



Spring | 2020

Missouri psychologist

ADVANCING PSYCHOLOGY AS A SCIENCE, AS A PROFESSION, AND AS A MEANS OF PROMOTING HUMAN WELFARE IN MISSOURI

Dangerous Times, A Bit of History and Why You Are Important

A Few Words From The CEO

I want to personally thank everyone who came to the ADA workshop in Kansas City and those who attended our first virtual online fundraising workshop event (a Trust workshop with the very gracious Oklahoma Psychological Association). Your support was and is very important this year.

Don't fool yourself. MOPA is not a gift. It is the product of dedicated efforts by you, the staff, and our board. It works because you choose to invest in it. The money we earned from the events will help us retain our staff and our lobbyist in a year when we had to cancel our conference due to COVID-19.

We have faced difficulties like this before. Several years ago, when I first was involved with MOPA, not even on the board at that point (I am a past president of

MOPA), we faced a great financial problem that threatened the association's chances for any future success.

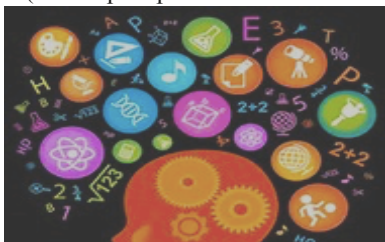
Under the excellent guidance of Deborah Schlitt and with the help of Mark Bradford, we had to release our lobbyist for a far less expensive and inexperienced replacement. Eventually, our excellent full-time executive director left and was replaced by the half-time services of an association management company. That relationship became problematic and our financial problems continued. For a period, the board itself managed MOPA, but could not reverse the trend.

It was at that point things began to turn around. I was hired as executive director. We applied and received an emergency operations grant from APA, a grant they no

longer offer. Most critically, we received help from a parade of strong volunteers. Mary Weatherford organized our first money-making conference. Keisha Ross would follow-up on this the following year with another conference that was in the green. She also started and headed up what was our first successful committee at the time, the diversity committee. We started to put together some legislative wins. One of my jobs was to make sure that our new lobbyist was educated as to what psychology was and what were our biggest concerns. We had numerous members who agreed to take whole days off to testify at the legislature on MOPA's behalf – Mark Bradford, Paul Korte, Mary Weatherford, Amber Richardson, Ken Baum, Dawn Huber, John Howell, and many more. We turned to

APA again and received advice and money in the form of at least two legislative grants. This group was followed up by more excellent testifiers – like David Lutz, Adam Andreassen, Curt Mattson, and Brittany Pratt. I also testified numerous times.

We secured the H&B codes essential to integrated care, blocked LPC's from being able to legally diagnose, gained a two-year limit on civil liability (previously only enjoyed by physicians), and assessment reimbursement under Medicaid was doubled. We restructured our licensure to help interns complete their education more efficiently and opened up the state to interstate telehealth with PSYPACT. We helped guarantee that insurance companies would cover eating disorders and



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developmental disorders beyond just Autism Spectrum Disorder. We had a series of great legislative chairs – Mark Bradford, Adam Andreassen, and Paul Korte. I had the privilege of being legislative chair before Mark. Our legislative work has been widely recognized by APA. It led to two Heisman award winners (myself and Paul Korte), a psychologist of the year award for Ken Baum, and I received APA's outstanding staff member award. More impressively, MOPA won APA's outstanding state association award for 2019.

As our experience grew, we opened the door and began to work with our state regulatory groups. We were named a stakeholder by Medicaid and Adam Andreassen and I were able to secure Medicaid funding for our interns. We advised Medicaid on how to make sure their documentation requirements were mental health parity compliant. We stopped LPC's from being reimbursed for testing by a department within the Missouri Division of Social Services. With Dawn Huber's help, we stepped up for students. We blocked the EPPP2 which would have made Missouri one of the most difficult states in the country in which to be licensed. We secured the right of graduate students to use telehealth. We helped pass a bill that allows homeless adolescents to have the right to receive mental health services. While working with the state of Illinois, we were able to gain the right of Missourians, particularly those in the St. Louis and Columbia area to work with Illinois patients who had received services in Missouri prior to the COVID-19 crisis. We believe hundreds, if not thousands of patients have or will receive help because of

this. We also had some federal wins as well. A group of Springfield psychologists, that included our new president Curt Mattson, Mark Bradford, and myself helped convince Representative Billy Long to be a sponsor for the Medicare mental access bill. This bill places psychologists under the physician definition. We recently worked at the invitation of APA to successfully encourage Missouri Congressman Jason Smith to advocate for the continued availability of phone telehealth.

