



Graduate Student Newsletter

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Editors: Valeria Martinez-Kaigi, M.S. & Allison Carroll, M.S.

SOCIETY FOR HEALTH PSYCHOLOGY

We have a lot of exciting things to share with you in this newsletter! First, we hear from our membership committee (pg. 2). Then, students responded to our calls for Diversity Commentaries (pg. 3) and Student Datablitz submissions (pgs. 4-5). We also highlight an outstanding health psychology student (pg. 6).

We love hearing from you! Please continue to submit your Diversity Commentaries, Student Datablitz submissions, and nominations for outstanding students and mentors to div38studentreps@gmail.com.

- Val and Allison

DIVERSITY HIGHLIGHT: Considering racial differences under a new presidency

Michelle Ferrer, M.A., Yeshiva University

Discussion about diversity in our nation has become increasingly fused with politics. My patients, Lydia*, an undocumented Mexican immigrant, fears she will be deported, and Jasmine*, a black African American woman, worries that her 2-year-old son might one day be targeted by police.

Racial discrimination and related stressors, as we know from bio-psycho-social models, can impact the physical and mental health of minority group members. As racial tensions continue to increase in our communities due to political contention, it is possible that our ethnically diverse patients may face intensified physical and mental health issues. It is important we conceptualize our culturally diverse patients in this way and not negate the significant impact current news can have on their wellbeing. As psychologists who are trained in the intersection of psychology and health, we should not only consider these issues but also become familiar with community resources, such as legal and language support. Providing relevant support during this critical time can perhaps ameliorate growing worries. Above all, our patients should leave our offices feeling hopeful, as our support can help positively shape their views of a torn nation.

**Names have been changed to protect the identity of individuals.*

Exemplary Graduate Students and Mentors in Health Psychology

Nominate yourself, a friend, or a mentor! We will select 1-2 outstanding health psychology graduate student(s) and/or mentors to highlight in each newsletter.

Students: Tell us about recent awards won, degrees conferred, or any other significant accomplishments.

Mentors: Acknowledge outstanding mentors for his/her leadership and dedication to students.

Please send any and all nominations to div38studentreps@gmail.com.

Inside this issue

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MEET YOUR SfHP STUDENT ADVISORY COUNCIL

SfHP SAC Membership Committee: Fostering a Community of Students

Natasha DePesa, M.S., University of Central Florida

My name is Natasha DePesa and I am a Clinical Psychology Ph.D. candidate at the University of Central Florida and current predoctoral intern at the James A. Haley VA in Tampa, Florida.

I have been a member of SfHP for nearly four years now, and I consider it to be my professional home. Among the many benefits of SfHP membership, I have particularly enjoyed having the opportunity to meet and network with other students. It is great to learn about what other trainees are doing in their training programs, and to build bridges with those trainees with similar interests. Soon, we will enter the workforce together and will greatly influence the field of health psychology, especially through communication and collaboration.

I am very excited to be a part of the Student Membership Committee. One of my primary goals in this position is to help foster a sense of community among student members. Look out for email threads on the student listserv and invitations to social events at upcoming conferences!



Student Advisory Council Members:

Council Chair: Jenny Warnick, University of Florida

Chair-elect: KayLoni Olson, Alpert Medical School Brown University

Membership Committee

- ◆ Marissa Alert, University of Miami
- ◆ Natasha DePesa, University of Central Florida
- ◆ Hannah Holmes, Wayne State University

Communication Committee

- ◆ Allison Carroll, Northwestern University Feinberg School of Medicine
- ◆ Valeria Martinez-Kaigi, University of North Texas/National Institute of Mental Health

Diversity Committee

- ◆ Angela Gutierrez, San Diego State University/UC San Diego
- ◆ Matt Jasinski, Wayne State University



DIVERSITY HIGHLIGHT

Brought to you by the SfHP SAC Diversity Committee

The opinions expressed herein are those of the student authors, and do not necessarily reflect the opinions of the Student Advisory Council or the Society for Health Psychology.

Today, To Share One's Immigration Story Is a Revolutionary Act

Liliana Campos, University of San Francisco

There are approximately 40 million immigrants in the U.S. (1). It is estimated that about 11 million undocumented Americans have made the U.S. their permanent home (2). Anti-immigrant policies across the U.S. have prevented undocumented individuals from seeking employment, obtaining a valid driver's license, acquiring health insurance, and pursuing higher education (3). Data on trauma among undocumented communities suggest that pre and post migration events are predictors of high levels of stress, depression, and anxiety comorbidity (4). Once settled in the U.S., ongoing trauma related to fears of deportation, family separation, isolation, acculturation stressors, and discrimination are distressing daily encounters.

