

**Report of the BEA Work Group on the Assessment
of Discipline Specific Knowledge**

March 2016

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Introduction

This report details the impetus, charge, product, and recommendations to the American Psychological Association's Board of Educational Affairs (BEA) from the work group on the assessment of discipline specific knowledge (hereafter referred to as the work group). The work group was convened by BEA in the spring of 2015 to build upon efforts of other groups to articulate and assess minimal qualifications for entry into a doctoral program that prepares health service psychologists (HSPs). Those efforts are described below.

HSPEC Blueprint

In 2010 the BEA discussed a request from the Council of Chairs of Training Councils (CCTC) to convene a multi-stakeholder group to identify major themes related to the preparation of health service psychologists and make recommendations for actions that would enhance HSP education and training. As a result of that request the Health Service Psychology Education Collaborative (HSPEC) was created. Members of the HSPEC represented APA, CCTC, and the Council of Graduate Departments of Psychology (COGDOP). They completed their work over the course of three years at which time they produced the Blueprint for Health Service Psychology Education and Training (HSPEC, 2013). The blueprint articulates seven recommendations related to HSP education and training. Recommendation #2 in the blueprint relates to the focus of the work group and states:

“There should be guidelines for minimal qualifications to enter doctoral programs that prepare health service psychologists (p. 415).”

The HSPEC blueprint further notes that this recommendation was not meant to establish required undergraduate coursework or a major in psychology but rather to focus on the competencies necessary for doctoral training in HSP. Once such qualifications were agreed

upon, methods to assess would need to be identified. The HSPEC blueprint suggested possible domains for consideration:

- Biological science
- Cognition (e.g., learning, language, memory, thinking)
- Diversity and culture
- Psychopathology or abnormal psychology
- Research methods (psychometrics, research design, statistics)
- Social and interpersonal processes
- At least one research experience, either a lab section connected to one of the above courses or a senior/honors thesis

In addition, HSPEC began a conversation with representatives from Educational Testing Services (ETS) about a standardized way to assess minimal qualifications. One of the suggestions that came from this discussion was that modifications to the subscales from the Psychology Subject Test of the GRE could be a viable mechanism to assess the competencies of an individual.

BEA Task Force on Prerequisites for Entry into Accredited Doctoral Psychology Programs

In the fall of 2012 the BEA approved the creation of a task force to continue the work begun by the HSPEC to identify the domains of minimal qualifications and assessment methods. However, resources to undertake the work of the task force were not available and the project was put on hold. As a result, this task force was sunsetted. In spring of 2015 BEA approved the appointment of the current work group.

Efforts by the Council of University Directors of Psychology

The Council of University Directors of Psychology (CUDCP) is a training council representing doctoral programs in clinical psychology. CUDCP had an interest in continuing to work on this recommendation from the HSPEC blueprint and when the BEA task force was not able to move forward members of CUDCP continued the dialogue with ETS about the assessment of minimal qualifications for entry to an HSP doctoral program. These efforts were collaborative as exemplified by an invitation to have a representative from APA to attend a meeting with ETS that was held in January 2014.

The APA Standards of Accreditation

At the same time as the efforts noted above were occurring, the APA Commission on Accreditation began a process to revise the requirements for program accreditation. This process culminated in 2015 with the approval of the Standards of Accreditation. An important addition to the new standards was the concept of Discipline Specific Knowledge (see Appendix A). In short, to be accredited all programs must demonstrate that they have methods in place to prepare and assess the acquisition of specific foundational or core knowledge termed as Discipline Specific Knowledge (hereafter DSK). Further, the new standards allow for programs to assess trainees' competence in the DSK domains prior to admission. Details about the content that the DSK domains entail have been drafted and submitted for comment by the public by the CoA in an implementing regulation. While a final version is pending, given the new standards will go into effect in January of 2017, the work group felt it important to provide BEA their recommendations as soon as they were ready.

Charge to the Work Group

In spring 2015 the BEA discussed and approved the creation of a work group to further the work that had been done to identify ways to assess the DSK domains. Specifically,

BEA will establish a Work Group to pursue with the Educational Testing Service (ETS) the development of a standardized assessment measure of the discipline-specific knowledge described in the new Standards of Accreditation (SoA) and the proposed IRs (implementing regulations).