We have developed over the years some excellent new committees: a diversity committee, a committee devoted to integrated care, a neuropsychology specialty committee, and a committee devoted to evidence-based practice. We now have regular communication with other groups, who like us are concerned with behavioral health. We have partnered at times with the community behavioral health centers, APA, the National Association of Social Workers – Missouri chapter, United States Association of Social Workers, and the Missouri Mental Health Counselors Association. Adam Andreassen successfully encouraged a number of community mental health centers to help sponsor our conference, funds that may be lost in the future due to COVID-19. We have become more influential in APA. Ken was (until recently) on APA's highly respected finance committee. He is also a past council member and was instrumental in passing a bill that guaranteed all state associations a place on council. I was a board member for CESPPA, the association of executive directors, and later named to APA's prestigious Advocacy

Coordinating Committee. Paul Korte was named committee chair for Division 31's integrated care committee. He is also our current council member. I was also named to the important Director of Professional Affairs group that addresses insurance and other advocacy issues for APA. The Directors of Professional Affairs are an astounding source of information and we are only one of three small associations to have access to their wisdom and knowledge. These are great honors, important national positions, and have been great sources of information for our association and membership.

We have over the years been able to offer excellent ethics and professional practice advice thanks to Michael Ross. More recently, we have also had the assistance of Jeffrey Barnett. We have had an increasingly higher quality newsletter and regularly publish a biweekly news and advice update called *Progress Notes* for our membership that has been surprisingly popular. In recent times it has been centered on how to successfully offer telehealth services. But we have so much more to do. Andrew Menatti and Summer Lane have helped start a neuropsychology committee and has shown interest in helping us start an insurance committee. Paul Korte and Dawn Huber are working on paperwork to allow us to establish a c-3 non-profit. This will allow us to apply for grants in the future. We are making the transition in providing virtual CE programs, a move necessitated by COVID-19. We are working with MO HealthNet to see that the neuropsychology codes will be available under Medicaid and that we will continue to be able to do phone telehealth

under both Medicaid and Medicare. Commercial insurance companies generally follow along.

All of what I have just described is at risk. Sustaining this is a challenge. Few people realize but we have only a half-time CEO/Executive Director and a quarter time support staff. Our staff receives no vacation or health insurance. Both provide their own office. Both work for under their market value. Staff raises are rare. There were no staff raises even after MOPA was named APA's most outstanding state association of the year. Our lobbyist has found herself increasingly challenged financially. With COVID-19 impacting us, our situation is even more perilous.

That is why we need your help. To survive we need you to pay your dues on time and to attend our events. If you want to really help strengthen us, offer to be part of one of our committees. All together it is a simple formula, but it will be the difference between the organization being successful and not. Please do not leave this task to others. Make it what you do for something that you believe in. Our membership has been our greatest strength and we need it to step-up now if we are to continue forward. Contact me at admin@mopaonline.org if you would like to comment on this article or be more involved in MOPA. If we don't look after it, no one will. One recent bright spot has been that our Evidence-Based Practice Committee will hold a half-day virtual workshop tentatively in July – hope to see you there!

My best,

Chuck

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Evidenced Based Practice

Using Disaster Response Interventions to Address Mental Health Concerns During the COVID-19 Pandemic

We continue to collectively face the stress and uncertainty brought on by the COVID-19 pandemic. Indeed, many of us have experienced a variety of stressors in response to this pandemic, from social isolation to job loss and financial stress. Tragically, thousands of people have experienced these and other stressors while simultaneously grieving the loss of loved ones to this deadly virus. Taken together then, it is not surprising that the pandemic is contributing to a “mental health crisis” in the United States (American Psychological Association, 2020). Given the ongoing nature of the pandemic, it can be difficult for mental health providers to determine how to most effectively support individuals and communities actively trying to cope with the upheaval brought on by the pandemic. Psychologists may, however, be able to draw important lessons from disaster response models to guide our response to this burgeoning mental health crisis.

Many disaster response interventions, like Psychological First Aid (PFA) and Skills for Psychological Recovery (SPR), are designed to help individuals manage secondary stressors associated with the disaster, such as loss of social support, practical needs, and emotional distress – stressors that are all relevant in the midst of the current pandemic. PFA is a brief, modular intervention developed by the National Center for PTSD and the National Child Traumatic Stress Network that aims to provide individuals with practical assistance and

support depending on their immediate needs (Brymer et al., 2006). In this way, PFA may look different between individuals depending on their most pressing concerns. Core actions taught in PFA include: gathering information on immediate needs and concerns, offering practical assistance to address concerns, providing information on stress reactions and coping skills, and building connections with social supports. While PFA is most relevant to the needs of individuals and families in the first few days and weeks after the onset of a mass disaster, its companion intervention, SPR, may be appropriate to individuals in the weeks and months beyond the onset of a disaster.

