, devastating the entire Lahaina community. The psychological trauma experienced by Lahaina and Maui residents was overwhelming. In the wake of this disaster, the Hawai’i Governor’s Office reached out to the Hawai’i Psychological Association (HPA) for assistance. As the current Past-President of HPA (and someone who has an unhealthy attachment to and adoration of spreadsheets and Google forms), I immediately took responsibility for organizing the HPA response. Amid chaos, we implemented a coordinated plan that involved local, national, and international behavioral health community resources.

ON BOARD
with Professional Psychology



Victoria Liou-Johnson Ph.D.**New Publications****dr.lioujohnson@gmail.com**

Liou-Johnson, V., Narayan, A., Odama, U., & Shah, N.R. (2024). A Person-Centered Approach to Kidney Care, *NEJM Catalyst*, 5(1), CAT.23.0376. <https://doi.org/10.1056/CAT.23.0376>.

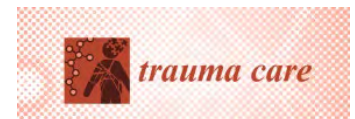
ABSTRACT Person-centered care has been advanced as an effective framework for improving patient satisfaction. By considering biopsychosocial factors — including socioeconomic status, environment, intellectual development, health, cultural factors, and social interactions — such care can help optimize treatment outcomes, advance health equity, and decrease costs. However, these factors, adopted by the medical field and labeled social determinants of health, have been inconsistently evaluated, thereby missing an opportunity to truly understand the individual needing care.

Furthermore, a balance of specific social determinants of health factors and assessments of cognition and functional status can improve understanding of a patient and their context. The authors explore new possibilities with a shift in assessment methodologies, using end-stage renal disease as a model, and present a vision for a more effective person-centered assessment model, which is increasingly possible — and needed — in the modern health care environment. A surprising finding from the qualitative interviews was the importance of social connections formed during in-center dialysis. Additional key considerations include financial barriers, transportation challenges due to financial and mobility limitation, housing insecurity, insufficient knowledge of kidney disease and treatment, and limited contact with nephrologists. This article proposes potential methods for improvement of care that can simultaneously improve patient engagement and outcomes.

**Victoria Liou-Johnson Ph.D.****New Publications****dr.lioujohnson@gmail.com**

Vasic, S., Xia, B., Dini, M.E., Klyce, D.W., Tyler, C.M., Juengst, S.B., **Liou-Johnson, V.,** Gary, K.W., Dams-O'Connor, K., Kumar, R.G.,...Perrin, P.B. (2024). Community Participation Trajectories over the 5 Years after Traumatic Brain Injury in Older Veterans: A U.S. Veterans Affairs Model Systems Study. *Trauma Care*.

ABSTRACT: Background: Given the aging of the overall U.S. population, the resulting changes in healthcare needs especially among veterans, and the high prevalence of traumatic brain injury (TBI) among older adults, additional research is needed on community participation after TBI in older veterans. The current study examined predictors of community participation trajectories over the 5 years after TBI in veterans who were 55 years of age or older upon injury. **Method:** This study included data from 185 participants in the U.S. Department of Veterans Affairs TBI Model System national study who had sustained a TBI at age 55 or older and had completed at least one of each Participation Assessment with Recombined Tools-Objective (PART-O) subscale scores at one or more follow-up time points (1, 2, and 5 years post-TBI). **Results:** PART-O Productivity, Social, and Out and About scores remained constant over time. Lower PART-O Productivity trajectories were seen among participants who were unemployed at the time of injury ($p = 0.023$). Lower PART-O Social trajectories were seen among participants who had a lower education level ($p = 0.021$), were unmarried at injury ($p < 0.001$), and had private insurance coverage ($p < 0.033$). **Conclusion:** These findings add to the growing body of literature on TBI and community participation by focusing on an older adult veteran population. There is an urgency to understand the needs of this group, many of whom are aging with service-connected disabilities including TBI. Veterans with characteristics identified herein as being associated with lower community participation trajectories would be prime candidates for interventions that aim to increase community and social engagement after later-life TBI.

**Victoria Liou-Johnson Ph.D.****New Publications****dr.lioujohnson@gmail.com**

Kennedy, E., Liebel, S.W., Lindsey, H.M., Vadlamani, S., Lei, P., Adamson, M.M.,...**Liou-Johnson, V.,**... Dennis, E.L. (2024) Verbal Learning and Memory Deficits Across Neurological and Neuropsychiatric Disorders: Insights from an ENIGMA Mega Analysis. *Brain Sciences*, 14(7),669. <https://doi.org/10.3390/brainsci14070669>.

ABSTRACT: Deficits in memory performance have been linked to a wide range of neurological and neuropsychiatric conditions. While many studies have assessed the memory impacts of individual conditions, this study considers a broader perspective by evaluating how memory recall is differentially associated with nine common neuropsychiatric conditions using data drawn from 55 international studies, aggregating 15,883 unique participants aged 15–90. The effects of dementia, mild cognitive impairment, Parkinson's disease, traumatic brain injury, stroke, depression, attention-deficit/hyperactivity disorder (ADHD), schizophrenia, and bipolar disorder on immediate, short-, and long-delay verbal learning and memory (VLM) scores were estimated relative to matched healthy individuals. Random forest models identified age, years of education, and site as



important VLM covariates. A Bayesian harmonization approach was used to isolate and remove site effects. Regression estimated the adjusted association of each clinical group with VLM scores. Memory deficits were strongly associated with dementia and schizophrenia ($p < 0.001$), while neither depression nor ADHD showed consistent associations with VLM scores ($p > 0.05$). Differences associated with clinical conditions were larger for longer delayed recall duration items. By comparing VLM across clinical conditions, this study provides a foundation for enhanced diagnostic precision and offers new insights into disease management of comorbid disorders.

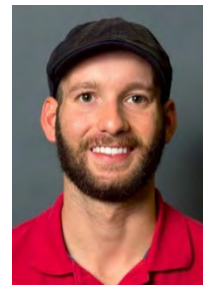
HPA Member Column

Hawai'i's Mental Health Provider Shortage Alexander Khaddouma, PhD, ABPP akhaddou@hawaii.edu **Mapping Hawai'i's Mental Health Provider Shortage and Population-Level Health**

By Alexander Khaddouma, PhD, ABPP

They say that a picture is worth a thousand words, but even more so, a thousand numbers. While Hawai'i's current [shortage](#) of qualified [medical](#) and [mental health](#) care providers is [well-documented](#), readers may be interested in contextualizing the situation by seeing how we compare to other regions in the United States. Visualizing how Hawai'i compares to other states provides a nuanced picture of how this shortage is impacting our population-level health, and highlights some interesting trends. For example, compared to other U.S. states, while Hawai'i residents have the [longest life expectancy](#) at birth, we also have the [highest prevalence of untreated adults](#) with mental illness.

Check out these useful tools to see how our provider workforce and population-level health compare to the rest of the nation:



- **[Stats of the States](#)**: An interactive map by the Center for Disease Control (CDC) that compares statistics on births, mortality, and other key health indicators among U.S. states.
- **[Access to Care Rankings](#)**: An interesting set of interactive maps demonstrating how unmet mental healthcare needs compare across U.S. states. Provided by Mental Health America, the Access Rankings indicate how much access to mental health care exists within a state, including access to insurance and treatment, quality and cost of insurance, access to special education, and workforce availability. A high Access Ranking (1-13) indicates that a state provides relatively more access to insurance and mental health treatment than others in the nation.
- **[Behavioral Health Workforce Tracker](#)**: An interactive map that allows you to visualize the geographic distribution of the behavioral health workforce by provider type and Medicaid acceptance status. Based out of George Washington University, the national database includes prescribers of behavioral health medications (psychiatrists, addiction medicine specialists, primary care physicians, advanced practice providers, and other physicians), psychologists, licensed clinical social workers, licensed professional counselors, and licensed marriage and family therapists.
- **[Health Professional Shortage Areas](#)** (HPSA): The US Health Resources and Services Administration provides a variety of tools for visualizing and plotting medical, dental, and mental health provider shortage areas. Their [Map Gallery](#) provides pre-formatted, up-to-date comparisons of some of the most common statistics, while their interactive [Map Tool](#) allows users to plot and compare factors of interest.
- **[Rural Data Explorer Map](#)**: The Federal Office of Rural Health Policy provides a helpful library of static and interactive [Rural Data Visualizations](#) that explore issues of rural health and access to care. Users can utilize their interactive map, or download state-specific [maps](#) and [charts](#) on relevant medical, mental health, and accessibility topics.

- Psychologist Workforce:** The American Psychological Association’s [Center for Workforce Studies](#) provides a variety of interactive tools for visualizing the psychologist workforce across states. Of particular interest to readers are their maps depicting the [geographic distribution](#) of licensed psychologists, and their state-level psychologist [workforce projections](#).
- Specialist Workforce:** The American Psychological Association’s publication, *Monitor on Psychology*, recently published a [2024 visual datapoint](#) comparing the prevalence of board-certified specialist psychologists across states. Note that this was an update to a previous [2017 datapoint](#) on the same topic. These datapoints highlight that while Hawai’i experiences a shortage of generalist providers, we are particularly lacking in board-certified specialists.
- Native Hawaiian/Pacific Islander Health:** Given the diversity of the patient population in Hawai’i, readers may be particularly interested in two recent datapoints in the *Monitor on Psychology*: In 2022, it was [reported](#) that Native Hawaiian/Pacific Islander populations had the *largest* number of patients seeking care per month and *largest* number of people on a waitlist compared to almost any other patient population. This followed a 2021 [report](#) that psychologists’ caseloads and cultural responsiveness ratings were *lowest* for Native Hawaiians/Pacific Islanders compared to any other racial/ethnic group. **These datapoints highlight that while Hawai’i experiences a significant provider shortage, we are in particular need of providers who are competent and knowledgeable in working with Native Hawaiian/Pacific Islander populations.**

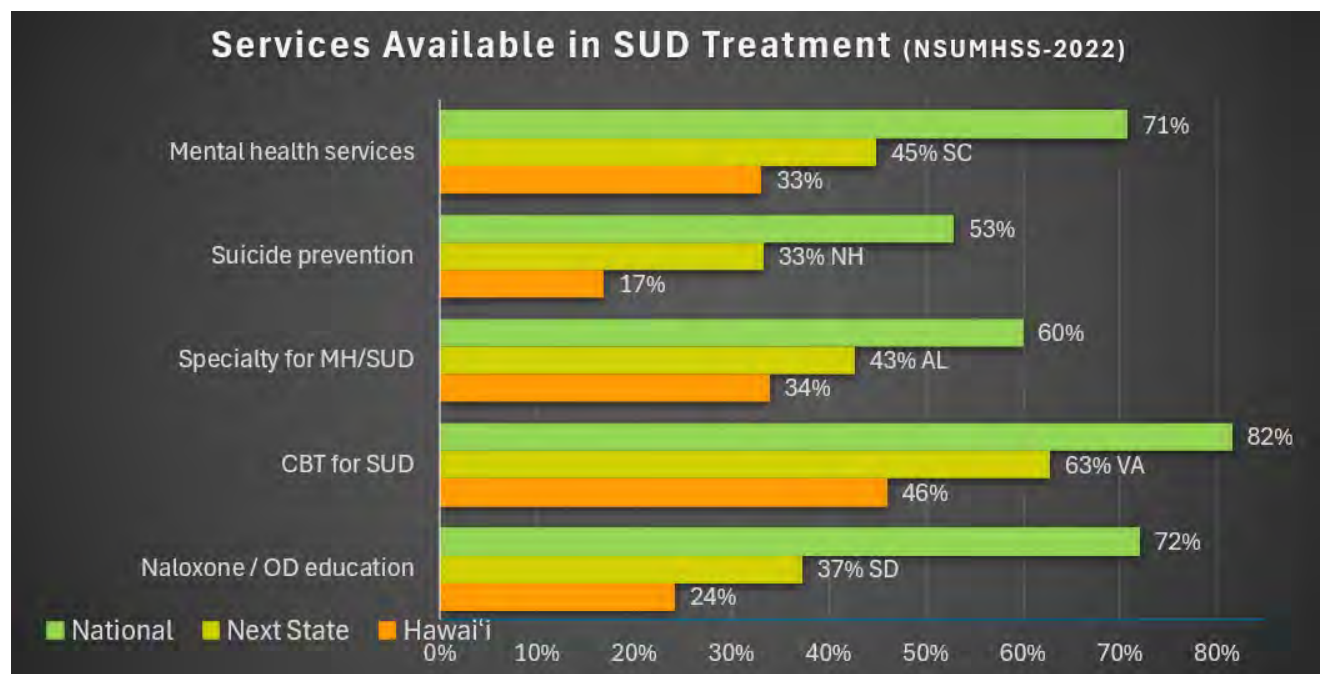
HPA Member Column

SUD Treatment in Hawai’i

Diane Logan, PhD, ABAP, CSAC

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As many of you know, I could talk about access to care and destigmatizing substance use and other mental health conditions for *days*, but in case you weren’t already concerned enough from the links provided in Dr. Khaddouma’s excellent article above, here’s another picture. These are self-reported data via SAMHSA’s Annual National Substance Use and Mental Health Services Survey ([N-SUMHSS](#)) which asks all SUD treatment facilities which services they have available. Note the green bars (National averages), the orange bars (Hawai’i is dead last each time), and in between the yellow bars (the next lowest state, aka second to last place). **We have to do better.**



In Memoriam

Stanley Sue, Ph.D. (1944-2024)

Stanley Sue, age 80, passed away on June 6, 2024, from unexpected complications that occurred during open-heart surgery. Stan was born February 13, 1944 in Portland, Oregon to Tom and Lucy Sue. He has resided in Walnut Creek, California for the past 14 years, Stan is survived by his loving wife, Sophia; four siblings (David, Derald, Lynda and Leslie Sue); and numerous nieces and nephews.

In 1969, Stan married Sophia, the love of his life. Stan and Sophia recently celebrated 55 years of marriage. Stan frequently mentioned how much he loved his wife, and that his retirement had brought them even closer together. Sophia and other family members were at his bedside when he passed.



Stan was a Distinguished Professor of Psychology at University of California, Davis (1996–2010) and at Palo Alto University. Prior to those positions, he was Professor of Psychology at University of California, Los Angeles (1981–1996) and Assistant and Associate Professor of Psychology at the University of Washington (1971–1981). Stan served as President of the Western Psychological Association in 2010; President of Division 45 (Society for the Psychological Study of Culture, Ethnicity, and Race) of the American Psychological Association in 2015; and Science Editor for the U.S. Surgeon General’s 2001 supplementary report for Mental Health: Culture, Race, and Ethnicity.