In particular, the working group will recommend to, and consult with, ETS on the content, administration, norming, and interpretation of the standardized assessment. This assessment measure will probably constitute a revision of the current GRE Psychology Subject Test and/or the ETS Major Field Achievement Test in Psychology. The Work Group will accomplish its goals through multiple teleconferences and, if needed, an in-person meeting between staff and ETS.

Questions and unintended consequences to be addressed by the Work Group (and where appropriate, ETS) include:

- ◆ Would the measure be a new test or a revision of a current one?
- ◆ Would passing the test without even taking the relevant psychology course prove sufficient?
- ◆ Will the results of the test be transcriptable?
- ◆ Would the test discriminate against certain groups more so than course grades?

- ◆ Would the test impact what is taught in the undergraduate psychology curriculum?
- ◆ Does the future use of such tests lead to graduate students frequently being exempt from the first-year survey courses and thus promote premature specialization in doctoral training?

(Addressing several of these questions may also involve COA representatives at some point in the process.)

Projected Timeline: Following release of the proposed Implementation Regulations, BEA staff will contact the following groups and solicit nominations for the BEA Work Group. The members would commence virtual meetings in Summer 2015 and apprise BEA of its progress at its two annual meetings.

If ETS proves amenable to the Work Group recommendation, ETS could pilot test an examination of all the criteria areas described under the discipline-specific knowledge in the SoA. A revised, normed measure could then be made available in 2017.

Members: The Work Group will be comprised of two BEA staff (Catherine Grus, PhD, representing graduate psychology, and Robin Hailstorks, PhD, representing undergraduate psychology) and 12 members: one member from the BEA undergraduate panel; one member from the BEA graduate panel; one member from CABE; one member from the Academic Heads of Departments of Psychology; one member from APAGS; one member from the Society for the Teaching of Psychology (APA Division 2); one representative from each of the five major doctoral training councils (CUDCP, NCSPP,

counseling, school, combined/integrated); and one member from COGDOP. Eleven members are more than the ideal number, but all key undergraduate and graduate constituencies should be represented.

Overview of Work Group Process

In the late spring of 2015 the chairs of each of the groups identified in the charge received an invitation from the BEA chair to appoint a representative to the work group. BEA appointed BEA member Dr. Julie Penley as chair of the work group. The roster of membership for the work group is included in Appendix B.

The work group conducted their work via conference call and email exchanges. The work group decided to present a range of DSK assessment methods, in the form of a grid, such that programs could make decisions that best fit their needs. In addition, representatives from the group continued telephone communication with ETS regarding modifications to the scores reported from the Psychology Subject Test of the GRE. At the request of ETS, members of the work group distributed an electronic survey to gauge interest by training programs in the use of modified subscale scores from the Psychology Subject Test of the GRE to assess DSK. The work group also used the survey as an opportunity to educate their council members about the new DSK domains and the proposed new implementing regulation from CoA. In addition, presentations about the efforts of this work group were made at the 2016 mid-year training council meetings of the Council of University Directors of Clinical Psychology, Council of Directors of School Psychology Program (including representatives from the Consortium of Combined Integrated Programs in Psychology), and the Council and Counseling Psychology Training Programs. At the time of this report ETS had completed marketing research and were in the process of completing a business analysis and anticipated a final decision by the end of

March 2016. In addition, the CoA had not yet finalized the implementing regulation related to DSK. However, given the new SoAs will go into effect in January 2017 the work group finalized their report such that their recommendations could be shared with the education and training community.

Assessment of Discipline Specific Knowledge

The grid below was developed by the work group to offer programs a range of ideas on ways to assess DSK. For each assessment method there is discussion of the advantages/strengths as well as disadvantages/limitations. Recognizing that no single assessment tool will work for every department or program, the grid also includes other considerations regarding each assessment that might affect a program's decision whether to use the assessment in their admission decisions.

The options presented in the grid below consist of three standardized tests and one non-test assessment. The list is not exhaustive but represents the most promising methods to assess DSK.