Like PFA, SPR is an evidence-informed modular intervention aiming to help survivors of disaster acquire or bolster various skills to manage distress and cope with stress and adversity (Berkowitz et al., 2010). After gathering information and determining areas for prioritizing assistance, providers can work with individuals to build problem-solving skills, promote engagement in positive activities, manage stress reactions, promote helpful thinking, and build healthy social connections. The introduction or reinforcement of such skills may be particularly useful while working with individuals affected during this pandemic, as the effects are ongoing, and uncertainties related to projected timelines for reopening remain constant. Furthermore, SPR has been adapted for work specifically with acutely bereaved individuals

(Williams & Rheingold, 2020). With the significant number of lives claimed by COVID-19, this specially tailored version may be particularly useful to providers working with families grieving the death of a loved one to COVID-19.

Advice for Practitioners. In adapting interventions like PFA and SPR for work with families affected by the COVID-19 pandemic, consider the following basic principles:

Work collaboratively with patients to identify their most urgent needs and concerns. While many individuals will endorse emotional distress associated with the pandemic, patients may prefer to focus on other secondary stressors and losses, such as problem solving financial stress. For some individuals, focusing on these secondary stressors and losses will be enough to create conditions that allow for natural recovery and adaptive coping.

Although stay in place orders have lifted in many areas, many individuals remain in varying levels of social isolation. Additionally, there are chances these order may be reinstated if the number of cases in areas climb again. Helping individuals find creative ways to remain connected with their loved ones or find new avenues where they may be able to receive social support may be critical for their well-being and adjustment during this time. Promoting individuals’ engagement in positive activities during this time is also important. Due to the many obstacles people may face because of stay at home restrictions, working with patients to brainstorm alternative enjoyable

activities or problem solve modifications to such activities can empower people to find creative ways to remain engaged with things that are personally meaningful and relevant for them.

This pandemic may be the first significant stressor experienced by some people, but for many others, the stress of this pandemic will be experienced through the lens of other historical traumas. Regardless, it is likely that individuals may need assistance learning to manage new or heightened stress reactions they are experiencing. Free online trainings in PFA and SPR are available from the National Child Traumatic Stress Network’s Learning Center at <https://learn.nctsn.org/course/index.php?categoryid=11> Note: PFA and SPR materials are available in Spanish versions. These modules are also adaptable for work with children.

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- JOAH WILLIAMS, PhD
MADELINE HARDT, MA

This is What's On My Mind

Words From A Diversity Committee Member

Systemic racist structures that have been put in place and staunchly safeguarded to protect traditional wealth and prosperity while simultaneously perpetuating scrutiny, suspicion, disdain, disrespect and disregard for equal access to our alleged inalienable rights as Americans.

To conduct our everyday lives in the pursuit of happiness as the dominant society without pernicious repercussions such as: bombings, cross burnings, redlining, gentrification, gerrymandering, ubiquitous taxation on low and middle income families, or legislation that systematically protects the 1-2 percent of wealth while systemically inhibiting the growth and development of communities and neighborhoods with the unmitigated gaul to become a captain of it's own destiny aka Black Wall Street. To create for oneself a unified collective consciousness for a demand on redistribution of

wealth and resources on all levels which includes but not limited to: access to quality healthcare, quality education, fair trade agreements, safe environments, affordable housing, wages that reflect cost of living, equality, justice, and that all lives matter beyond the argument of abortion. When being born any color other than the European standard of beauty becomes disproportionately problematic to the fragility of white consciousness (read the book), "Houston we have a problem." Therefore, we must continue to dismantle the systemic oppressive structures from an economic, educational, social, cultural, political, spiritual and psychological frameworks.

Cognitive dissonance of these ideological and sociological frameworks continuously bombards the human psyche with these internalized retraumatizing events which utilizes inherent violence and brutality to sustain intentional marginalization

as a way of life! American systems are NOT BROKEN. Never have been. Systems were strategically and consciously constructed to form this more perfect union; and every time Black people respond from an emotional place of post traumatic slave syndrome we further invite genocide, homicide, as well as suicide into these nefarious constructs of only being 3/5's of a human being. Imagine that?