These positions, however, do not capture the monumental impact Stan had on the profession of psychology and on his students and colleagues. Stan was a trailblazer in the field of ethnic minority psychology, and his research and contributions now form the knowledge base of Asian American psychology and mental health, racial/ethnic relations, and cultural competence in clinical work. His accomplishments were both ground-breaking and influential. His authoritative publication in the *American Psychologist*, “Science, Ethnicity and Bias: Where Have We Gone Wrong,” is one of the most highly cited publications in the professional literature. Stan was particularly proud of this publication because it challenged the universality of Western science and revealed the importance of experiential reality in the lives of People of Color. He worked tirelessly to expand psychological services to underserved populations, and became known as a powerful advocate for social justice.

Stan’s teaching excellence and mentoring of students were legendary, and were acknowledged with multiple awards and recognitions. More important were the number of students and younger colleagues whose lives he touched. Many attribute their own career paths and work on social justice to Stan’s influence. He was a celebrated elder in his field, and, even after his retirement, he continued to be connected to and serve his professional community.

Stan’s passing came too soon and will leave a big hole in the lives of his family, friends, and colleagues. Although it was Stan’s heart that gave out in the end, Stan’s kindness and his loving and vibrant presence touched his family and his professional community in ways that will not be forgotten. What Stan stood for will continue to inspire others.

A private memorial service will be held later this year. You are invited to share a memory of Stan at the website of the [Sneider & Sullivan & O’Connell’s Funeral Home](#).

QUARTERLY BOARD MEMBER AND COMMITTEE CHAIR UPDATES

LAC Update, by Alex Lichton, Ph.D.

LAC Update

Alex Lichton, Ph.D.

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We are happy to report that **Governor Green signed HB 1830 into law**. The bill gives the Department of Commerce and Consumer Affairs two years to implement **provisional or "associate" licenses for post-degree trainees in psychology**, marriage and family counseling, social work and counseling who are in the process of completing supervised training needed for full-licensure. This means that **post-doctoral psychology trainees will be eligible for insurance reimbursement**, thus increasing training opportunities and retaining more local graduates to provide much needed services in Hawaii. **Post-docs will be able to take the licensing exam earlier, at the beginning of the post-doctoral year**, if they want. HB 1830 was rescheduled in conference committee twice but finally passed just in time for the deadline. Three years of LAC effort finally paid off! Altogether, the LAC testified on 15 bills this session.

Other highlights: **SB 1035 was enacted which exempts primary care physicians from the general excise tax when treating Medicaid and Medicare patients**. The law sunsets in 2026 so **we plan to continue efforts to include psychologists**. **Bills that passed with our support include: HB 2159 which streamlines the assertive community treatment process** through the involvement of the attorney general's office to prepare petitions for involuntary treatment, in order to balance the need for treatment versus civil liberties. **SB 3139 will expand crisis diversion services within the state's Adult Mental Health Division**. **SB 3141 requires comprehensive data collection on civil and criminal court commitments by the Department of Health** in order to enhance resource planning for the severely mentally ill in need of services.

The low point of the session was when **SB 760, a prescription privileges neighbor island pilot, was not heard by the Senate Consumer Protection Committee**. The bill had been amended to exclude medicines with black box label warnings, which is virtually everything, as advanced nationally by the American Medical Association. Also, we tried to double the fees for court ordered fitness to proceed and sanity evaluations by offering amendments to judiciary bills, which were not adopted. SB 2805 would have funded a multiethnic cohort study of the health effects of the Maui Wildfires, but did not pass out of Conference Committee.

Looking forward to **next year, we will be seeking to make insurance reimbursement for telephone mental health sessions permanent, as the current law sunsets at the end of 2025**. We will continue our efforts to ensure that any licensing of school psychologists is supervised outside of the Board of Psychology. Please consider joining the LAC and donating to the HPA Political Action Committee. Your continued support is vital! Thank you for your individual testimonies and Voter Voice notifications to legislators.

I am so grateful to our LAC Members. **Thank you to Becky Gardner (lobbyist), Matt Finelli (Coordinator), Judi Steinman (RxP Subcommittee Chair), Meg Blattner, Ray Folen, Chuck Lepkowsky, Isaiah Moreno, Charlotte Savage, Sean Scanlan, Nancy Sidun, Jeff Stern, Lauren Ampolos, Katherine Aumer, Roxanne Ramirez, Layla Kratovic and the Rx Subcommittee: Sam Dutton, Bracken Gott, Teresa Juarez, Nathan Hale, Marshall Shroeder, Phillip Hughes and Jo Velasquez.**

Alex Lichton, Ph.D., HPA Legislative Action Committee Chair

BoP&I Committee, by Janalle Kaloi-Chen, Psy.D.

LAC Award and Update

Janalle Kaloi-Chen, Psy.D.

dr.kaloichen@gmail.com

The Business of Practice & Insurance Committee has been revived to help our members stay abreast with the numerous recent changes in billing, insurance, and practice-related matters. This committee strives to address challenges related to practicing in compliance with new laws/guidance as well as establish relationships with insurance companies to help ensure our viability as practitioners and business owners. Come join the collective of providers, medical billers and administrators.

Secretary's Commentary, by Lianne Philhower, PsyD, MPH, C-DBT

Secretary's Commentary

Lianne Philhower, PsyD, MPH, C-DBT

lphilhower.psyd@gmail.com

It is an honor and a privilege to serve as Secretary for the Hawaii Psychological Association this past year and a half. I am so impressed by the efforts of our membership to make a significant positive impact on the mental health of people in Hawaii. I am equally heart-warmed by the support and compassion members have shown each other during some of the significant tragedies that occurred in the latter part of last year with the Maui fires that started on August 8th and the horrific attack of the Jewish people on October 7th. Since then, it seems, many of our lives have been disrupted and our priorities reevaluated. When the ground falls from beneath our feet and we look to our communities for support, it is then we find out if our community is a true collective or if it is a community by name only.

HPA is a community of mental health professionals interested in enhancing the quality of life for the people of Hawaii. Our unique knowledge, training, and expertise addresses human distress, improves adaptation, and supports moving towards self-actualization to live meaningful and healthy lives. We are especially aware and responsive to the many cultures that exist here in Hawaii. Like most places in the world, we too have a history filled with tragedy and triumphs. The importance of these histories intensifies and fades with our attention, awareness, and the meanings we give to them. Only when we become mindful of how our attention, awareness, and meaning-making are influenced, can we see the limits of our ability to know what is true. If we identify too much with what we think, words can begin to feel very personal. However, we are not our thoughts, we have them. Some of them are supported and accurate. Some thoughts are old, some new, some helpful, and some

not so helpful. Thoughts are thoughts, not truths. There is a difference.

We are also a community still learning how to share and receive the ideas we have with each other. While it is important to be sensitive to, but not responsible for, the many ways our words may be interpreted by each other, we must also find the courage to stand up and voice our thoughts without fear of being persecuted for them. Cognitive distortions get in the way of knowing anything with accuracy. From labeling and mindreading to fortune telling and confirmation bias, it is no wonder we are having problems communicating and understanding each other.

Psychology has so much to offer and yet I've seen our knowledge go unapplied in crucial situations when passions run high and our personal physical and mental resources are close to exhaustion. At that point, it seems we are no longer interested in deepening our understanding and improving the well-being of ourselves and others.

In an attempt to share some examples of when our knowledge went unapplied, resulting in painful interactions, I found myself writing, re-writing, scrapping version after version of this commentary, until I recognized this was not a good place or time. I decided to shift the focus, despite having an intention to build a stronger community in the spirit of reflection and examination of our values and skills. There have been too many times I have witnessed someone's view, my own included, interpreted as "offensive" or



“divisive”. These are subjective interpretations. What is “uniting” to one, is “divisive” to another. It is common today to have to hold those deeper thoughts for a different place, time, and community.

So instead, I now move to the lighter side of life. I intentionally shift the focus of this commentary to the more benign topic of the human experience of house training and psychology. I would like to introduce you all to the new members of the “Philhower Pack”: Sadie and Sarge.



Sadie and Sarge (PKA: Luna & Sunny), were rescues from [Poi Dogs and Popoki](#), a volunteer-run, foster based animal rescue organization here in Hawaii. The adoption process is thorough. We applied to adopt Sadie and Sarge after having a conversation about our ability to properly house train two puppies. Luckily, the summer season and the age of our current dogs made it likely that the training would go well. Training two puppies simultaneously can be a rewarding and challenging endeavor; having a pack who knows the routine can also help a great deal.

Our original pack (picture from left to right: Sierra, 12-year-old, brindle, plot hound; Sheba, 9-year-old, blue/white, Staffordshire terrier; and Summit, 10-year-old, fawn, ridgeback/terrier mix), was ready for the challenge.

Successfully house-training puppies requires patience, consistency, and an understanding of canine psychology, all of which are deeply rooted in the principles of love and behavioral science. House training puppies is more than just teaching them where to eliminate; it involves building a bond of trust and understanding between owner and the pack. Love plays a crucial role in this process, as a nurturing environment fosters positive behaviors. Puppies, like human infants, rely on their caregivers for guidance and reassurance. Luckily there were plenty of caregivers in the Philhower family.



When training puppies, it is essential to maintain a positive and loving approach. Punitive measures can lead to fear and anxiety, which can hinder the training process and damage the bond between the owner and the pack. Unfortunately, the loving approach requires patience and time, which my lemon grass and citronella plants were not able to endure.

Sarge found my lemon grass to be a great place to relax and soothe (chew) as his adult teeth grew in. Glenn (my husband) and I agreed it was better than sacrificing our furniture.



Positive reinforcement, such as treats, praise, and affection, encourages desirable behaviors and strengthens the bond of trust. Understanding the psychological principles behind house training can enhance the effectiveness of the process. Skinner’s operant conditioning is fundamental in training animals. Reinforcing desired behaviors with rewards, discouraging unwanted behaviors by ignoring them or using gentle corrections, shaping, and the Premack Principle worked for all of our fur babies.

A consistent routine is key. The pack goes out to the yard first thing in the morning. They eat, play, and then rest (and repeat in the afternoon). The older ones help the younger ones with the routine and the expected behaviors.



We adopted Sadie and Sarge in the middle of May this year; and in a couple of weeks, they successfully joined the pack. House training Sadie and Sarge has been a pleasurable experience of blending love, psychological insight, and practical strategies. While the task may be called “house training” it really isn’t just about teaching puppies where to eliminate; it’s about building a foundation of trust and mutual understanding.

This journey, grounded in love and patience, ultimately leads to well-adjusted and happy dogs, making the effort worthwhile.



We are so proud of our new pack.

With appreciation for all members of HPA,

Lianne Philhower, PsyD, MPH, C-DBT

Secretary, Hawaii Psychological Association



Hawai'i Island Representative Update, by Rose Evelyn Friedheim, Psy.D.

Hawai'i Island Representative Update

Rose Evelyn Friedheim, Psy.D

drroseevelyn@gmail.com

Happy Summer! I am writing as your Hawai'i Psychological Association, Hawai'i Island Representative. On behalf of HPA, I have been committed to responding to the unique needs of Hawai'i Island's patients, providers, and those across our state. I will share here some things about the Hawaii Island HPA community connections from the recent past and opportunities to look forward to. I have enjoyed sharing opportunities to connect with.



In-person gatherings on Hawai'i Island:

Mālama 'Ohana Community Meetings. The Mālama 'Ohana Working Group (MOWG) is hosting listening sessions throughout the state to lift up keiki and 'ohana voices in order to improve and transform the child welfare system. MOWG recognizes that listening to, learning from, and collaborating with community and life experts is critical to effectively supporting and caring for our most cherished families and children. Members gathered at the Kona Mālama 'Ohana Community Meeting, to discuss the welfare of our keiki, on Tuesday, June 18 from 5:30 - 8:00 PM at Lili'uokalani Trust - Kīpuka Kona, 74-5490 Makala Blvd, Kailua-Kona, HI 96740.

Hawai'i Island Psychological Association Psychology Club. Dr. Roger Weiss and Psychology Intern Amylia-Rae Gandolf have founded an in-person Psychology Club. The group's purpose is to support undergraduates, gap year students, and graduates in exploring careers and interests relevant to psychology. Prospective club members, please email hawaiiislandpsych@gmail.com with further inquiries.

Kona Brain Injury Support Group: 30th Anniversary Celebration! Members joined me on Wednesday, May 22, 2024 from 11 am – 1pm. We enjoyed live music, lunch and refreshments 😊 It was a great opportunity to support the TBI community and network with other mental health providers. For information: Karen Klemme can be contacted via text 808-896-2962

Interactive 6 CE workshop on Hawai'i Island: How neuroscience and emerging technologies will (or will not) transform policy, law, and professional practice. On February 24th in Waimea Hawai'i Island Psychological Association (HIPA) offered a 6 CE Live Interactive Workshop presented by Dr. Kinscherff. Robert Kinscherff, Ph.D., JD, a clinical/forensic psychologist and attorney with extensive experience in public policy, advocacy, and applied neuroscience. The program reviewed the complex history of brain sciences and clinical behavioral health practice; recent advances in neuroscience; and the influences upon public policy, law, and clinical practice in behavioral health. Specific attention was paid to the impact of neuroscience on emerging innovations in clinical assessment and psychotherapies with implications for clinical training and professional practice.

In-person gathering on Oahu:

2024 Hawai'i Behavioral Health and Wellness Convention: Compassion and Resilience in Polarizing Times. The conference will be held on September 19-20th, both in-person in Honolulu and virtually. HPA has sent an announcement to call for presentations, and I encourage you to submit a proposal! It would be a great opportunity for Hawaii Island providers to share their unique clinical expertise!

Virtual gatherings:

Aloha Mental Health Practitioners Hui: Every Monday from 5:30-6:30 p.m., I host the *Aloha Mental Health Practitioners Hui*. This is a weekly, virtual peer-to-peer professional support group that I created to increase connection and empower one another as professionals to care for ourselves in the context of our clinical work, training, and professional development. I do hope you will join us. Feel free to invite your colleagues and trainees to join so we can connect, discuss updates, and share information regarding resources for mental health on Hawai'i Island. Please email me, and I will add you to the list.

