PSYCHOLOGY IN INTELLECTUAL AND DEVELOPMENTAL DISABILITIES/ AUTISM SPECTRUM DISORDER

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FROM THE PRESIDENT'S DESK

Camie Neece, PhD
Loma Linda University

As my term as the President of Division 33 draws to a close, I reflect on what a busy, productive, and rewarding year it has been! Below I summarize some of our key initiatives over the last few months, and highlight several exciting aspects of the Division 33 Program at our upcoming APA Annual Convention! A huge thank you to Drs. Rachel Fenning and Micah Mazurek for putting together an absolutely fabulous program this year. Hope to see many of you in DC.

One of our key initiatives over the past year has been to consider and implement ways to increase the involvement of professionals with diverse backgrounds and viewpoints in Division 33 leadership, Division 33 membership, and our field at large. Toward this end, this year the Division 33 Diversity, Equity, & Inclusivity (DEI) has been very busy. Under the leadership of Drs. Gazi Azad and Maryellen McClain, the DEI committee sponsored the inaugural Diversifying the Autism Research Workforce Conference that was held on June 1st and 2nd in Washington, D.C. As a part of this conference, 17 talented, early-stage investigators from underrepresented minority (URM) backgrounds attended a two-day meeting where they met with 15 seasoned mentors and funders from federal agencies and foundations who provided strategic and targeted support to help advance the careers of these investigators. Conference events included a speed mentoring session, a funding panel, a mock scientific review meeting, and opportunities to discuss the unique challenges and possible solutions to diversifying the autism research workforce. Additionally, the Division 33 DEI Committee is leading the effort in hosting a cross-divisional DEI social hour at the APA Convention that will be held on **Thursday August 3rd from 6-7pm at the Marriott Marquis**. This event will bring together 12 Divisions along with the APA Equity, Diversity, and Inclusion office. It should be a lot of fun and a great way to network around DEI initiatives. We hope many Division 33 members attend.

Another key initiative of Division 33 has been to increase our involvement with other divisions and broader APA initiatives. This Spring, Division 33 was asked to review APA'S Health Advisory on Social Media Use in Adolescence, specifically to ensure that the document was in line with the best interests and needs of neurodiverse youth. Division 33 members with expertise in this area worked quickly to provide feedback. This health advisory has received significant media attention and Division 33 was grateful to be a part of the process. To access the health advisory please click here. Additionally, Division 33 has had increasing involvement in the APA Committee for Disability Issues in Psychology (CDIP) and collaborated with Meggin van der Hilst, Director of Disability Inclusion & Accessibility at APA to improve disability inclusion and accessibility across the organization.

Looking toward the convention, we are excited to announce our 2023 Division 33 award winners. **Dr. Ben Handen** will receive the 2023 Edgar A Doll Award. This prestigious award is a "career award that honors an individual for their substantial contributions to the understanding of IDD/ASD throughout their career." The Division 33 Jacobson Award for Critical Thinking will be presented to **Dr. Anna Esbensen**. This esteemed award is presented to "an individual who has made meritorious contributions to the field of IDD/ASD in an area related to behavioral psychology, evidence-based practice, dual diagnosis or public policy." Division 33 will also present two student research awards to **Rachel Meyer** from Boston University and **Carrie Faaberg** from the University of Wyoming. Additionally, in April 2023 Division 33 presented a student research award at the Gatlinburg Conference to **Rachel Gordon** from Case Western University.

Following the convention in August, we will also have two Division 33 members starting elected roles on the Division 33 Executive Committee. **Dr. Marc Tasse** will be coming onboard as the Division 33 President-Elect Designate. He will work with Dr. Micah Mazurek in developing the

FROM THE PRESIDENT'S DESK

Division 33 program for the 2024 Annual Convention. Additionally, **Dr. Liz Laugeson** will be serving for the next two years as Member-at-Large. We are thrilled to have Marc and Liz serving in these elected positions and are thankful for their continued dedication and service to Division 33.