Overarching Considerations

While the use of standardized assessment methods could help programs demonstrate acquisition of DSK, these methods have some limitations at the present time. While the Psychology Subject Test of the GRE provides information about an individual's achievement at the undergraduate level, proposed new subscales will address four of the six domains of DSK. The other two standardized assessments, the Major Field Test (MFT) and Area Concentration achievement Test (ACAT) were constructed to measure program outcomes. In addition, all three standardized assessments presented are norm referenced, not criterion referenced, such that

information for programs about desirable cut-off scores is not currently available. It will be up to programs to establish benchmarks that can be measured and a rationale for the scoring rubric employed. Finally, the use of assessment measures by programs may have unintended consequences. For example, a program may decide to set DSK cut-off scores as part of their admissions process that could disadvantage some applicants. While the literature is mixed, socioeconomic status has been cited as associated with poorer performance on standardized tests (Sackett, Kuncel, Arneson, Cooper & Waters, 2009). Test anxiety issues, non-traditional students and/or students who delayed grad school (lag time between undergraduate program and graduate school application), cultural or linguistic biases have also seen raised as concerns.

Grid of DSK Assessment Methods

Assessment	Advantages/strengths of the assessment itself	Disadvantages/limitations of the assessment itself	Other considerations regarding the assessment, including unintended consequences for departments or students
PSYC GRE (\$150)	<p>Standardized, uniform assessment</p> <p>Helpful for graduate admissions processes</p> <p>Adequate test of basic knowledge in psychology</p>	<p>May disadvantage specific groups in terms of graduate admissions (non-traditional students, students with a range of diversity/demographic indicators - such as racial/ethnic minority students, low SES students, etc)</p> <p>All standardized assessments are inherently limited - arbitrary cutoff points, evaluates knowledge/memory but not other important domains relevant to psychology (interpersonal functioning/sensitivity, clinical skills, research competency, etc)</p>	<p>Proposed changes (to map subscales on to APA's DSK domains) would improve the test's utility</p> <p>May not want to uniformly adopt given concerns and limitations - other avenues can be useful (portfolios, etc).</p> <p>From ETS: "The GRE Psychology</p>

		<p>Current subscales do not adequately map onto APA's DSK domains. Proposed new subscales by ETS will only map onto four of the six DSK domains (Biological Aspects of Behavior, History and Systems of Psychology, Cognitive Aspects of Behavior, Affective Aspects of Behavior). The remaining two domains (Social and Developmental Aspects of Behavior) will be reported as a single subscale score.</p>	<p>Test is designed for graduate admissions purposes and provides information about candidates' undergraduate achievement to assist graduate programs in making admissions decisions. The test assesses knowledge of subject matter emphasized in many undergraduate psychology programs as preparation for graduate study. The GRE Psychology Test is designed to spread students out across the score scale, and contains questions that are much more difficult than those on the MFT test. The GRE Psychology Test is administered in test centers around the world three times a year (in September, October, and April).</p> <p>If you want evaluate an</p>
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			<p>individual student's knowledge of undergraduate coursework in psychology, the GRE Psychology Test should be used.</p> <p>GRE norms are based on all individuals who tested in a recent three-year period. The norms data are updated annually; the data for score reporting in the 2015-16 testing year (July 1, 2015 to June 30, 2016) are based on individuals who tested between July 1, 2011, and June 30, 2014. Given the differences in the populations taking the MFT test and GRE Psychology Test the GRE norms are probably most relevant."</p>
Major Field Test (ranges from \$24-28; Reports are \$150-700 for annual institutional subscriptions)	<p>Tests updated at least every 5 years to ensure relevancy and "to maintain validity, reliability, and fairness" (taken from ETS website)</p> <p>When it is time to update an MFT form,</p>	<p>4 subscores (may be difficult to tease out specific DSK):</p> <ul style="list-style-type: none"> • Learning/cognition/memory • Sensory & Perception/physiological • Clinical/Abnormal/Personality • Developmental/Social <p>6 assessment indicators:</p>	<p>ETS also owns this assessment.</p> <p>From ETS:</p> <p>"The MFT and GRE assessments are designed and validated for</p>