Mālama 'Ohana Community Meetings: The Mālama 'Ohana Working Group (MOWG) is hosting listening sessions throughout the state to lift up keiki and 'ohana voices in order to improve and transform the child welfare system. MOWG recognizes that listening to, learning from, and collaborating with community and life experts is critical to effectively supporting and caring for our most cherished families and children. Mahalo for your interest in participating virtually for the Mālama 'Ohana Community A virtual gathering to discuss the welfare of our keiki, was held on **Tuesday, July 2nd from 5:00 - 8:00.**

HIPA Interactive Zoom Meeting: Ethics & Public Statements, Sexual Abuse support- HIPA membership On Wednesday, June 12, 6:30 - 7:30 PM, Dr. Reneau Kennedy, forensic psychologist and VP of HIPA facilitated a presentation and interactive discussion for HIPA members. Dr. Reneau Kennedy is a forensic, clinical and neuropsychologist specializing with questions of law. Dr. Kennedy has Harvard post doc forensic training and has served as Forensic Chief & MH Branch Administrator for the State of Hawai'i. She is an Expert in court-related matters, and Guest Lecturer internationally. HIPA members are able to consult with Dr. Kennedy as HIPA's Ethics Chair for further support.



Rural Health Committee: The Rural Health Committee focuses on identifying the unique needs of our rural communities and providers and advancing solutions that will enhance the quality of mental health care for those living and serving in rural areas. It is a great opportunity to join, build community, and share resources across providers. While the HPA board encourages those in the Rural Health Committee to be an HPA member, we would love to hear voices from various stakeholders so we can offer "honorary" partners if you know of other Hawai'i Island providers who would also like to join. Marina Matsui is the point contact person, so please email her at matsuimm@hawaii.edu if you or a colleague are interested. I hope you will join, as we look forward to collaborating with you to address Rural Health needs!

I look forward to staying connected. Please reach out with any ideas of how I can best be of service.

With Aloha,

Rose Evelyn Friedheim, Psy.D.
Pre-Licensed Clinical Psychologist

HPA Rural Health Committee (RHC), by Marina Matsui and Amithea Love, Psy.D.

HPA Rural Health Committee Update **Marina M. Matsui & Amithea Love, Psy.D.**

The RHC has four broad goals to serve the needs of our rural health practitioners and communities

1. Identifying the unique needs of our rural communities and providers
2. Reviewing publications and other material related to rural mental health advocacy to stay current with relevant topics
3. Advancing solutions that will enhance the quality of mental health care for those living and serving those in rural areas
4. Submitting newsletter articles to update members on the ongoing efforts of the Rural Health Committee



Our committee has been working on creating a resource library for rural health practitioners. Although specifics on what is included is forthcoming, some potential areas that the google sheet library of resources will cover include Professional Development, Ethics in Rural Mental Health, Rural Telehealth Resources, Publications, and Rural Health Happenings.

How you can help with RHC endeavors:

1. Join our committee!

We are taking a break for the summer, but will resume meeting on the last Wednesday of the month (i.e., 9/25) from 5:30 - 6:30 pm on [Zoom](#). For those interested in joining, please feel free to backchannel email co-chairs Marina Matsui (matsuimm@hawaii.edu) and Dr. Amithea Love (amithea.love@gmail.com). I have also included the recurring Zoom link for our monthly meetings if you are interested! We would love to have you!

2. Share resources!

We hope to leverage your expertise and knowledge in rural mental health practice. Please email me (matsuimm@hawaii.edu) and Dr. Love (amithea.love@gmail.com) with any rural mental health resources geared towards practitioners to include in our forthcoming rural health library of resources (e.g., links to reimbursement guides for practitioners, publications on ethics surrounding rural mental health practice). Thank you in advance, and I look forward to learning from you!

We continue to be so grateful to RHC members who have been able to attend our monthly meetings. We truly value your time, input, and service to serving our rural health communities.

Warmly,

Co-chairs Marina Matsui and Dr. Amithea Love

HPA Clinical Representative Update, by HPA Clinical Reps

Clinical Rep Updates

Drs. Katie Chun, Diane Logan, and Jim Tyson

A Note from Your HPA Clinical Division Representatives:

Aloha Fellow HPA Members!

As we enter the second half of 2024, we wanted to keep you in the loop regarding the Clinical Case Consultation presentation meetings held on the third Monday of each month. What a great lineup we've had!



- Ψ February: Brian Goodyear, PhD presented on mental capacity evaluations, including medical aid in dying, and clinical issues that affect mental capacity.
- Ψ April: Richelle Concepcion, PsyD presented on suicide prevention for veterans, speaking from her years of experience past and present in working with active duty military and veterans.
- Ψ May: Larry James, PhD presented on a topic relevant to practicing psychologists and students, with a departure from the clinical cases, as he shared his knowledge about innovative ways to pay off student loans.

Our upcoming events also look to be incredible. Please join us, if you're able:

- Ψ July 15: Rosemary Adam-Terem, PhD, will present on **The Therapist's Therapist**. *In this clinical case conference, we will explore some of the practical and ethical aspects of providing psychotherapy to students, interns, and fellow psychotherapists, especially in a small community. Participant interaction is strongly encouraged.*
- Ψ August 26 (Note change to 4th Monday!): Diane Logan, PhD, ABAP, will moderate a case presentation and discussion by our own UH Student Rep Marina Matsuo.

We welcome any licensed clinician offers to present on interesting, educational, and/or perplexing cases!

HPA Student Representative Column, by HPA Student Representatives

Student Updates

Hannah Hussey, Marina M. Matsui, Kendyl Y. Oshiro

Here are some updates!

1. Seeking Student Volunteers for the HPA Conference on September 19 and 20, 2024!



HPA is looking to enlist student volunteers (you do not have to be an HPA member) to help run the 2024 Behavioral Health and Wellness Convention (Thursday, September 19; Friday, September 20). Student volunteers will be asked to work one of the two convention days, which will be held at the Ala Moana Hotel. Convention fees will be waived for volunteers. Some of the duties/responsibilities may consist of the following:

- pre-convention preparations
- working the reception table
- tech support for the virtual attendees
- supporting or introducing the presenters/speakers
- managing the rooms or coordinating the sessions on the convention days
- food-related help
- post-convention tasks

If you would like to volunteer, please email the requested information to **your respective student representative** (you can also decide which of the two days you'd like to volunteer after you figure out your fall schedule!). We would also like to know your preferences for duties/responsibilities. Although we cannot guarantee the specific fit of volunteers to roles, we will do our best to accommodate your preferences.

Please backchannel email to **your student representative** the following information:

Name:

Program/Institution (e.g., UH Manoa Undergraduate Student Dept of Psychology):

Email address:

Phone number for calling/texting:

Preference for what day you can volunteer for (September 19, September 20, or both):

What duty/responsibility you would be most interested in (please note *all* if you do not have a preference):

Ψ Hawai'i Pacific University (HPU) Student Representative: [Hannah Hussey](#)

Ψ University of Hawai'i at Mānoa Department of Psychology Clinical Studies Program (UHM CSP) Student Representative: [Marina Matsui](#)

Ψ Hawai'i School of Professional Psychology (HSPP) at Chaminade University of Honolulu Student Representative: [Kendyl Oshiro](#)

Your respective student representative will also send a follow-up email, so please be on the lookout!

2. HPA Student Membership Survey

As your Hawai'i Psychological Association (HPA) student representatives, we would like your thoughts on how HPA can better serve your needs and interests. Thank you for taking the time to fill out this short five-question survey, which should take no longer than 5-10 minutes! [Link here](#). Please complete the survey by September 30, 2024. Your respective student representative will also email you a link, so please be on the lookout!

As always, please contact your student representatives with any questions, concerns, and feedback.

Our Best, HPA Student Representatives



APA Council Meeting Report, by Julie Takishima-Lacasa, PhD

APA Council Meeting Report (Feb 2024)

Julie Takishima-Lacasa, PhD

julietakishima@gmail.com

My second year of my three-year term as your elected Council Representative kicked off with a bang at our very packed and productive 3-days of business meetings last month in DC. *For those interested, please see summary highlights below of the important business that we accomplished during the intensive two-day proceedings.* I voted affirmatively for all of the motions described in the summary, and all corresponding passed resolutions / policies have been or will be widely disseminated, including via various APA channels to APA members. Of particular interest, please see the newly approved [APA Strategic Plan](#) (last updated 5 years ago).



Not included in the summary were several initiatives that respective movers unsuccessfully requested to add to our agenda from the floor, including a resolution entitled **Individual, Collective, and Intergenerational Trauma Recovery: Considering the Restorative Roles of Restitution and Reparations**. I recommended deferring this item because, as I respectfully expressed to the movers in conversations leading up to our meeting and later to all of Council - while I fully support the intent of this important reso and hope that in its final version it will be a tool for advancing much-needed repair, recovery, healing, and growth for traumatized communities - I have noticed a problematic pattern in some of the work within APA: the omission of Native Hawaiians and other Pacific Islanders, Alaska Natives, and other groups when acknowledging impact of inequities. I experienced this in my very first Council meeting last February when I requested friendly amendments to include Native Hawaiians in APA's Apology to First Peoples (which I am happy to say were successfully accepted by the movers). My comments re: this Trauma Recovery reso resulted in the movers requesting preliminary language to insert into the draft document to ensure inclusion of these groups, which I drafted in collaboration with Native Hawaiian and Alaska Native colleagues. We were fortunate that several colleagues from those communities were willing to accept that labor of cultural consultation on very short turnaround. **I would like to thank here the following local psychologists for their review and feedback: Drs. Puanani Hee, Jill Oliveira Cabbab, Robin Miyamoto, and Keawe'aimoku Kaholokula.** The resulting draft will be referred for review by appropriate APA boards, committees, divisions and an open comment period. This process will ensure that the language will be further developed through direct engagement with impacted populations as this initiative progresses; I will be sure to share with this listserv when the document is opened for public comment.

February 2024 Council Meeting Highlights

APA's Council of Representatives held a hybrid meeting Feb. 23-24, with in-person Council members convening in Washington, D.C.

Calling for an End to Involuntary Individual Isolation in Incarcerated Youth

The Council passed a resolution calling for ending the placement of youths in isolation in juvenile justice settings, except for emergencies, and then only for a maximum of a 4-hour period. "Solitary confinement should never be used for punishment or disciplinary purposes, or for the protection of property," states the resolution. "The separation of youths from others must

never be a substitute for adequate staffing numbers, staff training, and supervisory and/or administrative support." The resolution passed 154-2, with 1 abstention. This resolution calls for implementing alternative, evidence-based strategies for managing behavior and promoting positive development. It emphasizes the importance of mental health support for youth subjected to isolation. The measure includes a recommendation that federal agencies and/or state youth justice authorities keep accurate track of and publicly report the frequency, prevalence, duration, conditions and rationales for various forms of individual confinement.

Secure Firearms Storage

The Council approved, by a vote of 157-6, a resolution aimed at promoting secure firearm storage practices. This resolution underscores the critical role of psychologists and health care providers in preventing suicides by advocating for secure firearm storage and safety strategies. The measure emphasizes the effectiveness of actions such as temporary removal of access to firearms during mental health crises, highlighting research indicating that such steps can prevent suicides by creating time and distance between individuals and lethal means. The resolution also advocates for increased funding at federal, state and local levels to support initiatives aimed at preventing suicides through secure firearms storage. And it calls on psychologists, health care professionals, policymakers and the public to support efforts to implement evidence-based strategies to prevent suicides and promote mental health and safety.

Policy Statement on Evidence-Based Inclusive Care for Transgender, Gender Diverse and Nonbinary Individuals

The Council passed, by a vote of 153-9, with 1 abstention, a policy statement affirming evidence-based care for transgender, gender diverse and nonbinary children, adolescents and adults. The policy affirms APA's support for access to evidence-based clinical care for transgender, gender diverse and nonbinary children, adolescents and adults. It notes that recent legislative attempts to obstruct access to psychological and medical interventions for such individuals puts them at risk of depression, anxiety and other negative mental health outcomes. The policy statement also addresses how misinformation can distort the characterization of gender dysphoria and gender-affirming care, leading to stigmatization, marginalization and lack of access to psychological and medical care for this population. It also highlights APA's support for insurance providers to include coverage that addresses the health care needs of this population.

Approval of APA/APASI Strategic Plan

The APA/APASI strategic plan was approved by the Council by a vote of 145-5, with 6 abstentions. This

updated plan features revised language that enhances specificity, aligns with current EDI strategies and highlights the importance of partnerships. It replaces the previous plan, approved in August 2019, and follows the mandate requiring Council approval every five years.

Parents with Disabilities

Recognizing the biases and challenges often encountered by parents with disabilities, the Council adopted a resolution to support parents with disabilities. The policy statement calls upon psychology and policymakers to support increased psychological research, intervention, advocacy and policy development aimed at informing and shaping decisions related to parents with disabilities, and to reduce disparities and biases faced by this population. The resolution passed 158-1.

Combating Misinformation and Promoting Psychological Science Literacy

The Council adopted a resolution on combating misinformation and promoting psychological science literacy. The resolution recognizes that misinformation leads to mistrust and can pose a threat to public health. It states that "to fully understand the impact of misinformation, it is necessary to understand the psychological factors that drive people to believe and share it, the levers of manipulation used by its creators, and the network effects induced by today's media and political landscape that impact its spread." The policy commits APA to disseminate psychological science to address misinformation and to promote psychological science literacy. It passed 151-3.

Revised Guidelines for Psychological Practice with Older Adults

The Council voted 153-0 with 4 abstentions to adopt revised Guidelines for Psychological Practice with Older Adults, with an expiration date of Dec. 31, 2034. These guidelines focus greater attention on the strengths and needs of older adults, and work to develop workforce competency in working with this population. This revision addresses the increased use of technology and telehealth for the first time.

Discussion of Future Meeting Options

The Council discussed whether to hold the February meeting entirely virtually and/or to remove the hybrid option from in-person meetings, which would have a positive impact on climate change and APA resources. A nonbinding straw poll showed that neither option was popular among Council members. The Council Leadership Team agreed to study the issue further.

Dues Adjustment

That Council approved a \$25 reduction in the dues at year four through six of the dues ramp-up (\$149 to

\$124) and a \$27 increase in the APA base member dues rate (\$247 to \$274).

Address by Dr. Miriam Delphin-Rittman

Dr. Miriam Delphin-Rittman, administrator of SAMHSA, outlined HHS and SAMHSA priorities and major initiatives -- in particular, progress and attention to mental health across diverse populations, building the workforce, addressing substance use disorders and suicide prevention.

APA Legislative Advocacy Updates, by Julie Takishima-Lacasa, PhD

APA Legislative Advocacy (Apr 2024)**Julie Takishima-Lacasa, PhD****julietakishima@gmail.com**

After many delays, Congress wrapped up its Fiscal Year 2024 funding legislation the week of March 18. Thanks to a strong showing by psychologists throughout 2023, during which these funding conversations were ongoing, we were able to hold the line against severe proposed cuts and secure the highest possible levels of funding for most programs and agencies key to psychology. This includes programs and agencies that support the psychology workforce, school-and campus-based mental health, psychological research, and suicide prevention. You can learn more about government funding levels in this downloadable Congressional FY24 Joint Exploratory Statement.