Living in under sieged communities coupled with historical trauma traversing within our collective consciousness throughout the diaspora creates opportunities for chronic disparity. As a result, we must therefore engage in the tools we have according to the 1964 and 1965 civil rights and voting rights act...Vote, become actively involved in the political system. Stay focused. Know your representatives and question them; does your politician have an inclusive uplifting plan that is geared toward economic mobility and

workforce stability? Is there a negotiable plan for inclusion, justice and equality for all American citizens?

Black non-Hispanic American citizens comprise 13% of the population as of the 2010 census which equates to approximately 42 million Black Americans, which further equates to approximately \$1.5 trillion dollars annually to the overall economic Black buying power. Remember UNCF "A mind is a terrible thing to waste." Which is more dangerous...a gun or a transformative thought? Bullets kill but the power of a transformative thought lives on forever. Think and Grow Rich (read the book)!

This is what's on my mind....what's on your mind?

-Dr. DeZ

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Focus on Diversity

Juneteenth - "On June 19th, 1865, enslaved African-Americans in Galveston, Texas were told they were free. Now, 155 years later, people in cities and towns across the U.S. continue to mark the occasion with celebrations" - The New York Times

<https://www.nytimes.com/article/juneteenth-day-celebration.html>

Pride Month - "Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) Pride Month is currently celebrated each year in the month of June to honor the 1969 Stonewall Uprising in Manhattan. The Stonewall Uprising was a tipping point for the Gay Liberation Movement in the United States" - Library of Congress <https://www.loc.gov/lgbt-pride-month/about/>

National Caribbean-American Heritage Month - "During National Caribbean-American Heritage Month, we celebrate the rich history and vibrant culture of the more than 4 million Americans with origins in the Caribbean" - Whitehouse.gov <https://www.whitehouse.gov/presidential-actions/proclamation-national-caribbean-american-heritage-month-2020/>

APA Council Spring 2020

The APA Council of Representatives met on February 27th to March 1st with a host of items up for discussion framed by the 2019 APA Strategic Plan. The APA Board of Directors and several existing APA committees and workgroups requested votes to approve several APA resolutions. Council approved updates to resolutions on Opposing Discriminatory Laws, Policies and Practices aimed at LGBTQ+ Persons; resolution on Sexual Orientation, Gender Identity, Parents and Their Children; and resolution on Supporting Sexual/Gender Diverse Children and Adolescents in Schools. These new resolutions primarily update the references of new research that has been published since the previous resolutions and update any language or terminology that has changed since the publication of the previous resolution. An update was also approved for the existing resolution on Violent Video Games. There has been controversy over the

report as there is concern of over interpretation of results. Council approved language indicating that the weak association between video games and violence should not be over-interpreted and recognize that there are many other factors that influence aggression and violence. The current research is not strong enough to exclusively attribute aggression to violent video games.

Council also reviewed and approved two new guidelines related to the education, training, and practice of Psychological Assessment in Health Service Psychology. Both are aimed at improving utilization and implementation of assessment.

There was a lot of time devoted to the process of policy making and the role of Council within APA as there is an ongoing discussion about association governance. It is a struggle to determine the best use of time in relation to business items and aspirational goals.

The primary focus was on the Good Governance Project/delegation of authority which has been in place for the last six years. This was implemented to give the APA Board authority regarding CEO oversight, finances, and membership dues. Council ultimately voted to continue the delegation of authority with regular review every three years.

APA CEO, Dr. Arthur Evans, also highlighted the work that APA is doing to disseminate psychological science to other groups. There were multiple discussions of APA's recent work in partnership with Farm Aid to address farmer suicide and mental health in the current agricultural environment of low commodity prices and distress of natural disasters to farmland. He also noted work with the National PTA regarding the psychological science and childhood distress around active shooting drills occurring in schools across the country. Lastly, Dr. Evans and Dr.

Janet Swim, an expert in climate, discussed the impact climate change has on psychological well-being with a planned response to climate change from APA.

APA continues to work toward the advancement of psychology and educating the public on the good work we do in science and practice. Cultural diversity and inclusion is an ongoing priority as demonstrated by multiple presentations and discussions on the topic with the hope that these issues remain the lenses in which we view our current and upcoming business items in the APA Council of Representatives. The Council will next meet at the APA Annual Convention in August. This years convention will be virtual, APA members are welcome to attend!

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JOIN US FOR A MOPA WEBINAR (1 CE CREDIT)

The purpose of the event is to assist the attendees in identifying the impact of race and racial discrimination on physical and mental health outcomes. Particularly as it relates to transmission and treatment of COVID-19 among racial/ethnic communities.