Finally, just a few key Division 33 activities I want to highlight at the Annual Meeting August 3rd through 5th:

Div. 33 Business Meeting and Social Hour: Friday August 4th, 5-7pm

Cross-Divisional DEI Social:
Thursday August 4th 6-7pm

Div. 33 Early Career Psychologist Mentoring Event:
Friday August 4th, 12pm

Award Talks:

- 2023 Edgar A. Doll Award Invited Address (Dr. Ben Handen): Saturday August 5th, 9-10am
- Jacobson Award for Critical Thinking Invited Address (Dr. Anna Esbensen): Friday August 4th, 10-11am
- 2022 Edgar A. Doll Award Invited Address (Dr. Alice Carter): Thursday August 4th 1-2pm

Lastly, I want to congratulate **Dr. Andrea Witwer who has been appointed to serve on the APA Committee on Disability Issues in Psychology (CDIP).** Her term will begin on January 1st, 2024 through December 31st, 2026. This is a very big accomplishment, and we are thrilled to have her represent Division 33 at this national level.

Thank you for the honor to serve as your President this year and hope to see you in DC in August!

Camie Neece, Ph.D.
Division 33 President

A special THANK YOU to our Founding Sponsor and Jacobson Award Sponsor, WPS!

See page 13 for more information.

IDD/ASD Training Program Highlight

Yale Child Study Center
Internship and Postdoctoral Fellowship
Autism and Developmental Disabilities Track

Cara Keifer, PhD
Assistant Professor
Clinical Child Psychology

The Yale Child Study Center (YCSC) offers a unique two-year integrated training program including an APA accredited internship and a postdoctoral fellowship in clinical psychology. The fellowship program includes four tracks: 1) **Autism and Developmental Disabilities**, 2) Early Childhood, 2) Pediatric Psychology, and 3) Children and Trauma. Trainees are immersed in specialized track-specific training experiences along with a core generalist training program.

The Autism Program at the YCSC is one of the leading clinical and research sites in the country. The Autism and Developmental Disabilities track offers comprehensive training in the evaluation of autism and co-occurring disorders from early childhood through adulthood. During both years of the fellowship, the YCSC's Developmental Disabilities Clinic is the primary placement of the Autism and Developmental Disabilities track which provides comprehensive and multidisciplinary evaluations. The multidisciplinary team is composed of a supervising psychologist, speech-language pathologist, and a psychiatric provider. As a member of the team, fellows provide developmental and cognitive evaluations, administer the Autism Diagnostic Observation Schedule-Second Edition (ADOS-2), consult with other providers, provide feedback to clients, and prepare assessment reports. With regard to intervention, fellows on the Autism and Developmental Disabilities track co-lead a therapeutic group for autistic teens during the internship year. Additional elective opportunities are available to provide cognitive behavioral therapy to autistic youth and to lead parent or sibling support groups in the outpatient clinic.

While deepening their training within a specialty area, fellows also participate in a core generalist training program. Psychology trainees conduct comprehensive psychological evaluations for children referred to the clinic for a variety of presenting problems. Fellows also provide evidence-based treatment services including child, parent, and/or family therapy. Children referred to the clinic come from diverse backgrounds, the majority of which with public medical insurance. In the postdoctoral year, the Autism and Developmental Disabilities fellow is placed at the Children's Psychiatric Inpatient Service in Yale-New Haven Hospital which serves children ages 4-14 with severe psychiatric and developmental difficulties. They also provide consultation and crisis evaluations in the Pediatric Emergency Department.

In addition to the clinical placements, the YCSC Psychology Training Program emphasizes a developmental approach to training and education through didactics and supervision. The didactic curriculum, like the clinical placements, emphasizes public service to local underserved populations. The YCSC is a multidisciplinary department that combines the science and practice of psychology. There are extensive opportunities for fellows to become involved in ongoing research at the YCSC.