If your networks are expressing concerns about telehealth rates in Medicare, please share those with Scott Barstow in the Advocacy Office. This will help inform our Congressional outreach – you will find more details in the practice of psychology updates section.

Division 31 (SPTA Affairs) held a [webinar on mental health access in rural areas](#) on March 20, 2024, moderated by Andrew Strickland in the Advocacy Office.

Federal UpdatesPractice of Psychology and Psychology Workforce

- Working with APA Practice Staff to [respond to the Change Healthcare cyberattack shutdown](#), as well as the POS 10 processing and payment lag. APA Services sent a [letter to the Department of Health and Human Services](#) urging the agency to take stronger action to

compel Change Healthcare, along with its parent corporations Optum and UnitedHealth Group, to shoulder the responsibility for addressing the fallout from the cyberattack. We are also exploring opportunities to work with Optum and congressional offices on these issues.



- Reviewing new Centers for Medicare and Medicaid Services initiatives on Accountable Care Organizations and new models and initiatives on primary care and integrated care; and developing new resources for promoting Primary Care Behavioral Health models within efforts to advance integrated care.

- Talking with members of Congress and the Biden administration on removing the \$75 annual cap on providing items of value for delivering contingency management within State Opioid Response (SOR) grants.

- Mental Health Parity

- Engaging with federal agencies and with partner organizations on gaining issuance of a strong final rule on Mental Health Parity and Addiction Equity Act (MHPAEA) requirements.

- APA, along with several other mental and behavioral health advocacy groups, posted [this blog](#) in a few social media outlets pushing back against some of the arguments against a strong final rule.

- o We circulated [this “Myths/Facts” sheet](#) widely among varied stakeholders to help respond to posts and articles aimed at spreading disinformation.
- Telehealth
 - o Expecting committee hearings on telehealth beginning in April.
 - o We are working alongside our Mental Health Liaison Group partners in meeting with congressional offices to gain support for the Telemental Health Care Access Act ([H.R.3432/S. 3651](#)), which would repeal the Medicare in-person service requirement (currently scheduled to go into effect after the end of this year). Legislative action isn't likely until after the election, however.

For questions, comments, and feedback about these issues, please contact: Scott Barstow, Senior Director, Congressional and Federal Relations and Practice Lead at sbarstow@apa.org.

Population Health (Education)

- Recently endorsed legislation:
 - o ACCESS in Mental Health Act: Would authorize grant funding to Minority-Serving Institutions, including Historically Black Colleges and Universities, Tribal Colleges and Universities, Asian American and Native American Pacific Islander Serving Institutions, and Hispanic Serving Institutions, for graduate programs in mental health fields, including psychology. It would also provide grants of \$10,000 per year to students attending these graduate programs to help cover the cost of attendance.
 - o EARLY Minds Act ([H.R. 7808](#)): Would, for the first time, allow the Community Mental Health Services Block Grant to be used for prevention and early intervention.
 - o CARE for Student Mental Health Act ([S.4041](#)): Would permanently authorize two Department of Education school-based mental health workforce grants. This would include some additional improvements, such as providing more technical assistance to grantees and targeting some of the funding towards rural school districts. APA has long supported these grants and helped secure \$1 billion

in funding through the Bipartisan Safer Communities Act in 2022.

For questions, comments, and feedback about these issues, please contact: Kenneth Polishchuk, Senior Director, Congressional and Federal Relations and Education Lead at kpolishchuk@apa.org.

Health Equity and Social Justice

- Provided written comments to the Senate Health, Education, Labor and Pensions (HELP) Committee on the reauthorization of the Older Americans Act. The HELP Committee held [a hearing](#) on this topic on March 14, 2024.
- Endorsed the Senate introduction of the [Pride in Mental Health Act](#) which would provide mental health resources to LGBTQ+ youth.
- Participated in visits to members of the House and Senate Armed Services Committee with Division 19's ([Society for Military Psychology](#)) advocacy committee on recruitment of military psychologists.

For questions, comments, and feedback about these issues, please contact: Stefanie Reeves, Deputy Chief of Public Policy and Engagement, at sreeves@apa.org.

Psychological Research, Infrastructure, and Regulatory Environment

- Participated in a Hill Day to advocate for animal research in collaboration with APA's Committee on Animal Research and Ethics on March 22, 2024.
- Continued [engagement with the Kids Online Safety Act](#) (KOSA, [S.1409](#)). KOSA currently has 68 co-sponsors in the Senate, and House negotiations are underway.
- Advocating for the role of psychology in the development, deployment, and analysis of new AI tools continues with two requests for information responses already submitted in 2024 and upcoming event on the Future of Work with [National Academies](#).
- Working with federal regulators in building new science-based tools for battling mis/dis-information around elections in the build up to the 2024 presidential election.
- Upcoming event: May 2 webinar to discuss how best to apply psychological science and methods to mitigate

and adapt to climate change at the state and local levels- stay tuned for more information.

For questions, comments, and feedback about these issues, please contact: Pat Kobor, Deputy Chief, Scientific Affairs Advocacy at pkobor@apa.org.

State Updates

- Advocacy staff are advising on state-level social media proposals - please reach out to Corbin Evans at cevens@apa.org if you have any questions about bills in your state.

APA FAC Legislative Update, by Julie Takishima-Lacasa, PhD

APA FAC Legislative Update (Jun 2024)

Julie Takishima-Lacasa, PhD

julietakishima@gmail.com

As your APA Federal Advocacy Coordinator (FAC) I joined 70 psychologists, representing 40 states, in DC last month for APA's [June Grassroots Fly-In: Advancing](#)



[Equity Across the Lifespan](#). I met with all four of our Congressional offices including Sen Schatz, Sen Hirono, Rep Case, and Rep Tokuda.

Rep Tokuda co-sponsored all of the three of the bills that we were advocating for that day!

[Telemental Health Care Access Act \(H.R. 3432/S. 3651\)](#): This bill would repeal a Medicare requirement that patients must be seen in-person for continued coverage of their tele-mental health services. The six-month in-person service requirement is an unnecessary barrier to treatment that perpetuates biases against mental health services.

- [Increasing Mental Health Options Act \(H.R. 8458/S.669\)](#): This bill would increase Medicare beneficiaries' access to mental health care by removing outdated Medicare requirements for physician oversight and referral for services provided by psychologists. These provisions are causing unnecessary and detrimental delays for Medicare patients, especially in emergency situations. The requirement for physician sign-off in Medicare is not the norm, as the VA, TRICARE, Medicaid / CHIP and private sector insurance plans all allow psychologists to practice independently in all settings.

- [COMPLETE Care Act \(H.R. 5819/S. 1378\)](#): This bill would increase access to mental and behavioral health services by adopting a "model-neutral" approach to assisting practitioners with adoption of integrated care. Integrating mental and behavioral health specialists into team-based primary care systems can improve access to behavioral health treatment, especially in rural and underserved communities where primary care is the default health system.

Federal Updates

[Practice of Psychology and Psychology Workforce](#)

- Legislative Updates:
 - o A version of the Treat and Reduce Obesity Act (TROA) (H.R. 4818) was marked up the week of June 24th by the House Ways & Means Committee. APA supports the revised language that would call on CMS to instigate a reconsideration of a National Coverage Determination (NCD) on Medicare coverage of intensive behavioral treatment for obesity. This is a significant and unprecedented step for a bill that APA has long supported.
- Regulatory Updates:
 - o The Advocacy Office and Practice Directorate are awaiting the release of the annual Centers for Medicare and Medicaid Services Medicare Physician Fee Schedule (PFS) proposed rule. As in previous years, we plan on launching a grassroots campaign to help members file comments on the PFS proposed rule once the rule is released and we have reviewed its contents.
 - o The Drug Enforcement Administration has a proposed rule on tele-prescribing that is currently undergoing review by the White House Office of Management and Budget. We will keep members updated if action is needed.

For questions, comments, and feedback about these issues, please contact: Scott Barstow, Senior Director, Congressional and Federal Relations and Practice Lead at sbarstow@apa.org, or Julio Abreu, Director of Congressional and Federal Relations at jabreu@apa.org.

Population Health (Education)

- We are advocating for and tracking the following bills:
 - o The Pell Grant Preservation and Expansion Act introduced last week by Mazie Hirono (D- Hawaii). This bill would double the Pell Grant maximum award, expand eligibility to DREAMers, and make funding a mandatory entitlement.
 - o The ACCESS in Mental Health Act ([H.R. 7924](#)), which establishes a grant program for minority serving institutions to establish new or expand existing graduate programs in mental health, as well as provide funding to students within those programs
 - o The EARLY Minds Act ([H.R. 7808](#)), which would allow states to use part of the Community Mental Health Services Program Block Grant for prevention and early intervention services.
 - o Mental Health in Schools Act ([H.R. 8444](#)) which would create grant programs within SAMHSA to develop mental health education programs and promote careers in mental health.

For questions, comments, and feedback about these issues, please contact: Kenneth Polishchuk, Senior Director, Congressional and Federal Relations and Education Lead at kpolishchuk@apa.org.

Health Equity and Social Justice

- We provided an advocacy training and Hill Day for participants of the Minority Fellowship Program (MFP) Psychology Summer Institute. The legislative request for the Hill Day was to increase funding for MFP.
- We continue to work to educate Congress about the Red Team Report. The report warns that the Veterans Community Care Program is growing at an unsustainable pace, thereby threatening funding for the VA at large.

- We are working with the Div. 19 (Society for Military Psychology) Advocacy Committee on recruitment and retention priorities.

For questions, comments, and feedback about these issues, please contact: Stefanie Reeves, Deputy Chief of Public Policy and Engagement, at sreeves@apa.org.

Psychological Research, Infrastructure, and Regulatory Environment

- We are pushing for the Kids Online Safety Act (KOSA) to get marked up by the full House Energy & Commerce Committee, and for it to receive a floor vote in the Senate. We have heard there is a possibility that for a committee markup next week in the House, and that the Senate may move in July.
- We are working on several federal Requests for Information. We just submitted a response which focuses on research on how racism affects the brain. Other federal feedback requests coming up this summer will cover the NIMH strategic plan (due in July) and the NIMH-funded research on mental health services (due in August). We are also submitting a response to the NIAID RFI on its strategic plan.
- The House Energy and Commerce Committee is asking for feedback on its plan to reorganize and reauthorize the National Institutes of Health.
 - o This plan was also included in separate funding legislation by the House Appropriations Committee. We are opposing the appropriations bill because it contains numerous problematic cuts to essential programs. We thank those who shared our [action alert](#) prior to the mark-up of the appropriations bill, which took place on June 27th.

- Several APA members recently met with the White House Office of Science and Technology Policy to discuss how psychological science can be used to create inclusive STEM workplaces which are free from sexual harassment.

For questions, comments, and feedback about these issues, please contact: Pat Kobor, Deputy Chief, Scientific Affairs Advocacy at pkobor@apa.org.

HPA March 2024 Column, by Pat DeLeon, PhD, Former APA President

"WE ORDER DIFFERENT DRINKS AT THE SAME BARS"

The Annual Practice & SPTA Leadership Conference (PSLC)

is always the highlight of my professional year. This year's 41st conference was attended by over 300 colleagues with Hawaii receiving a number of impressive accolades. Critical education and practice issues were discussed in depth, with APA's Robin McLeod graphically illustrating that in the foreseeable future, over a million masters trained clinicians are expected to be providing care in our ever-changing healthcare environment. Unprecedented advances in technology (for example, Artificial Intelligence) continue to dramatically impact the delivery of health care with reports that today 55% of mental health appointments are being conducted remotely, mainly via videoconferencing (telepsychology). Thus, the adoption of the Psychological Interjurisdictional Compact (PSYPACT) is increasingly important. At the beginning of this year, Alex Siegel, Director of Professional Affairs for ASPPB, reported that there were 40 jurisdictions (out of a total of 55 states and territories) which were part of the PSYPACT Commission.

What was special for me this year was the warm acknowledgement by those present of the extraordinary contributions of Dan Abrahamson as he concluded his career at APA that has included more than four decades as a member, in governance and then as the lead staff person for PSLC. Over 15,000 psychologists have attended this special conference over the years with many reporting that as a direct result of this experience, they had become passionately engaged on behalf of the profession for the rest of their careers. What a lasting difference PSLC has made. Mahalo Dan!

Jared Skillings, APA Chief of Professional Practice – *State of the Profession 2024*: "In the normal course of events, I am expected to report on the state of the profession. This morning, no such report is needed. It has already been delivered... by psychologists all across the country. We have seen it in the

courage of psychologists and trainees who risked and sacrificed to serve their communities. I am reminded of psychologists in Hawaii. When wildfires devastated the town of Lahaina on the island of Maui, they went to work. In partnership with the Governor's office, red cross, medical colleagues, and others, they provided the needed disaster relief and mental health and trauma support for the people in the affected communities. I remember psychologists in Texas, Arizona, New Mexico, and California. When the number of people trying to migrate to the United States from Mexico rose significantly, psychologists answered the call to help. They provided specialized care for different types of immigrant trauma often for free, worked to understand the sociopolitical context to provide equitable assessments, and trained new providers to deliver culturally and contextually competent care.

"We've seen the pain of powerlessness; the misery of grief; the isolation from trauma. But we have also seen compassion enacted, empathy shared, and dignity revived. In these past four years, the country and our world has seen the value of psychology! They have seen the state of our profession and it is strong!



"Our world has changed significantly in recent years. We are here to face these new challenges head-on! We must ask ourselves: 'What can we do? What should we do? How are we strategically positioning psychology and psychologists for the future?'

"This morning, I am going to identify three major areas where our world is changing and what psychologists can do -- Health, Business, and Technology. Stress levels are at an all-time high, particularly high for young people. We are in a mental health crisis. Access to care is poor overall across the country. At the same time, consumers have increasingly more options for healthcare, including digital. High-touch in-person care is no longer the only option. Psychotherapy isn't the typical entry point to access care for a person in mental distress. Primary care, the emergency department, schools, barber/hairdresser, bartender, or spiritual

leader are. Population and value-based care holds the promise of cost savings, operating efficiencies, and improved care quality and safety. To make this happen, it requires leadership commitment and ongoing culture change, and having actionable, clear data and meaningful partnerships and infrastructure to support these models.”