Learning Objectives

Gain an understanding of factors contributing to some individuals being more susceptible to COVID-19

Identify populations that have poor health outcomes

Describe the ways that race and racism impact communities

Explore ways that anti-racist knowledge and behaviors can be implemented

Identify ways that the community can be supportive of anti-racist efforts

When: Tuesday June 30

Time: 6:30pm – 7:30pm

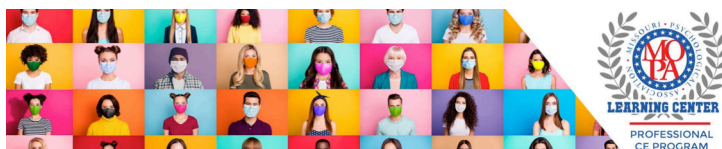
Online via ZOOM

Registration Rates:

FREE: MOPA Members

FREE: Non-MOPA Members NOT seeking CE Credit

\$25: Non-MOPA Members seeking CE Credit



COVID-19 and Racism: How do we recover as a society?

- Jackie Gold, M.Ed, Human Capital Leader/Community Organizer
- Keisha Ross, Ph.D Staff Psychologist, St. Louis VA
- Denise Hooks-Anderson, MD, assistant professor in the Department of Family and Community Medicine at Saint Louis University and Medical Editor of The Saint Louis American newspaper
- Consuelo H. Wilkins, MD, Executive Director, Meharry-Vanderbilt Alliance, Professor of Medicine, Vanderbilt University Medical Center Associate Professor of Medicine and Vice President for Health Equity at Vanderbilt University Medical Center.
- Moderator - Jameca Woody Cooper, PhD, Licensed Psychologist and Expert on Urban Mental Health, Board Member, Missouri Psychological Association.

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*Want to spread the word? Download this PDF flyer
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[MOPA COVID-RACISM FLYER](#)

Member Spotlight

Lauren McMiller, PsyD

Profiling a MOPA Member to Highlight the Best Psychologists in Missouri

How long have you been a psychologist and where did you go to graduate school?

I have been a psychologist for about one year. I attended graduate school at Adler University in Chicago, IL.

Where do you currently work?

I work in Kansas City, MO at one of Truman Medical Centers' family medicine clinics.

What other interests do you have?

I thoroughly enjoy listening to jazz, discovering jazz influenced songs, reading, and traveling.

When did you know you wanted to be a psychologist?

I knew I wanted to be a psychologist when I was in high school. I wanted to understand why individuals engage in behaviors that are often viewed as atypical or problematic.

What is something about yourself we might be surprised to hear?

Readers might be surprised to hear that I am not a dog (or cat) person.

What is your preferred type of treatment and why?

My preferred type of treatment is CBT because it is evidence-based, pragmatic, and successfully addresses and treats a wide variety of presenting concerns, especially within medical settings.

Do you specialize in any particular area in psychology?

I currently work as an integrated care psychologist/behavioral health consultant. Within this role, I assist patients in utilizing CBT techniques for the management of medical conditions such as hypertension, diabetes, and obesity. I also help patients manage behavioral health concerns such as anxiety, depression, stress, and interpersonal challenges.

If you could meet any historical figure, who would you choose and why?

I would love to meet Dr. Inez Beverly Prosser (1897-1934). She was the first African American female psychologist. As such, she paved the way for African American female psychologists who came after her, including me. I am inspired by her legacy, resilience, and cultural impact.

What is your favorite place you have traveled?

My favorite place I have traveled is The Dominican Republic. The culture, food, and island are amazing.

What are two things you like about being a psychologist?

I like contributing toward and witnessing patients' progress and growth throughout the journey of positive change. I also like helping professionals of other disciplines understand the value and impact of mental health on individuals' lives, functioning, and physical health.



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WE WANT TO HEAR FROM YOU!
 RECENTLY WIN AN AWARD?
 PUBLISH AN ARTICLE?
 HAVE ANY GOOD NEWS TO SHARE?
 WE WANT TO HEAR ABOUT IT!
 SEND INFORMATION TO:
 MOPA EDITOR
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 AND YOU COULD BE IN THE NEXT
 NEWSLETTER!

Guidelines for articles submitted to the Missouri Psychologist

1. Articles should be no longer than 750 words with up to 8 references.
2. Longer articles should be discussed with the Editor prior to submission.
3. Please submit only original articles, not articles that have been previously published.
4. The editor may edit articles to fit the format of the newsletter. The submitting author(s) will be informed prior to publication and will be sent a copy of any edited article for approval or withdrawal.
5. Submitted articles may be reviewed by board members to determine appropriateness for publication and/or length.

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