As a recent graduate of the program myself, I have found the training experiences and relationships I have built over the two-year fellowship to be invaluable to my development as a psychologist. I am particularly grateful that I was able to continue to hone and deepen my expertise in evaluating developmental disabilities while maintaining my generalist skillset in evaluation and treatment. The clinical supervision and mentorship I received has prepared me to transition from a trainee to a well-rounded independent psychologist.

Applications to the YCSC Internship and Postdoctoral Fellowship program are accepted through the AAPI Online electronic matching system which may be accessed at https://www.appic.org/. Additional information about the fellowship can be found in our brochure. The director of the fellowship, Michele Goyette-Ewing, PhD, is happy to answer any questions about the program at michele.goyette-ewing@yale.edu.

Division 33 Student Research Award

April 2023 Gatlinburg Conference

From Facilitator to Partner: Examining Effective Intervention Strategies in a Pretend Play Intervention for School-Aged Children with Prader-Willi Syndrome

Rachel Gordon, Morgan Hyun, Ellen Doernberg, Sandra W. Russ, and Anastasia Dimitropoulos

Rachel Gordon is a third-year clinical psychology PhD candidate at Case Western Reserve University.

Children with developmental disabilities may differentially respond to certain adult cues to facilitate play behaviors such as emotional expression, idea generation, and appropriate versus inappropriate behaviors. Current interventions for children with intellectual and developmental disabilities utilize strategies of child-led engagement, prompting, narrated summary or reflection, and modeling to teach and improve child skill development. Interventions for pretend play hold promise for building upon related child emotional, behavioral, and cognitive skills (Lifter, Mason, & Barton 2011; Barton and Wolery, 2008). Only one prior study has examined the effectiveness of interventionist strategies on child pretend play skills (Hoffmann, 2016); however, the role of similar strategies for ameliorating pretend play in children with developmental disabilities is unclear. The Play-Based Remote Enrichment to ENhance Development (PRETEND) program has been established as a feasible and efficacious mode of improving creativity, emotional expression, and cognitive flexibility via pretend play in children with Prader-Willi Syndrome (PWS; Dimitropoulos et al., 2017, 2021). The present study examined the effectiveness of different PRETEND interventionist strategies on facilitating child pretend play behaviors that may contribute to socioemotional growth.

Participants included 22 children with PWS ages 6-12 who participated in the PRETEND Program. One recorded intervention session per child was transcribed and coded for type, level, and frequency of interventionist facilitation strategies and child play behaviors. By pairing each interventionist strategy with the immediately following child behavior, it was possible to discern the frequency of how often certain intervention techniques led to child imaginative, affective, and organizational pretend play skills. Pearson's correlations also examined the overall relationships between interventionist strategies and child pretend play behaviors during an entire intervention session.

Interventionist strategies of reflecting/summarizing, followed by modeling, most often led to immediately following child pretend play engagement (81.92% and 75.30% of the time, respectively). Modeling was also correlated with pretend play engagement ($r = .053$, $p = .028$). These patterns held for specific pretend play skills of child idea generation, organization in play, and animation. Child non-play behaviors were most often preceded by questioning, followed by prompting (34.57% and 24.60% of the time, respectively). However, unique patterns emerged when examining child affect expression via pretend play, which appeared more reliant on explicit facilitator prompts.

This work represents a potential mode of identifying mechanisms of change in pretend play interventions that support socioemotional development, by measuring moment-to-moment child responses to different interventionist strategies. Results suggest that subtle, nondirective intervention strategies such as summarization, reflection, and modeling of target behaviors may most effectively elicit pretend play skills in children with PWS. Findings also suggest that more directive strategies, such as questioning and prompting, may be potentially intrusive or detrimental rather than helpful in encouraging child play skills. However, prompts for emotions may be more effective for eliciting child affect expression, potentially due to social-cognitive difficulties inherent in PWS. Overall, children with developmental differences may benefit from adults who engage in pretend play as a partner, rather than direct the play, to help the child stay on-task and learn target behaviors that contribute to socioemotional growth. Insights on strengthening future efforts to support social-cognitive skills through pretend play in special populations are discussed.