Throughout 2024 PSLC there was a clear message that the opportunities for Psychologists to exert visionary leadership and significantly improve the quality of life for many of our nation’s historically underserved citizens has never been greater. For those who have not yet had the opportunity to personally attend PSLC, I would urge you to become actively involved within your state psychological association and become one of the future delegates. It will be an experience that will undoubtedly be transformational as so many colleagues have found over the years.

Voices From the Future: Marina Matsui, HPA Graduate Student Delegate – “PSLC



brought together psychologists from the U.S., territories, and Canada, along with APA governance, to discuss important issues for practicing psychologists and to foster

leadership and effective governance strategies for participating state associations. Congratulations to HPA for receiving the Division 31 State Psychological Association Award (SPTA) and Julie Takishima-Lacasa for receiving the Committee of State Leaders DEI Award! Thank you to the HPA Board, Diane Logan for your strong leadership with the Maui Strong initiative, Ray Folen for your service as the Division 31 President, Jodie Gerson for your coordination of the Pro Bono Project, countless psychologists and mental health practitioners for your time, and to our Hawai’i community for continuing to pave the way for your exemplary leadership in the field!

“It has been an honor and a privilege to be nominated and chosen as a graduate student delegate to attend the 2024 PSLC in Washington, D.C. Twenty graduate students from around the country participated at the PSLC to discuss how each of our states supports graduate students and areas of growth opportunities. Within our graduate student affinity

group meeting, we had a chance to break up into smaller groups, with my break-out group including representatives from Arizona, Kentucky, Nebraska, and New Mexico. We discussed areas of improvement and gold-star areas within each of our states’ SPTAs. I created word clouds to highlight common areas that helped frame our small group, discuss what has helped in their SPTAs, and brainstorm ideas for further improvement initiatives. The main areas of improvement included the need for increased engagement, attention to rural health concerns, alleviating financial difficulties, and continuing to champion diversity. Gold-star areas included SPTA’s passion, community, network opportunities, and leadership support. I found collaborating with and hearing the voices of other graduate students in our small-space affinity group meetings immensely helpful as I gathered actionable next-step ideas on how to work on the areas of improvement and continue building upon existing strengths within our SPTA.

“A sentiment I felt throughout the conference aligns with Talee Vang’s talk during one of the presentations, who talked about ‘being seen’ being so instrumental to creating engagement and a sense of belonging in SPTAs. I am immensely grateful to all my mentors at the University of Hawai’i at Manoa Clinical Studies Program and HPA for seeing me and valuing graduate students’ voices. To the HPA board, HPA members, professors, internship and practicum site leadership and staff, community leaders, mental health advocates, partners in legislature, and so many individuals in our communities, thank you for your unwavering support, time, and mentorship of graduate students, and for continuing to champion for the well-being of the people in our communities. I left the conference feeling seen, heard, and motivated to increase engagement and belonging for graduate students within HPA and psychology. I hope to follow in your footsteps and dedicate my life to serving, advocating, and advancing mental health for communities in Hawai’i.

“Personal Highlights: I was excited when Jared Skillings and Stephen Gillaspay discussed the population health approach following a tiered system as the state of the profession’s opportunity to improve access to care. The discussion on science, multiculturalism, and

healing was particularly relevant. Former APA President Tony Puente's speech regarding the current state of affairs had me reflecting on what it means and the implications of being a future psychologist. This was my first trip to our nation's Capital; visiting the Arlington National Cemetery, Ruth Bader Ginsburg's final resting place, and witnessing the Changing of the Guard ceremony at the Tomb of the Unknown Soldier was an incredibly powerful experience. 'If I have seen further than others, it is by standing upon the shoulders of giants' (Isaac Newton)."

The National Academy of Medicine (NAM): Earlier this year Victor Dzau, President of NAM, released the *NAM Strategic Plan 2024-2028* which is strikingly similar to what was discussed at PSLC. It's underlying Vision is health for everyone, everywhere. It's Mission is to advance science, inform policy, and catalyze action to achieve human health, equity, and well-being. And, it's Values are scientific excellence, integrity, and accountability; innovation, adaptation, and anticipation; community engagement and collaboration; and, inclusion, diversity, and equity. Executing this plan will require commitment, input, and action from a broad array of collaborators.

NAM's proffered goals include: * Advance science, technology, and innovation as a foundation for health and medicine. In an era of unprecedented progress in science and technology, marked by the rapid advancement and evolution of artificial intelligence, it is imperative to harness opportunities responsibly, effectively, and equitably. * To lead, inspire, and

catalyze evidence-informed action on urgent, critical issues and long-term societal challenges to health. * Catalyze transformation towards a health system that is effective, efficient, equitable, affordable, and continuously learning. * Lead by integrating inclusion, diversity, and equity in all we do. And, * Readiness by ensuring that the NAM and the nation are ready to shape the future of health and medicine.



Several of the most critical issues which are affecting human health today are climate change, structural racism, violence, and misinformation all of which reflect examples of entrenched societal challenges that require collaborations and leadership equally from health organizations and those experiencing impacts in communities. Impactful solutions rely on cross-sectional partnerships and co-creation of innovative strategies. Further, the report specifically notes that "Structural and systemic barriers that exclude specific groups from positions of power and decision making – particularly people of color – have sustained starkly inequitable health outcomes throughout our nation's history and persist to this day.... NAM will embed both an operational and programmatic focus on inclusivity and representation and seek to build evidence and advance policies that dismantle the effects of structural and systemic racism and marginalization in the United States." "I'm waiting for it, that green light, I want it" (Green Light, Lorde). Aloha,

Pat DeLeon, former APA President – HPA – March, 2024

HPA June 2024 Column, by Pat DeLeon, PhD, Former APA President

"WAY UP HIGH.... AND THE DREAM THAT.... OH WHY, OH WHY CAN'T I?"



PLC 2023: Under the leadership of APA President Thema Bryant, psychology was once again energized to address society's most pressing concerns. Jared Skillings, Chief of Professional Practice: "This is the 40th annual Practice & STPA Leadership Conference. It is so good to see you in person. We are here to celebrate our legacy of change and progress, our legacy of strength, our legacy of impact, for our profession and our communities. We are also here to say that we haven't

come far enough. We need our profession to be even more impactful in our world, more equitable and diverse, more nimble and innovative, more engaged with our communities, and more connected to lived experiences. We've made a lot of progress but we're not there yet. There are four main goals we are striving to accomplish at PLC. We are here to strengthen SPTAs; We are here to invigorate APA; We are here to advance and modernize the profession; and, We are here to impact critical societal issues. By working together and moving together this weekend, we will build a fire to tackle society's greatest challenges. Tomorrow, we fan the flame."

Dan Abrahamson's Professional Reflections & Toast: "PLC/SLC has changed the lives and professional trajectories of so many psychologists over 40 years. There is something infectious about coming together with others who share your passion for advocacy, leadership development, and the importance of SPTAs. PLC feeds your sense of being part of something bigger than yourself. You see firsthand that others feel passionate about assuring a strong future for the role of state associations in promoting and protecting the profession and discipline that you love. Through advocacy training, leadership development, appreciation for the importance of equity, diversity, and inclusion you come to have your perspective widened on what it means to be a psychologist. And for many who attend PLC, they never look back."



National Academy of Medicine (NAM): In envisioning the NAM Strategic Plan for 2024-2028, NAM President Victor Dzau described Climate Change as one of the top Critical Issues. On April 25th, during Earth Day week, NAM organized the first ever Climate & Health Day in the U.S., co-hosting with Kaiser and the Climate Group as part of the Climate Action Summit. This event brought together key stakeholders to discuss paramount challenges and opportunities in climate and health. As part of the event, NAM launched the "Accelerating the National Climate and Health Movement" to build upon the groundswell of activities and mobilize all health sector organizations across the nation to address climate and health.

Highlights from the NAM *Grand Challenge on Climate Change, Human Health, & Equity*: Nowhere are the effects of climate change manifesting more clearly than in human health. While many consider climate change to be a looming environmental threat – one that stands to impact future generations more so than today – millions of people die globally every year because of health issues linked to climate change. These are disproportionately burdening historically and currently marginalized populations due to systemic inequities. The climate crisis is a public health and equity crisis that will continue to pose significant threats in the absence of concerted action. We would

add that daily, one is reminded by the national media of rising oceans, uncontrolled fires, and unprecedented tornado damage throughout the United States.



In 2020, NAM launched its Grand Challenge as a multi-year global initiative to improve and protect human health, well-being, and equity by working to transform systems that both contribute to and are impacted by climate change. This initiative will highlight the most robust actions to address climate change that could yield a healthier, more equitable, and more resilient society. Five strategic objectives have been proffered.

1. Communicate the climate crisis as a public health and equity crisis. NAM will communicate and elevate the impacts of climate change on health and equity, as well as evidence-informed opportunities for mitigation, adaptation, and resilience. Public awareness of the impact and urgency is low, but protecting personal and public health is an important value to Americans that can translate to supporting climate solutions. There is a unique opportunity to spearhead communication that will use action-based, inclusive messaging; and engage, inform, and mobilize health professionals, policymakers, community leaders, and the public to create change.
2. Develop a comprehensive roadmap for systems transformation. The multifaceted health and equity co-benefits of decarbonizing and enhancing the climate resilience merit urgent attention. To date, no comprehensive studies have examined the compounding climate, health, and equity-related effects of decarbonizing. There is a need to examine these interactions and employ systems approaches to chart a path toward a more equitable, climate- and health-sustaining global economy. NAM will form an independent and multidisciplinary International Commission to produce a consensus report that examines the evidence to provide a vision, strategy, and recommendations for systems transformation toward a global economy that promotes health, well-

being, and equity within planetary boundaries. Specifically, the roadmap will lay out the critical opportunities to reframe the economic model in this way and provide timely data-based recommendations.

3. Catalyze the health sector to reduce its climate footprint and ensure its resilience. While transformation is necessary across all major systems, there is an immediate, actionable opportunity within the U.S. health sector, which is responsible for 8.5% of U.S. carbon emissions and 25% health sector carbon emissions worldwide. NAM launched its Action Collaborative in 2021 which is a public-private partnership involving over 60 leaders from across the federal government, biomedical and pharmaceutical industries, hospital systems, private payers, health professions, and more, to co-develop and implement a shared action agenda, focused on four priority areas: health care supply chain and infrastructure; health care delivery; health professional education and communication; and policy, financing, and metrics.

4. Accelerate research and innovations at the nexus of climate change, human health, and equity. The Climate Grand Challenge aims to create novel and innovative mechanisms to inspire and support transformative ideas at the intersection of climate change, human health, and equity. NAM will lead a set of activities that will seek to: develop a research agenda by engaging transdisciplinary and intergenerational researchers and innovators to fill critical evidence gaps. Researchers with diverse expertise spanning the climate crisis, health, and equity will collaboratively identify, discuss, and prioritize research gaps in understanding the complex interactions between climate change, health outcomes, and equity considerations. This research will seek to identify and amplify evidence-based interventions to address climate-related inequities to ensure that the efforts are targeted towards solutions that have the greatest potential impact on reducing inequities and improving health outcomes.

In order to ensure transformative ideas and solutions are global, NAM envisions regional research and innovation Hubs. To support capacity building and bidirectional knowledge exchange, the Hubs would elevate and support efforts by local partners and facilitate uptake and translation to policy. The regional

Hubs would also leverage a partnership approach that centers researchers and innovators in low-income countries and brings together diverse stakeholders to share learnings, best practices, solutions, tools, and resources to address climate change impacts on health. Psychology is particularly fortunate that Kimber Bogard will be playing a major leadership role in this endeavor. Why innovation matters – given the breath and complexity of climate-related impacts on human health, new and innovative mechanisms to support research and solutions are needed to address the health risks and to better preserve and protect human health, well-being, and equity.

5. Reducing climate-related health inequities is a central tenet for NAM. Historically and currently underserved and marginalized communities are too rarely engaged in the conversations and decisions that affect community health and well-being – and this is especially true in the context of climate change. Accordingly, NAM will create a Climate Communications Network (CCN) comprised of community leaders who work for community-based organizations and invited representatives from government, philanthropy, academia, and industry to inform the strategic direction and outcomes of the Climate Grand Challenge. The CCN will serve as a community of practice for sharing challenges, best practices, and learnings – ultimately facilitating local efforts to address the structural drivers of climate-related health inequities.



As experts in behavioral science and concerned citizens, we must collectively appreciate that Climate change *will* continue to have significant impacts on human health globally if left unabated. Improving and sustaining human health, well-being, and equity in the context of climate change is the grand and defining challenge of our time but one ripe with opportunity. NAM's goal is to serve as a unifying Hub for any organization or individual who cares about this issue to come together and take action to ultimately accelerate the climate and health movement.

Formally Recognizing Those Who Supported Public Service Psychology: Under the leadership of President

Steven Curtis, the Board of Directors of Division 55 (the Society for Prescribing Psychology) awarded Honorary Fellowship to three Department of Defense (DOD) *physicians* who were absolutely critical in the establishment of the landmark DOD psychopharmacology training program and its ultimate implementation. These visionary statespersons are the late Enrique Mendez, Jr., Assistant Secretary for Health Affairs; the late Marvin Oleshansky, a dedicated psychiatrist who was the primary clinical trainer and upon retirement testified in numerous states on behalf of psychologists prescribing; and Ronald Blanck, former Army Surgeon General and Commander of the Walter

Reed Medical Center where the original clinical training was conducted. Their “hands-on” approach was essential in protecting the program from those who vehemently opposed, especially in the implementation stages. Morgan Sammons: “Marvin served as preceptor and mentor to the first group of Fellows in the program and continued his support while stationed at WRAMC.” “Oh-ah-ah-ah” (Over the Rainbow, Israel Kamakawiwo’ole).

Aloha,

Pat DeLeon, former APA President – HPA – June, 2024

RECENT EVENTS

HPA Special Event: Diversity Workshop, January 2023

HPA Special Event

"Difficult Racial Dialogues: Implications for Civil Discourse"

Dr. Derald Wing Sue: 9:00 am - 11:00 am



Clockwise: 1) HPA Past President Dr. Larry James welcomes our guest speaker Dr. Derald Wing Sue. 2) Part of our delicious lunch buffet. 3) Fun location at the B-Side Lounge for training and our Awards Luncheon!