	<p>ETS conducts a wide-scale curriculum survey of programs across the country to determine what should be covered in that MFT test title. ETS then assembles a committee of experts in the field to review the current test form and collaborate on the creation of the new test form. The new test form goes through an extensive process of editing and content review before it is made available for use. Total scores from different forms of the same test are made comparable through a statistical process called equating. The MFT equating process uses common questions — or an anchor block — to form a linkage between the previous test form and the new test form. Common-item equating is one of the most accurate methods of ensuring comparability of scores.</p> <p>Distributions of all undergraduate test takers' scaled scores are available each year.</p>	<ul style="list-style-type: none"> • Memory/cognition • Sensory & Perception/physiological • Developmental • Clinical/Abnormal • Social • Measurement/Methodology 	<p>different purposes and audiences.</p> <p>The MFT test is designed for program evaluation purposes, and allows undergraduate programs to compare their effectiveness to programs at similar institutions nationwide. All undergraduate students at an institution can take the MFT test, not just those who intend to pursue graduate study. The MFT test is used to determine if a cohort of students have learned what they have been taught; it is not appropriate for making decisions about individual students. The MFT test is continuously administered throughout the year on campus or via a remote proctor.</p> <p>The MFT test is nationally normed once a year. The norms group</p>
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			<p>includes all test takers who took a particular test edition throughout the life of that test edition.</p> <p>The test development process for questions on the MFT and GRE tests is similar. However, as noted above, GRE Psychology Test questions are designed to be more difficult than MFT test questions. This is because MFT questions are intended to be appropriate for all undergraduate students, whereas GRE Psychology Test questions are intended to be appropriate for students who are intending to go to graduate school in the field.</p> <p>The Assessment Indicators for MFT are reported only at the group level for institutional evaluation. Given the small number of questions in each Assessment</p>
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			Indicator, they do not have high enough reliability to report at the individual level. Subscores have a sufficient number of questions and have sufficient reliability to report at the individual level.”
ACAT (\$22.50 for undergraduate Seniors, with optional \$15 for summary score report)	<p>Nationally normed</p> <p>Easy to administer</p> <p>Available in online and paper formats</p> <p>Already has subtests that map on to 4 (possibly 5) of the 6 domains</p> <p>Publisher solicits items from end users</p> <p>Publisher says difficulty is kept consistent across alternate versions and across subtests</p> <p>According to PACAT department can choose version with 4, 6, 8, or 10 subareas, making the test quite flexible</p> <p>48 to 120 minutes to take it</p> <p>Test is adjusted biannually with major</p>	<p>Designed for curriculum assessment not individual</p> <p>No study/prep materials for students</p> <p>Detailed information about the test universe and level of questions not available</p> <p>No subtest for affective domain</p> <p>No mechanism for individuals to take/pay for test</p> <p>Point of reference is what is expected of typical undergrad psych major regardless of career plans, not grad school-bound students or masters level</p> <p>Probably smaller data set than the other standardized assessments</p>	<p>PACAT (company that owns ACAT) appears willing to work with APA/BEA on a modified or “special use” ACAT; they would need to do some work on measuring affective domain</p> <p>Publisher has some information on criterion-referenced scoring (average undergrad gets 40-45% correct).</p> <p>Subject to many of the same criticisms as the MFT and the Psyc GRE</p> <p>Items assess mostly comprehension and application, little to no analysis – probably also</p>

	content revisions every 3-4 years		true of the other tests
Non-test Assessment (e.g., portfolio)	<p>Wouldn't have to teach the broad and general classes</p> <p>Wouldn't be requiring another test</p> <p>Allow for more individual flexibility –both at the student and program level (particularly at the advanced level)</p>	<p>Transferability across institutions</p> <p>Lack of standardization across programs—if all programs could choose what “counts” there may be variability across programs.</p> <p>Adding time to evaluate syllabi</p> <p>Quite a bit of work to evaluate across all students, or applicants</p> <p>Those who come in without psych major would have to find other ways to take the course</p> <p>In many institutions, these are offered at 1xxx or 2xxx level classes, so would need to take at a higher level.</p>	<p>Still be required to take an advanced, graduate course in each area, but doesn't have to be broad and general in old language</p> <p>Would there be other ways to document competence other than a course? (would take time)</p> <p>What about schools/universities that don't assign grades (e.g. Alverno) Issue for applicant if every single program has different “artifacts” that constitute the portfolio</p> <p>Is this really a portfolio-it seems to us this is a “non-test-based” assessment</p> <p>Programs would need to establish benchmarks (behavioral descriptors) for assessment purposes and mechanisms to document to</p>

			accreditors that applicant has attained DSK
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Recommendations

The work group submits the following recommendations to BEA for consideration. The work group believes the recommendations are important to pursue but beyond their charge.