Personally speaking, I was accepted into several doctoral programs in Clinical Psychology and was not able to enroll due to my undocumented legal status. This was challenging, but after much persistence and community support, I was finally able to enroll in the Psy.D. program at The University of San Francisco which is a claimed sanctuary location for undocumented students. While I fear I may not have the opportunity to complete my program, as a developing clinician and student of liberation psychology, I am committed to furthering discussions about the importance of training service providers to better support immigrant and undocumented individuals. As we begin to witness the impact of such a racially charged election in a society where sharing one's immigration story is taboo and unsafe, I encourage you to consider explicitly identifying yourselves as allies to our immigrant and undocumented patients and to identify a liaison that can support you when questions arise about undocumented individuals.

Increasing Diversity in Doctoral Training Programs

Kierra M. Landrum, M.Ed., Radford University

A lack of racial diversity in training programs is a prominent barrier in the field of health psychology. Ethnic minority students are admitted into training programs that are primarily composed of Caucasian individuals. The lack of diversity in doctoral training programs results in minimal opportunity for mentorship and psychosocial support among minority students and faculty (1). Mentorship and psychosocial support have been identified as key components in retaining students of color (2). Unfortunately, the lack of mentorship, emotional, and professional support expands into the workforce as ethnic minority students enter clinical practice and find themselves without peers, leaders, and mentors of minority status.

Minority students offer a unique set of characteristics to the field of health psychology especially in rural practice because minority health psychologists provide a sense of familiarity and understanding to challenges such as micro and macroaggressions faced by minorities in rural areas. Research indicates that clients often identify more with therapists who look like them (3), and a diverse selection of psychologists will likely reduce early termination and increase success of therapy amidst minority clients. Training programs should work to increase the level of diversity among their faculty and ensure that practicum and internship sites can provide support and guidance to minority students.

References

1. Ruiz, J. M. et al. (2013). *J Lat Psychol*, 1 (3), 149–154.
2. Delgado, R. (2012). *Colum L Rev*, 112, 1888–1915.
3. Marrow, H.B. (2012). *Ethn Racial Stud*, 35, 72–87.
4. Gonzales, R.G., et al. (2013). *Am Behav Sci*, 57 (8), 1174–1199.

References

1. Cabral, R.R. & Smith, T.B. (2011). *J Couns Psychol*, 58(4), 537-554.
2. Chan, A.W. et al. (2015). *J Couns Psychol*, 62(4), 592-607.
3. Rogers, M.R. & Molina, L.E. (2006). *Am Psychol*, 61, 143-156.



STUDENT DATABLITZ #1

Diabetes Prevention in U.S. Hispanic Adults: A Systematic Review of Culturally Tailored Interventions

*Authors: Jessica L. McCurley, Angela P. Gutierrez, and Linda C. Gallo
SDSU/UC San Diego Joint Doctoral Program*

Abstract from the article published in
American Journal of Preventive Medicine

Context: Type 2 diabetes, prediabetes, and metabolic syndrome are highly prevalent in Hispanic individuals in the U.S. Cultural adaptations of traditional lifestyle interventions have been recommended to better reach this high-risk population. This systematic review examined the effectiveness of diabetes prevention programs for Hispanics in lowering risk for Type 2 diabetes, as evidenced by a reduction in weight or improvement in glucose regulation.

Evidence acquisition: PubMed/MEDLINE, Cochrane Central Register of Controlled Trials, Web of Science, and PsycINFO were searched from database inception to June 2016 for studies that evaluated diabetes prevention trials targeting U.S. Hispanic populations. Twelve publications met criteria for inclusion.

Evidence synthesis: Interventions varied substantially in length, rigor, and tailoring strategies. Five of 12 studies were RCTs. Eight studies included entirely or largely (>70%) female samples. All studies were delivered in Spanish and took place in community settings. Nine studies reported significant reductions in weight, and two in glucose regulation, post-intervention or when compared with controls. Effect sizes were small to moderate, study quality was moderate, and attrition was high in most trials. Interventions with the largest effect sizes included one or more of the following adaptations: literacy modification, Hispanic foods/recipes, cultural diabetes beliefs, family/friend participation, structured community input, and innovative experiential learning.