HPA 2023 Awards Luncheon, January 2023

HPA Special Event

2023 Awards Luncheon

Nancy Sidun PsyD, ABPP, ATR was presented the **Pat DeLeon Lifetime Achievement Award** by Dr. Tenecia Blue



Keala Kaopuiki-Santos presented the **Daniel K. Inouye Award** by Dr. Trina Orimoto *on behalf of Tia L.R. Hartsock MSW, MSCJA*



Diane Logan, Ph.D., ABAP, CSAC was presented the **HPA Distinguished Service Award** by Dr. Katie Chun



Senator Angus L.K. McKelvey was presented the **HPA Legislator of the Year Award** by Dr. Alex Lichton



Diane Logan, Ph.D., ABAP, CSAC was presented the **HPA Provision of Psychological Services to Rural and Underserved Communities Award** by Dr. Katie Chun



Graham Taylor, Ph.D. was presented the **HPA Media Award** by Dr. Lisa Sanchez-Johnsen

HPA 2023 Awards Luncheon, cont.

HPA Special Event

2023 Awards Luncheon

Veronica M. Acosta, Ph.D. was presented the **HPA Outstanding Professor/Teacher of Psychology Award** by Dr. Jodie Gerson



Vilmarie Báez, Psy.D. was presented the **HPA Outstanding Professor/Teacher of Psychology Award** by Kendyl Oshiro



Kendyl Oshiro, MSCP, LMHC, NCC was presented the **HPA Outstanding Student in Psychology Award** by Dr. Katie Chun



Joanne Qina'au, MA was presented the **HPA Outstanding Student in Psychology Award** by Dr. Nancy Sidun

APA PSLC (Practice and SPTA Leadership Conference), February 2024

In unprecedented numbers, HPA members were able to attend the annual Practice and SPTA Leadership Conference (PSLC) hosted by APA in Washington DC in February 2024. (SPTA = State, Provincial and Territorial Psychological Associations). Attendees from or affiliated with HPA included: **Ray Folen** (Executive Director), **Sean Scanlan** (SPTA President), **Cecily Sakai** (SPTA President Elect), **Kendyl Oshiro** and **Marina Matsui** (Graduate Students), **Jodie Gerson** and **Roxanne Ramirez** (Early Career Psychologists), **Diane Logan** and **Lisa Sanchez-Johnsen** (Diversity Delegates), **Alex Lichton** (Director of Professional Affairs), **Cody Kaneshiro** (APAGS Rep, Committee of State Leaders), **Julie Takishima-Lacasa** (Past Chair, Committee of State Leaders), **Kathleen Brown** (Recording Secretary, APA Board of Directors), and of course, **Pat DeLeon** (APA Past President).

Please enjoy some of HPA's 2024 PSLC memories, in words and pictures, on the following pages.



From left: Lisa Sanchez-Johnsen, Kendyl Oshiro, Roxanne Ramirez, Julie Takishima-Lacasa, Ray Folen, Sean Scanlan, Diane Logan, Pat DeLeon, Cecily Sakai, Cody Kaneshiro, Marina Matsui, & Jodie Gerson.

From Cecily Sakai, HPA President Elect: “In the past two years, I have been fortunate to attend PSLC through my Board roles as ECP and President Elect of HPA. Both times, I have been inspired to meet other psychologists in attendance who demonstrate a commitment to improving the profession of psychology and the communities they serve. A few themes that emerged from PSLC that I hope to bring back to our Association are 1) advocating for our community as well as for our role as psychologists and 2) reinforcing the importance of relationships and connection between members and 3) practicing on multiple levels of our specialty including providing effective care to clinical populations, mitigating risk to subclinical populations, and maintaining the well-being of healthy populations.

At the conference, I was pleased to meet with other President Elects to learn how different States have tackled legislative and other relevant professional issues including prescriptive authority, PSYPACT, master's level psychologists, and care in urban vs. rural areas. A highlight of PSLC is not only getting to attend the conference but also having a chance to engage in conversations with HPA members and getting to know our team on a more personal level. It was wonderful to enjoy some delicious food with the HPA Board and members while soaking up DC nightlife and culture.”

HPA @ Swahili Village – Authentic East African / Kenyan Cuisine



HPA @ Zaytinya – Authentic Middle Eastern (Turkish, Greek, & Lebanese) Cuisines



HPA @ Rasika – Modern Indian Cuisine



HPA @ PSLC – One table used to be enough...



From Alex Lichton, HPA Director of Professional Affairs: As part of my duties, I attended the APA Practice Leadership Conference in Washington, DC in February. A highlight was an in-depth discussion and presentation about the future role of master's level, associate psychologists. I learned that Florida has a provisional license for psychologists, but it is meaningless, because unlike our bill, insurance coverage is not required. I made time for some sightseeing and toured the White House, Congress, and the Supreme Court.

HPA @ PSLC – Ray taught us well... feed everyone and make friends.



HPA on the Mic



From Roxanne Ramirez, HPA Early Career Representative: I felt inspired by the work of other ECP delegates – throughout the affinity group times, I heard multiple strategies that helped increase engagement and membership. I heard representatives share about the success of writing engaging emails, organizing townhalls, setting up webinars, attending APA conventions, sending out polls and surveys, and most of all--building relationships.

Relationship building was one of the main themes I took away from the conference: I recall one of the PSLC speakers sharing the following, which I think is at the core of member retention and engagement: “Relationships is what keeps people around. Building the relationship matters.”

I also resonated with the importance of “inviting others in.” One of the speakers shared how many of the delegates in the room were attending PSLC because they were “seen and valued” by other leaders. The speaker went on to say the way we may operationalize belonging is through bringing in other voices. Spaces like PSLC, have grown to hold space for everyone’s experience and bring in voices from across the country. I think the call to action for SPTA’s is to continue to hold space for everyone’s experience, bring other voices in, invite others in, and to not stop sharing our voices. What an opportunity we have to raise our voices, collectively!

I believe HPA is a strong leader in building community and raising their voice for advocacy. This is evident and recognized with the 2024 Outstanding SPTA Award. I know we will continue to work hard to serve the needs of the public and psychology community. Let’s continue to work together, HPA members and SPTA’s.



HPA with APA Leadership



HPA Reflection

From Marina Matsui, HPA Graduate Student Representative:

1. A highlight of PSLC specific to the big group events/presentations.

- a. As someone passionate about early intervention utilizing strength-based approaches and measurement-based care, I was excited when Dr. Jared L. Skillings and Dr. Stephen R. Gillaspay discussed the population health approach following a tiered system as the state of the profession's opportunity to improve access to care.
- b. Dr. Raquel Halfond's discussion on science, multiculturalism, and healing was particularly relevant as she outlined future directions for guideline development. Dr. Halfond expressed that guidelines historically focus on the efficacy of the intervention, and changes to guideline documents should include diversity of samples, comorbidity of samples, principles/processes of change, treatments that were reviewed even if insufficient evidence, consideration of transdiagnostic approaches, and inclusive language.
- c. Dr. Antonia E. Puente's speech regarding the current state of affairs had me reflecting on what it means and the implications of being a future psychologist. They stated, "psychological science and practice are solutions for making moral priority decisions, to make a unified and sustainable psychology for all."



2. A highlight of PSLC specific to your affinity group, delegation group, and/or official role.

- a. Building connections and having a safe space to share and learn from other graduate students helped to foster a sense of belonging as a graduate student at this conference. I hope to collaborate with my fellow graduate student representative in Hawai'i and promote inclusivity, engagement, and ways for graduate students to continue being seen (potential mentorship matchmaking in the works)!

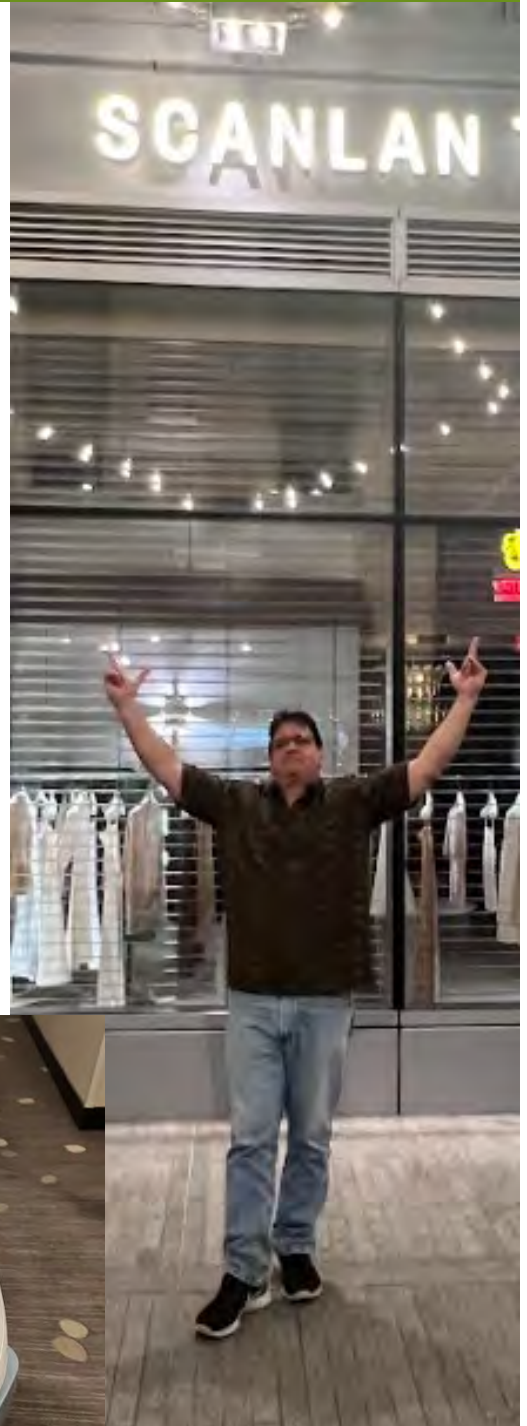
3. A highlight that has absolutely nothing to do with psychology :-)

- a. I felt incredibly connected to the HPA board, sharing ideas, laughs, food, and creating inside jokes. I am so grateful to APA for sponsoring this event and to HPA for nominating me as a graduate student delegate.
- b. This was my first time in Washington, D.C., and I wanted to give a HUGE thank you to Dr. Jodie Gerson for being the best D.C. tour guide (will leave five stars on Yelp)! Visiting the Arlington National Cemetery, Ruth Bader Ginsburg's final resting place, and witnessing the Changing of the Guard ceremony at the Tomb of the Unknown Soldier was an incredibly powerful experience.

HPA in tourist mode



HPA in tourist mode



From Diane:
Robots are scary.
Robots after midnight are scarier.
Stay away from robots.

Affinity Group Photos



Left: Graduate Student Delegates
Center: Diversity Delegates
Bottom: Early Career Delegates



HPA Group Photo



And one last night out on the town...



My favorite 2024 PSLC memory?
I've heard them called grape leaves...
I've heard them called dolmades...
I had never (before) heard them called
"Arabic lau lau." ♥♥

MEMBER SPOTLIGHTS

Welcome to the NEW Member Spotlight section of the HPA Newsletter! The goal of this series is just to get to know either other better, personally and professionally, and see what it looks like to be an HPA Member! We have had some brave volunteers for this first round, so **please consider sending them a quick note** thanking them for their contribution, connecting over shared interests or experiences, or just otherwise being friendly and supportive. Remember, you could be next! (No really, just email me – you could be in the next edition!)

Each Newsletter we'll be looking for volunteers from the following categories:

- | | |
|--|--|
| <ul style="list-style-type: none"> • Student Spotlight • Early Career Psychologist Spotlight • Mid-Career Spotlight • Seasoned Spotlight • Board Member Spotlight | <ul style="list-style-type: none"> • Past President Spotlight • DESC Spotlight • Neighbor Island Spotlight • Associate Member Spotlight • BYO Spotlight (Bring Your Own Spotlight!) |
|--|--|

If you meet one or more of these (or want to create your own!), please contact me!

Every participant gets the same Questions, and as you'll see, everyone answers them differently! There is no right or wrong, this isn't peer reviewed (though it's proofread with your consent), so let your personality show!



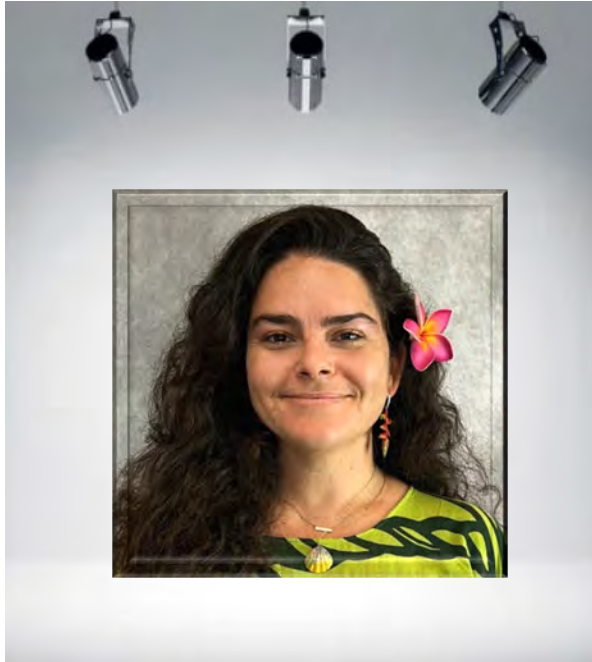
Spotlight Questions:

- 1) How/why did you first get involved in HPA, and why have you stayed a member?
- 2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.
- 3) Tell us about your training – how did you get to where you are now?
- 4) If you weren't in this field, what would your alternate career be?
- 5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?
- 6) What contact info would you like included? (phone, email, website, LinkedIn, Instagram, etc.)

Please include at least 2 photos – one professional (headshot) and one human (living life!)

Spotlight on... Rose Evelyn Friedheim, Psy.D.

Hawai'i Island Representative

drroseevelyn@gmail.com**1.) How/why did you first get involved in HPA, and why have you stayed a member?**

I am blessed to have been born and raised in Oahu. After recently graduating from a PsyD program in Berkeley, CA, and returning home permanently, I have been eager to connect with other mental health providers and like-minded interdisciplinary professionals. HPA has become my professional home, and I immensely enjoy the incredible sense of community! I am so thankful to blossom from the encouragement for leadership development—while completing my post-doctoral fellowship at Hāmākua Kohala Health Center, Dr. Diane Logan invited me to join the HPA Board as the Hawai'i Island Representative. I love serving on the Rural Health and Diversity, Equity, Inclusion, Accessibility, and Belonging Committees. To support community connection for providers across the islands, in 2022, I started the Aloha Mental Health Practitioners Hui, and I hope you'll join! Every Monday from 5:30-6:30 p.m., we join virtually for a

free, peer-to-peer professional support group that empowers one another as professionals to care for ourselves in the context of our clinical work, training and professional development and share information regarding resources for mental health across the Hawai'i Islands! Please email me, and I will add you to the list.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

I was recently invited to join the Brain Injury Association of Hawai'i as a board member. BIAH "works to promote the rights of individuals experiencing disability caused by brain injury, to increase public awareness of brain injury, to provide education, information, resources, and support for individuals who have sustained a brain injury and for their families, to advocate on behalf of individuals who have sustained a brain injury, and to promote prevention of brain injuries in our community."