1. BEA asks members of the work group to share this report with the group they represent (as applicable) and that it be shared with CCTC.
2. Pending a final decision by ETS, BEA send formal correspondence to ETS to ensure testing dates are available to coincide with admissions deadlines, and change their marketing materials. Send formal correspondence to PACAT.
3. Programs considering the use of one or more of these options will need to develop a mechanism to ensure that documentation of the acquisition of the DSK appears on the trainees' transcript such that their qualifications are clear when the applicant submits an application for licensure.
4. BEA authorize the development of online education and training modules addressing content in the DSK domains that could be used by programs and prospective HSP trainees to develop these competencies.
5. BEA convene a task force with a similar charge to the one convened in 2012 to have a substantive conversation about what are the core knowledge areas most relevant for entry into an HSP doctoral program.
6. BEA charge staff in the APA Education Directorate with creating a web-based repository of templates and scoring rubrics for the assessment of DSK and

recommended reading lists for training programs for students who need to further develop their DSK.

7. To the extent that training programs adopt the option to assess DSK it would be helpful moving forward if criterion referenced scoring was developed.

References

- Health Service Psychology Education Collaborative. (2013). Professional psychology in health care services: A blueprint for education and training. *American Psychologist*, 68(6), 411-426. doi:10.1037/a0033265.
- Sackett, P.R., Kuncel, N.R., Arneson, J.J., Cooper, S.R., & Waters, S.D. (2009). Does socioeconomic status explain the relationship between admissions tests and post-secondary academic performance? *Psychological Bulletin*, 135, 1-11, doi 10.1037/a0013978.

Appendix A

Discipline Specific Knowledge Domains in the APA Standards of Accreditation

Standard of Accreditation:

Doctoral

Discipline-Specific Knowledge, Profession-Wide Competencies, and Learning/Curriculum

Elements Required by the Profession

1. Discipline-Specific Knowledge and Profession-Wide Competencies

Discipline-specific knowledge serves as a cornerstone for the establishment of identity in and orientation to health services psychology. Thus, all students in accredited programs should acquire a general knowledge base in the field of psychology, broadly construed, to serve as a foundation for further training in the practice of health service psychology.

- a. Discipline-specific knowledge represents the requisite core knowledge of psychology an individual must have to attain the profession-wide competencies. Programs may elect to demonstrate discipline-specific knowledge of students by:
 - i. Using student selection criteria that involve standardized assessments of a foundational knowledge base (e.g., GRE subject tests). In this case, the program must describe how the curriculum builds upon this foundational knowledge to enable students to demonstrate graduate level discipline-specific knowledge.
 - ii. Providing students with broad exposure to discipline-specific knowledge. In this case, the program is not required to demonstrate that students have specific foundational knowledge at entry but must describe how the program's curriculum enables students to demonstrate graduate-level discipline-specific knowledge.

Implementing Regulation on Discipline Specific Knowledge - DRAFT

The Commission on Accreditation expects competence in discipline-specific knowledge to serve as a cornerstone of the scientific base of health service psychology. Therefore, all students in accredited doctoral programs shall acquire a general knowledge base in the discipline of psychology, broadly construed, as a foundation for further training in health service psychology. Evidence of competence in discipline-specific knowledge must be thoroughly documented by the program.

Discipline-specific knowledge, as it is articulated in the Standards of Accreditation (Doctoral Standards, II.B.1.a):

- a) . . . represents the requisite knowledge of psychology an individual must have to attain the profession-wide competencies. Programs may elect to demonstrate discipline-specific knowledge of students by:

- i. Using student selection criteria that involve standardized assessments of a foundational knowledge base (e.g., GRE subject tests). In this case, the program must describe how the curriculum builds upon this foundational knowledge to enable students to demonstrate graduate level discipline specific knowledge. Additional coursework in advanced topics is expected.
- ii. Providing students with broad exposure to discipline-specific knowledge. In this case, the program is not required to demonstrate that students have specific foundational knowledge at entry, but must describe how the program's curriculum enables students to demonstrate graduate-level discipline-specific knowledge.