Conclusions: Culturally tailored lifestyle interventions for diabetes prevention appear to be modestly effective in reducing risk for diabetes in Hispanics in the U.S. More studies are needed that utilize randomized controlled designs, recruit Hispanic men, report intervention content and tailoring strategies systematically, and publish participant evaluation and feedback.



STUDENT DATABLITZ #2

Ideal Weight: A Possible Indicator of Eating Disordered Attitudes and Behaviors in Pediatric Patients with Type I Diabetes

Authors: Colleen Stiles-Shields and Tina Drossos

The University of Chicago Medicine and Northwestern University

Abstract accepted for the
Society of Pediatric Psychology Annual Conference

Objective: In pediatric patients with Type I Diabetes (T1DM), unspecified and subthreshold eating disorders (ED) are prevalent, associated with poor quality of life (QOL), and more common than formal ED diagnoses (e.g., anorexia nervosa). ED screening questions often overlap with normative Diabetes management behaviors, and are therefore not fully effective. Consequently, alternative methods for assessing EDs are needed for this population, particularly brief ones to facilitate employment during routine appointments. One potential and concise assessment is to calculate the difference between current and patient-reported ideal weights. The purpose of this study was to examine relationships between weight differences and ED attitudes and behaviors, and health-related QOL for pediatric patients with T1DM.

Methods: Thirty-eight children and adolescents ($M = 12.9 \pm 3.4$; 60.5% male) diagnosed with T1DM were assessed at routine Endocrinology appointments. Bivariate correlations explored the relationships between weight differences, and the Pediatric Quality of Life Diabetes Module (PedsQL), the Eating Attitudes Test (EAT-26), and glycated haemoglobin (HbA1c).

Results: The differences in patients' current and ideal weights ranged from -23 to 53 pounds ($M = 5.8 \pm 13.3$). Weight differences significantly correlated with PedsQL Diabetes Problems ($r = -.53, p = .001$), EAT-26 Bulimia and Food Preoccupation ($r = .71, p < .001$), and the EAT-26 Total Score ($r = .50, p = .005$). There was no evidence to suggest correlations with HbA1c levels or other measures of health-related QOL ($ps > .06$).

Conclusions: Greater discrepancy between current and ideal weights is associated with higher endorsements of ED attitudes and behaviors, and lower diabetes-related QOL. The present findings provide preliminary support that comparing current and ideal weights could serve as a brief and accessible method to ascertain possible risk for EDs, as well as lower QOL in pediatric patients with T1DM.

Relevance: Highlights a brief assessment, employable across disciplines treating pediatric patients with T1DM.



GRADUATE STUDENT SPOTLIGHT

By: Allison Carroll and Valeria Martinez

Meet Jessica (Jessee) Dietch, M.S.

Jessee is earning two doctorate degrees, one in Clinical Health Psychology (with an emphasis in sleep psychology) and the other in Educational Psychology (with an emphasis in research, methods, and statistics) at University of North Texas (UNT). Jessee's research broadly examines cognitive behavioral treatments for sleep disorders and sleep measurement. She was awarded a grant by the Foundation for Rehabilitation Psychology to conduct her dissertation, where she is comparing the accuracy of three sleep assessment tools to a gold standard assessment. Jessee says her decision to pursue a second PhD is to gain further expertise to support her research interests in psychometrics and measure development:



"Our Educational Psychology Department had some fantastic statistics classes that I initially took for fun. One professor there (Robin Henson) really got me excited about stats and showed me a new way of thinking about things. From there, considering my research interest in psychometrics and measure development, it just made sense to pursue more specialization in that area--I really want to bring more awareness to the use of measurement and statistics within the field of sleep research. So you could say it was something of an accident, but so far it has been amazing!"

Although Jessee attests that serendipity is the reason she is earning an additional PhD, I think we can agree that anyone who 'takes a stats class for fun' is destined to earn a PhD in statistics. Jessee is also incredibly active in many professional societies, including our very own Society for Health Psychology, where she has served on several committees including the Social Media Committee, Student Advisory Council, and as the Division 38 Representative for the Student Representative Network in the American Psychological Association of Graduate Students (APAGS) Division. She has also served as a student board member for the Society of Behavioral Sleep Medicine, and currently holds positions on their Accreditation and Social Media committees. In addition, she recently helped create a Sleep Special Interest Group within the Society for Behavioral Medicine and serves as the student liaison. This year, she will receive an award for Excellence in Research from the society at their annual conference. In her words, Jessee loves Health Psychology because:

"...it applies to everyone, in one way or another. Everyone will encounter a health change that happens to them—or that they want to happen to them...Sleep psychology is especially rewarding because helping someone make a relatively small behavior change can hugely impact their health, happiness, and quality of life."