I am very proud to have recently completed the Maternal and Child Health: Leadership Education in Neurodevelopmental and Related Disabilities (MCH LEND) Fellowship, where I focused on promoting interdisciplinary early intervention services for individuals. I got to collaborate with other LEND fellows across various disciplines to advocate for high-quality care that aims to eliminate disparities in health status outcomes and increase accessible, high-quality, family-centered, community-based coordinated care for families with disabilities, a mission that motivates me daily.

I have enjoyed contributing to five conference presentations with many esteemed colleagues over the last six months. At the most recent Hawai'i Behavioral Health and Wellness Convention, I co-presented with Dr. Lianne Philhower in a workshop, *Innovating Psychology: Ethical Considerations for Moving Treatment Outdoors to Promote Harmony in Health*, where I disseminated my dissertation research titled *Nature as a Co-Therapist*. I was also invited by my mentor, Dr. Lisa Sanchez-Johnsen, to contribute to an HPA DESC panel titled *Equity, Diversity, Inclusion and Belonging in Health Professions: Why Diversity in all of its Dimensions are Crucial in Conversations about Equity, Inclusion, and Belonging*, leveraging the need for disability inclusion for mental health providers. At the Pac Rim Convention, I presented with a group titled *Dismantling the Walls of Disability Isolation by Building*

Bridges to Thrive: Fireside Talk with Peers and Professionals to Strengthen Community and Collaboratively Access Supportive Resources. At the Pac West convention, I presented with a group on *Pathways for Self-Advocacy: Reciprocal Learning by Leveraging the Experiences of Patients and Providers with Disabilities*. Most recently, at the Hawai'i Brain Injury Association conference, I offered a booth titled *Peer to Peer~ Let's Thrive Together! Collaborative Resource Sharing Booth* where I shared a resource guide I helped to make for brain injury survivors on Oahu. I would love to co-present with any HPA members with similar interests~ please reach out!

3) Tell us about your training – how did you get to where you are now?

I completed 6 years of training, including my pre-doc internship, at Through the Looking Glass in Berkeley, CA. We provided respectful and empowering services—guided by personal disability experience and disability culture—for families with children or caregivers with disabilities or medical issues. Our infant mental health informed family systems clinical interventions focused on relational attachment and used a non-pathologizing, strength-based, trauma-informed perspective. I enjoyed working on interdisciplinary teams to support my patients in mobilizing their strengths to advocate for necessary developmental resources to thrive. I provided family and group therapy, infant mental health consultation, and reflective supervision.

I recently completed my postdoctoral fellowship at Hāmākua Health Center, on Hawai'i Island. I provided in-person and virtual therapy to families, individuals, and groups for patients from keiki to kūpuna. I completed specialized training for treating young children, focused on understanding trauma-informed therapeutic play from a neurobiological perspective. This month, I will begin training with the Association for Infant Mental Health Hawai'i (AIMH Hi) and deepen my commitment to improving access to early intervention infant mental health services across the Hawai'i Islands!

4) If you weren't in this field, what would your alternate career be?

My happy place is in the garden, expanding my permaculture skills, and being immersed in awe of the abundance of Hawai'i~ so it would have to be something in nature. I am currently a student of Kumu Leina`ala Bright, a Hawaiian cultural health practitioner, who is generously sharing her ancestral wisdom of Lā'au lapa'au (Hawaiian herbal medicine), instilling my commitment to restoring Native Hawaiian healing techniques and integrating them with modern medicine and behavioral health services. As a certified somatic ecotherapist, I love to offer outdoor treatment when appropriate in alignment with Hawai'ian cultural values, and I hope to integrate Lā'au lapa'au in the near future.



Rose Evelyn Friedheim

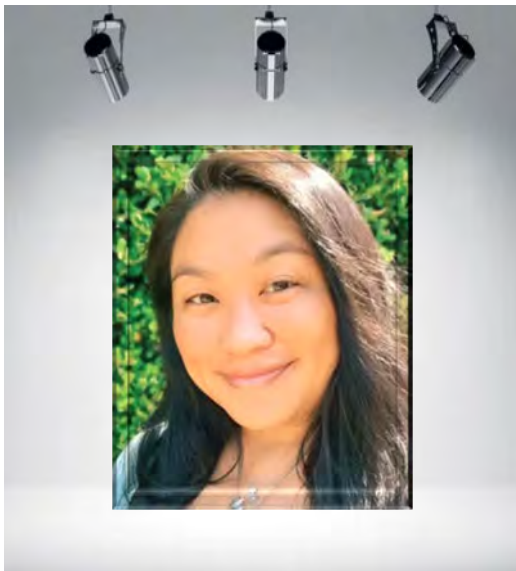
drroseevelyn@gmail.com

5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?

Rose Evelyn & Love

I love to play co-ed soccer, and as a TBI survivor, I wear a purple helmet to protect my brain from future concussions. I have a service dog named 'Love,' I have 6 siblings and dual citizenship in Switzerland! I have been loving joining the hula halau at Waimānalo Health Center.

Dr. Allana Coffee invited me to interview about being a somatic ecopsychologist on her [YouTube channel](#). I also presented for the Kona Brain Injury Support Group about functional executive functioning strategies for brain injury survivors to thrive on their [Facebook page](#).

Spotlight on... Victoria Liou-Johnson, PhD**HPA Member and HiBHC Executive Director**dr.lioujohnson@gmail.com**1.) How/why did you first get involved in HPA, and why have you stayed a member?**

I joined HPA as a member while I was still a trainee so that I could start to get to know my colleagues and community. I found it to be a great resource to know what was going on in the community, to ask questions, and to find referrals. Later, when the opportunity came about to be part of the inaugural Diversity, Equity, and Steering Committee (DESC), I was excited to be involved.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

I have previously worked in academic medical institutions, the VA, and primary care settings, doing clinical work and research. I currently have a private practice, which is primarily focused on trauma in Indigenous populations. My research has focused on neurocognitive disorders, traumatic brain injury, health equity, barriers to treatment access, and chronic disease. I am passionate about public service and working with historically marginalized populations, whether it's clinical service or doing research to better understand the health disparities and care gaps.

The COVID-19 pandemic really highlighted the disparities that many people, especially Kānaka Maoli (Native Hawaiians) in our communities face. At the time, I worked in a primarily Kānaka serving Federally Qualified Health Center (FQHC) and many of my patients struggled with having their keiki home and trying to continue

their schooling. While it was great that schools were providing children with Google Chromebooks so they could get online at home, they neglected to consider that many people did not have internet service in their homes and/or that they did not live in permanent structures. The memory of these struggles that these families faced, really spurred me to apply to the Design, Innovation, and Clinical Entrepreneurship Fellowship at Stanford University School of Medicine's Clinical Excellence Research Center, where I focused on utilizing "design thinking" to redesign systems of care, or care models for children experiencing health disparities.

The Maui Wildfires in August of last year really drove home the inequities for certain populations here in Hawai'i. The wildfires spurred many people in Hawai'i to help, which we also saw during the pandemic, but it was incredible to see the number of people and help that mobilized in the days following. It's one of the things I love and feel most proud of, in our culture here. Times like this truly embody the idea of working together to help everyone overcome and succeed.

It was no different for many of us in the mental health field, who wanted to help support our relatives on Maui. When my friend and colleague, Dr. Diane Logan put out a call for help, I couldn't say "no". Through that, we formed Maui Strong Mental Health Response (MSMHR), I'm not quite sure where that name came from, but that's what we became known as to the Governor's Office of Wellness and Resilience and other organizations. Once financial support was released by the Federal government, we were able to apply for and receive a small grant to help us turn MSMHR into, what we hope to be a "forever" nonprofit, Hawai'i Behavioral Health Connection (HiBHC, <https://hibhc.org>). Diane and I envision that HiBHC will expand to help the entire state not just in times of peril, but also help to build up and retain our mental health providers in the state. We really realized during those early days that all of us in the mental, behavioral, and physical health fields are all on the same team. So again with that same idea of all of us working together, regardless of degree/license type, we could be of greater help to those in need. With that, one of our missions is also to make sure we promote ethical and evidence-based therapies that are culturally respectful and relevant. A major lesson we learned during the last 10 months was that there are a lot of "treatments" being promoted out there that are potentially harmful, so we want to ensure that not only are providers given the right kind of training, but that the public also receives the education to make informed decisions.

In addition to HiBHC and my private practice, I am currently working on a number of research projects trying to understand disparities for rural US Territory (including the Pacific Islands) Veterans with brain injuries, examining disparities in end-stage kidney disease treatment (an issue that is of utmost importance for Kānaka, as being at highest at risk for kidney disease), and fostering some collaborations for needs assessments/community based participatory research for people living in their vehicles. I am also involved in different Indigenous cultural activities, like helping with powwows and engaging in "[cultural burning](#)," which is the application of low intensity fires to small areas to both create fire abatement, but also to help get rid of invasive species while propagating native flora and fauna. I feel lucky to have been invited to work with (Uncle) Chairman Ron Goode of the North Fork Mono tribe when I'm in California (where I spend part of my time for my research work) on these burns.



3) Tell us about your training – how did you get to where you are now?

I completed a terminal Master's program in Clinical Psychology/Marriage and Family Therapy and Clinical Gerontology, thinking I was going to go to medical school to work with older adults with dementia. However, during my coursework, I had a professor who was a Clinical Psychologist and taught, basically, an Intro to Neuropsychology course and I realized that was more of what I was looking for. So after my Master's, I enrolled in a PhD program with a specialization in Clinical Neuropsychology. During that time, I did supplemental research at the VA in older adult cognition, while gaining amazing training from some of the most world renowned neuropsychologists and neurologists. Despite all of that, it was incredibly apparent that the research and norms were not at all diverse and there were a lot of questions - with no answers - on how to interpret results from certain populations. Although I tried to conduct research with an emphasis on Asian American/Native Hawaiian/Pacific Islander and Native American/Alaska Native peoples, my supervisors always told me it was extremely difficult to find data that disaggregated those ethnic groups because "there weren't enough numbers". This was extremely frustrating to me, as these ethnicities are part of my own heritage.

I have since come to realize that combining these groups, or disregarding them as important because "there aren't enough" of them, was another form of genocide - actually termed "data genocide" by many in the Indigenous research world. This became a new area of passion for me, during my training. Since then, I have focused on making connections in these communities and learning from other researchers in the field, so I can understand the pitfalls of those who have come before, and also make sure I am going about things in a *pono*, as we say in Hawai'i (or "good way," the parlance of Continental Native folk).

4) If you weren't in this field, what would your alternate career be?

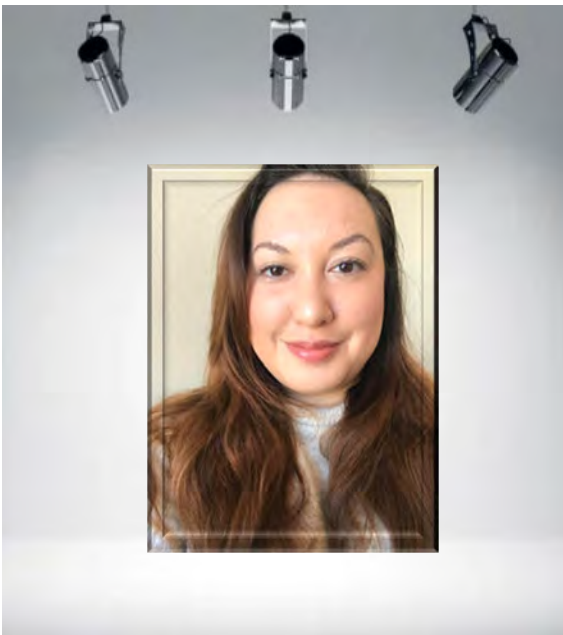
I probably would have gone to medical school and become a behavioral neurologist... haha! But I'm also an artist and had a side-hustle (as many people in Hawai'i do) making jewelry, something I've done since childhood and then later in high school, I learned to cast silver and gold, as well as solder, and learned rudimentary lapidary skills. A few years ago, I took some jewelry classes at the art museum and learned how to engrave metal by hand from a really well known, local jewelry designer. So sometimes I think about doing that again (I stopped when I started working at Stanford because I had to be there part of the time). I also love cooking, so I have a little fantasy of having a little pop up eatery where I can just make things I love that I grew up eating, but gluten free because I have celiac. My original career path out of high school was as a photojournalist, then photography and literature double major. I worked as a professional rock concert photographer while in high school, which was super fun to go to shows for free! Sometimes I fantasize about getting back into professional photography or becoming a novelist. My mind is not a boring place! haha!



5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?

I'm the mom of four boys/young men, I am sending #3 to college later this summer and will only have one left at home! Not long before we have an empty nest! I also have several fur children, 2 dogs (German Shepherds), a "creamsicle" tabby cat, and I share ownership of two horses with one of my good friends in California.

I've already told you a lot about my other interests/hobbies, and I guess some "secret" talents, haha. I also ride horses and one of my goals for 2024 was to get back into competing, which I haven't done in 20 years. I competed in my first dressage show, ever, in April (I used to ride hunter/jumpers before kids, I'm not that brave now)! I think horses and dogs are something I can't live without. Being at the barn with the horses or out on the trail with the sound of hooves clip-clopping and leather squeaking is really my self-care and makes my heart happy.

Spotlight on... Alana Egan**HPA Student Member**aeganleong@uri.edu**1.) How/why did you first get involved in HPA, and why have you stayed a member?**

My involvement began in 2022, when I met Dr. Victoria Liou-Johnson at an APA convention. I'm originally from Hawai'i and I noticed her Hawaiian heritage jewelry so I struck up a conversation. I'm currently attending graduate school in Rhode Island, so it was an unexpected dose of home. Dr. Liou-Johnson and I kept in touch, and she brought me in to assist with the Maui Mental Health Response initiative after the 2023 Maui fires. I've been helping out with MMHR - now the Hawai'i Behavioral Health Connection - ever since.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

I'm a rising fourth year doctoral candidate at the University of Rhode Island's Clinical Psychology doctoral program. My research and clinical interests are focused on service to Native Hawaiian and Pacific Islander communities - I just received funding for an F31 exploring substance use, suicidal ideation, and historical trauma in this community. As a kanaka maoli (and Kamehameha Kapalama 2009 graduate - imua!), serving the lahui has been important to me for many years.