For purposes of this Implementing Regulation, there are two categories of discipline specific knowledge.

The first category of discipline-specific knowledge can be acquired at either the upper undergraduate or entry graduate level and must result in substantial understanding and competence in:

- History and Systems of Psychology, including the origins and development of major ideas in the discipline of psychology. The history of a subdiscipline of psychology, such as clinical, counseling, or school psychology, or the history of interventions or assessments do not, by themselves, fulfill this category.

And in the following five additional basic content areas:

- Affective Aspects of Behavior, including topics such as affect, mood, and emotion. Psychopathology and mood disorders do not by themselves fulfill this category.
- Biological Aspects of Behavior, including multiple biological underpinnings of behavior, such as neural, physiological, anatomical, and genetic aspects of behavior. Although neuropsychological assessment and psychopharmacology can be included in this category, they do not, by themselves, fulfill this category.
- Cognitive Aspects of Behavior, including topics such as learning, memory, thought processes, and decision-making. Cognitive testing and cognitive therapy do not, by themselves, fulfill this category.
- Social Aspects of Behavior, including topics such as group processes, attributions, discrimination, and attitudes. Individual and cultural diversity and group or family therapy, by themselves, do not fulfill this category.
- Developmental Aspects of Behavior Across the Lifespan, including transitions, growth, and development across an individual's life. Curricula limited to one developmental period is not sufficient.

Because portions of the training in this first category of discipline-specific knowledge may occur prior to matriculation, programs bear a significant responsibility for documenting the quality/rigor, currency, standardization, and fairness of that training. The program is responsible for demonstrating that the strategies used to evaluate student knowledge are fair and do not discriminate on bases irrelevant to success in the program. That is, for each of the first category of discipline-specific knowledge areas a comprehensive vetting process must include systematic methods that assess knowledge in a non-discriminatory fashion.

The second category of discipline-specific knowledge can be acquired only at the graduate level and must result in substantial understanding and competence in:

- Research Methods, including topics such as strengths, limitations, interpretation, and technical aspects of rigorous case study, correlational, descriptive, and experimental research designs, measurement techniques, sampling, replication, theory testing, qualitative methods, meta-analysis, and quasi-experimentation.
- Quantitative Methods, including topics such as mathematical modeling and statistical analysis of psychological data, statistical description and inference, univariate and multivariate analysis, null-hypothesis testing and its alternatives, power, and estimation.
- Psychometrics, including topics such as theory and techniques of psychological measurement, scale and inventory construction, reliability, validity, evaluation of measurement quality, classical and contemporary measurement theory, and standardization.
- Advanced Integrative Knowledge of Discipline-Specific Content Areas, includes in-depth graduate-level understanding and competence that entails integration of multiple basic discipline-specific content areas (viz., affective, biological, cognitive, social, and developmental aspects of behavior across the lifespan) into courses and professional/training activities.

In-depth graduate-level understanding and competence. Accredited programs should clearly document how the curriculum plan ensures graduate-level understanding and competence. The CoA will look for certain pieces of evidence in evaluating graduate level, including students' exposure to a curriculum plan that utilizes primary source materials (including original empirical work that represents the current state of the area), emphasizes critical thinking and communication at an advanced level, and facilitates integration of knowledge in the basic areas with the program's substantive area(s) of practice. For example, if the program uses a course to satisfy an aspect of discipline-specific knowledge, it may be appropriate in some instances to use textbooks that target undergraduate audiences as a minor part of the course (e.g., as foundational reading to introduce the subject area to students) if the majority of the course involves graduate level readings. Programs must also document that students have substantial opportunities to acquire and demonstrate graduate level understanding and competence, as defined above, through courses, research, practica, or other essential learning experiences. If a program elects to use students' prior education or experiences to partially satisfy discipline-specific knowledge requirements, the program must also document how each student demonstrates graduate-level understanding and competence in the relevant content areas.

The program must also document procedures for ensuring the curriculum plan in these content areas are developed, provided, and evaluated by faculty who are well qualified in the content area as specified in IR C-xx.

Appendix B

Roster of Membership on the Work Group on the Assessment of Discipline Specific Knowledge

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