As far as applying health psychology in her personal life, she enjoys her vegetable garden and engages in regular physical activity—including as a member of the North Texas Fighting Unicorns, a roller derby travel team!



CALL TO PARTICIPATE

Have thoughts on issues of diversity in health psychology?

The SfHP Student Advisory Council is interested in providing a *voice* for students on the topic of diversity within the field of health psychology. We are inviting students to submit short commentaries about diversity topics, which will be posted on the SfHP website and in the newsletter. Commentaries may address topics including but not limited to:

- Nationwide issues such as health disparities
- Research regarding diversity in health psychology
- Personal experiences related to diversity within health psychology
- Increasing diversity within the field of health psychology
- Barriers to diversity in the field
- Ideas for how SfHP can better address diversity topics

Please send submissions to div38studentreps@gmail.com.

Student Datablitz!

Student Research in Health Psychology

In each newsletter we will continue to highlight health psychology research conducted by students. All you need to do is submit the abstract from one of your recent first-authored health psychology publications or published conference abstracts. The Student Advisory Council will select a few abstracts to be published in the next newsletter.

Please send submissions to div38studentreps@gmail.com.

Are you attending the 38th Annual Meeting of the Society of Behavioral Medicine?

Don't miss the Student Council's breakfast roundtable session!

Title: "*Mentors Matter: Providing Guidance for Success*"

Date/time: Thursday, March 30, 7:00am-7:45am PST

Location: Conference Room Sapphire P at the Hilton San Diego Bayfront

Interested attendees must fill out an interests survey:

<https://goo.gl/forms/KT28rhUHoxKHBvQW2>

DID YOU KNOW?

SfHP is on Social Media!

Being honest, how often do you use social media during the day? Perhaps as a distraction from your hectic student life? Well why not contribute to your field via social media! The SfHP social media plat could really use your likes, posts, comments, replies etc. via Twitter, LinkedIn, Facebook, and YouTube. Plus it's a fast and fun way to keep up to date on pertinent health psych topics.

Keep a lookout for SfHP's social media challenges and use the hashtag:

#ThisIsHealthPsych

[Twitter](#)
[Facebook](#)
[LinkedIn](#)
[YouTube](#)

Check out the SfHP webpage!
<https://societyforhealthpsychology.org/>



FUNDING/TRAINING OPPORTUNITIES

SfHP Training Course: Integrated Primary Care—An Introductory Curriculum

<https://societyforhealthpsychology.org/training/integrated-primary-care-psychology/>

Are you excited about becoming a health psychologist in a primary care setting? The SfHP offers the following FREE training modules during the 2016-2017 academic year.

Curriculum Examples:

- Cultural/diversity considerations in integrated primary care
- Leadership roles for psychologists in integrated primary care
- Addressing neuropsychological concerns in integrated primary care
- Role of the psychologist in addressing obesity in primary care
- Working in pediatric integrated primary care

CBT for Depression and Suicidality—Graduate Student Workshop

<https://www.beckinstitute.org/event/cbt-depression-suicidality-graduate-student-workshop-core-1/#toggle-id-1>

Are you eager to build upon your cognitive behavioral therapy training and education? Well why not learn from Dr. Aaron Beck himself! **The Beck Institute** holds a Graduate Student Workshop every summer, titled “*CBT for Depression and Suicidality*.” The workshop is primarily taught by Dr. Judith Beck, with a question and answer and role-play session with Dr. Aaron Beck. Do not miss out on the opportunity to learn CBT from Drs. Beck!

Workshop details: July 24-26, 2017 in Philadelphia, PA

Competitive scholarships are available: <https://www.beckinstitute.org/get-training/scholarships/student-scholarship-competition/>

F31 Ruth L. Kirschstein Predoctoral Individual National Research Service Award (NRSA)

<https://researchtraining.nih.gov/programs/fellowships/F31>

The purpose of the F31 program is “to enable promising predoctoral students with potential to develop into a productive, independent research scientists, to obtain mentored research training while conducting dissertation research.”

Application Deadlines: April, August, December

National Institutes of Health — Graduate Partnerships Program

<https://www.training.nih.gov/programs/gpp>

Do you like research? Have you ever wondered what it would be like to conduct research at the NIH campus? NIH gives doctoral students the opportunity to conduct their dissertation research directly on campus. Consider applying to the NIH-Graduate Partnerships Program (GPP).