I've loved my time at URI so far, but I am hoping to take my training home to Maui as soon as humanly possible. As any Hawaiian knows, it's hard to be so far away from family for so long - especially as the community tries to rebuild after the fires. The upcountry fire got within a hundred feet of my mother's home in Kula, which was hard to watch from Rhode Island.

3) Tell us about your training – how did you get to where you are now?

My training has been non-linear and pretty varied, which I think is to my benefit. I'm a proud community college graduate who pursued licensure as a Masters-level therapist before moving on to a doctorate. I've been fortunate to work in a variety of settings, including a clinical role at NASA's Johnson Space Center during the height of the pandemic. Throughout my Masters-level training, I began to realize that research helps us effect change on a

broader level so I decided to pursue doctoral training. I am so grateful to be earning a doctorate under the mentorship of Dr. Nichea Spillane, who has provided in-depth training on how to use mixed methods research to partner with underserved Indigenous communities.

4) If you weren't in this field, what would your alternate career be?

My undergraduate degree was a double major in Anthropology and Psychology, and I really enjoyed my primatology classes. I'd like to think my alternate career would be as a primatologist.

5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?

I just had a baby in October 2023, so I'm just now getting back to trying to have a life outside of newborn chaos! I love to cook, listen to podcasts, and spend time with my rescue dogs. However, I think the biggest challenge lately is trying to figure out who I am now as a mom, as a clinician, and as a doctoral candidate.



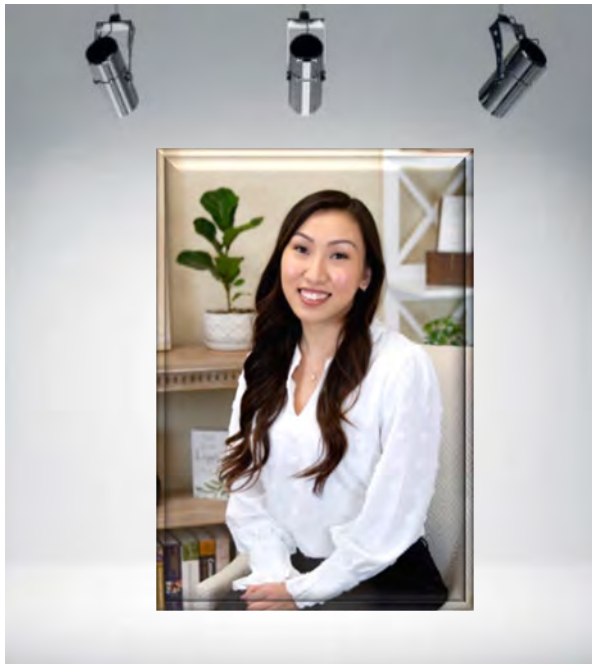
Alana Egan

aeganleong@uri.edu

Spotlight on... Tiffany Billiter

HPA Administrative Assistant and Student Member

tiffany.billiter@student.chaminade.edu



1.) How/why did you first get involved in HPA, and why have you stayed a member?

I began my journey with the Hawaii Psychological Association (HPA) as a volunteer during the 2023 convention, shortly after moving to Hawaii and starting my first year in the PsyD program at the Hawai'i School of Professional Psychology at Chaminade University. Recognizing HPA's significant role in the psychological community, I eagerly sought ways to contribute more actively. Upon speaking with HPA's Executive Director, Dr. Ray Folen, I was offered the position of Administrative Assistant. In just a few months, this role has provided me with invaluable learning experiences and deepened my commitment to our field, allowing me to explore topics I might not have pursued otherwise.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

As I embark on my second year in the PsyD program at Chaminade University, I am honored to serve as a Student Representative in the HSPP Student Association and assist in managing the HSPP Mentorship Program. This fall, I am excited to start my diagnostic practicum at Hawaii Neuropsychology. In addition to my academic pursuits, I work with both the Hawaii Psychological Association (HPA) and Northern California NeuroHealth as a Clinical Executive Assistant.

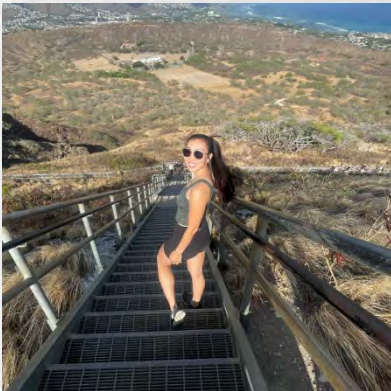
My passion for clinical neuropsychology drives my dedication to working with patients who have experienced brain tumors, strokes, traumatic brain injuries (TBIs), and neurodegenerative disorders. My clinical experience has solely been with adults/geriatrics, specifically older adults with Alzheimer's/Dementia, but I would love to work with children in the future. Beyond my professional roles, I truly love serving in the community, volunteering with the Alzheimer's Association, HUGS Hawaii for children diagnosed with life-threatening illnesses, and the Kīna'ole ministry at my church, where I assist children with special needs. Additionally, I have had the privilege of volunteering with Special Olympics Hawaii, participating in their events over the past few months.

3) Tell us about your training – how did you get to where you are now?

I earned my Bachelor's degree in Psychology from UC Davis. Following my graduation, I worked at two neuropsychology private practices to gain valuable experience before applying to graduate school. These roles provided me with a wealth of clinical knowledge and hands-on experience, allowing me to interact directly with patients, learn to administer cognitive tests, score assessments, and write comprehensive reports. Additionally, I gained insight into the operational aspects of running a private practice, including billing, creating procedural manuals, and networking with local practices. For the past three years, my boss and mentor, Dr. Katheryn Conde, has been an incredible blessing. She has provided unwavering support and encouragement, both educationally and emotionally, helping me to pursue and achieve my goals.

4) If you weren't in this field, what would your alternate career be?

Growing up, I aspired to become a neurosurgeon, following my grandmother's passing after a brain tumor resection. However, after careful consideration of my priorities, I realized the importance of achieving a good work-life balance. I want to have a family one day and be actively involved in the lives of my children, friends, and loved ones. I knew that being on call all the time wouldn't align with these goals. Upon reflection, I decided to combine my interest in psychology, leading me to pursue a career in neuropsychology. Along the way, I also considered careers as a professional dancer since I have been dancing since I was 2 or a teacher since I love working with children!



Tiffany Billiter

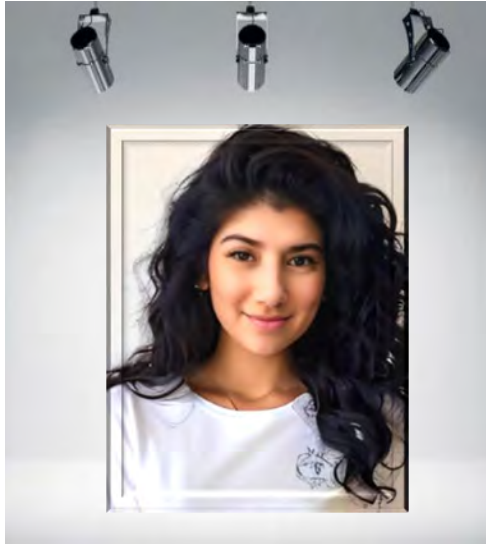
tiffany.billiter@student.chaminade.edu



5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?

I am trilingual, with Vietnamese as my first language and a minor in American Sign Language and Deaf Studies. Before pursuing my current career/educational path, I was a nationally-ranked competitive dancer and taught dance and gymnastics ages 0-18. My experience included ballet, pointe, jazz, contemporary, modern, lyrical, hip hop, and co-ed dance. Additionally, I have a three-year-old golden retriever named Oakley, who has been with me since he was six weeks old and made the move from California to Hawaii with me.

Spotlight on... Lisa Casados, Psy.D., LMHC, LPC

HPA Member and Creator of the [Hawaii'i Groups Database](#)lisacpsyd@gmail.com**1.) How/why did you first get involved in HPA, and why have you stayed a member?**

I got involved in HPA during my graduate studies at Hawaii School of Professional Psychology after our professors suggested we join to get access to trainings and resources. I stayed for the fabulous community, connection with other clinicians, and referral sources.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

I worked in school, community mental health, and private practice settings focusing mostly on children and families.

3) Tell us about your training – how did you get to where you are now?

I became a Registered Behavior Technician when I got my undergrad degree in Psychology. Then I began using Cognitive Behavior Therapy and Person Centered Therapy under Hawaii Center for Children and Families. I got trained in Parent Child Interaction Therapy (PCIT) and play therapy under Dr. Steven Choy at the Family Strengthening Center (FSC). I conducted psychological assessments for CPS cases at FSC. I completed my internship and postdoctorate at Children's Assessment Center (CAC) which is the largest child advocacy center in the nation working with victims of child sexual abuse. At the CAC, I was trained and certified in Eye Movement Desensitization Reprocessing (EMDR) therapy, conducted psychological evaluations for CPS cases, and utilized TF-CBT and play therapy for my clients. I ran parenting psychoeducation groups and trauma processing groups.

4) If you weren't in this field, what would your alternate career be?

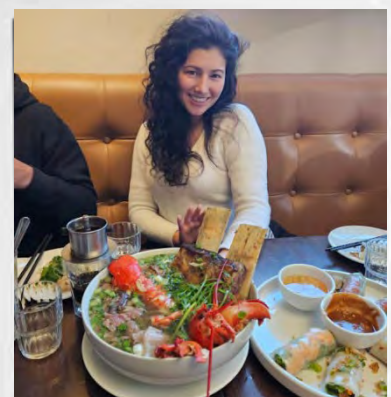
I love food so I would love to be a food blogger!

5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?

I have a cat who has been a part of my journey starting from COVID who has traveled from Hawaii to Texas to California and now back to Hawaii. She has been my rock!

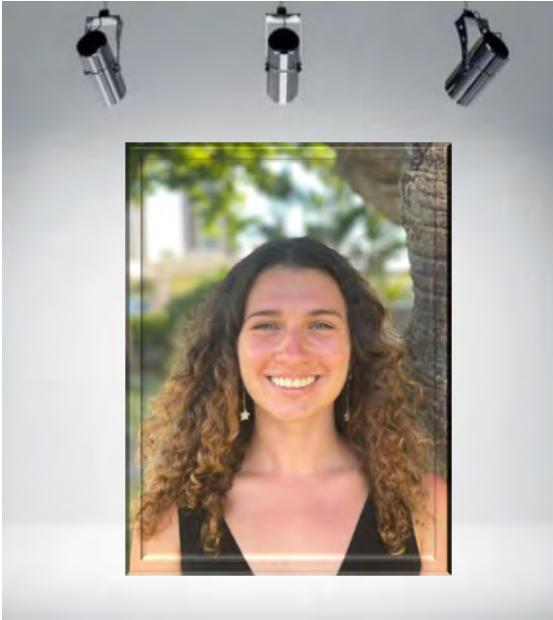
lisacpsyd@gmail.com

Lisa Casados

www.healingthroughtrauma.org

Spotlight on... Hannah Hussey

HPA Student Representative

hannahussey6@gmail.com**1.) How/why did you first get involved in HPA, and why have you stayed a member?**

I first got involved with HPA during my first year of graduate school at Hawaii Pacific University. Moving to the island and being newer to the field of psychology, I was excited to learn from and connect with others to explore and further develop my interests.

Joining HPA felt like a natural step. It gave me the chance to meet professionals and fellow students, attend some really amazing conventions, and participate in helpful trainings and grand rounds. These experiences helped me understand more about the different areas of psychology and stay updated on current trends.

I've stayed a member because HPA offers so many valuable resources and learning opportunities. Even as I've progressed in my studies, I still find new activities to engage in and have

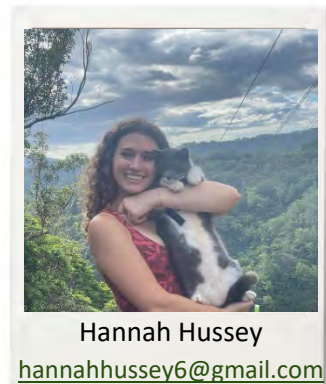
enjoyed testing my leadership skills as the HPU student representative. The supportive community and the constant opportunities for growth make HPA a meaningful part of my journey as a graduate student in psychology.

2) Tell us about your work/educational setting, clinical or research interests, service or advocacy passions, etc.

I'm currently studying Clinical Psychology at Hawai'i Pacific University, with my practicum setting at Lana'i Community Health Center on the island of Lana'i. My interests gravitate towards working with geriatric populations and rural health settings, which stems from my background growing up in a small town in Central Florida.

4) If you weren't in this field, what would your alternate career be?

If I weren't studying psychology, I'd probably be pursuing a career as a beekeeper full-time. Right now, I volunteer as a beekeeper, removing hives from people's homes for free. I've always loved bees since I was young, and now I understand how vital they are to our environment. It's rewarding work that lets me help protect bees and teach others about their importance.



Hannah Hussey

hannahussey6@gmail.com**5) What else should we know about you (e.g., fun facts, leisure interests, secret talents, family or pets)?**

A couple of fun facts about me: During my undergraduate years at Florida State University, I was in the circus. I also really enjoy riding motorcycles and was in a motorcycle club in Central Florida. In my free time, I enjoy reading, hiking, and shopping for stylish pieces that reflect my personality. At home, I have two playful kittens who bring joy to my daily life with their antics.

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Hawai'i Behavioral Health & Wellness Convention
September 19 & 20, 2024

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& Resilience
in a
Polarizing
World



Hawaiian Islands Association for
Marriage and Family Therapy



NASW HAWAII CHAPTER
National Association of Social Workers



Hawai'i
Psychological
Association
For a Healthy Hawai'i

MEMBER FEEDBACK

HPA continues to strive as an organization to solicit and consider member input. I also hope this Newsletter was helpful, entertaining, inspiring, and connecting. If you have feedback, on the newsletter or anything else, please reach out anytime to me at dr.dlogan@gmail.com

If you'd like to help with future newsletters, or just want to share your favorite parts of this one, please let me know! Member articles are always welcome! Thank you for being a valued member. You are appreciated!

♥ Diane

NEXT NEWSLETTER EDITION: OCTOBER 2024
SUBMISSION DEADLINE: FRIDAY SEPTEMBER 20, 2024





HAWAII COMMUNITY FOUNDATION

Mission Statement:

The Hawai'i Community Foundation helps people make a difference by inspiring the spirit of giving and by investing in people and solutions to benefit every island community.

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For any other questions, contact Robin Pratt at rpratt@hcf-hawaii.org or 808.245.4585



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