Division 33 Student Interview

Discussion on Intersectionality

Interview conducted by:
Ben VanHook, George Mason University
Jacquelyn Moffitt, University of Miami

AJ Locashio, Founding Member, Executive Navigator & Symbiotic CEO of Umbrella Alliance

1. How would you define intersectionality? What does intersectionality mean to you and why is it important to consider when working with or interacting with autistic individuals?

We are each complex beings with unique, yet interconnected, social identities that afford us advantages and disadvantages. This intersectionality must be taken into consideration in our relationships—with Self, others, our community, and any environment in which we interact. Autism is just one of many intersections that people experience. We often hear, "if you met one autistic person, you have met one autistic person." In other words, we are all unique individuals with our own minds and experiences that influence our words, actions, and behaviors. Intersectionality includes and accepts all of the experiences of a person. When you do this, you are truly able to create an environment that not only feels safe to that person, but it is safe and supports their success in ways that they define. Intersectionality is a concept that helps us understand, accept, and be respectful of individuals' multiple intersecting identities and how those identities have influenced both "who" and "how" they are at any given time depending on the context.

In working with and interacting with other autistics, viewing the world through an intersectional lens allows me to be curious about and respond to others rather than being judgmental and reactive. Because I am also autistic, it helps me step back and examine reasons for times when I am judgmental and reactive and to address the internal and external stimuli that contribute to that behavior.

2. How aware do you feel society is of intersectionality and its impact on autistic individuals?

Some members of society are aware and others are not. Some people have never heard the term. Others have heard it and don't know what it means. Some of those people are curious and find out. Others let it pass by and may or may not move to understand it later. Another group of people use the term regularly but only have a vague understanding of the meaning and haven't internalized it into their values and actions throughout their lives. And then there are those who have a full understanding of what intersectionality means as well as understanding the importance of recognizing the effect of multiple intersecting identities on themselves, other individuals, and society as a whole.

3. How has intersectionality impacted your life?

I am honestly not sure how to answer this question in any way that would be respectful of word limits or other people's time. However, I can tell you that my understanding of intersectionality has had a massive impact on how I understand myself and my interactions with others as well as how I understand others and their interactions with me or between each other.

Division 33 Student Interview

This understanding and self-awareness helps me to identify and address my own biases (which still surface and need to be explored in some situations) as well as understand and be less negatively affected by the actions of others. It has significantly impacted, in a positive way, my wellness and how I address stressful situations, especially those that have to do with justice and the treatment of me as well as other human beings.

4. How has intersectionality made your experience as an autistic individual/caregiver of autistic person unique?

I suppose the best answer for that is that it hasn't exactly. My experience of autism is only unique because of the interaction between my autism alongside my other intersecting identities. With additional identities or without any of my identities, my experience of autism could be very different.

5. In what ways can we, as a society, better recognize the impact of intersectionality and work to support autistic individuals who experience various intersectional identities?

The feel good response is that we can be kind to others and value their experiences even if they are different from our own. And that is true, recognizing the impact of intersectionality can help us do this, but it is nowhere near enough. We must look at the big picture here and recognize that multiple intersecting identities within marginalized communities negatively impacts the wellness of individuals. Autistics already experience extremely high (75% or higher) levels of economic insecurity due to a lack of access to resources including informed practices in education, healthcare, employment, and social protections. We have high unemployment rates, even amongst those with college degrees, and we are less likely to have positive social interactions within our community which contributes to feelings of isolation and of being unsafe. Autistic individuals who are also Black, members of the LGBTQ+ community, disabled, or who experience other marginalized identities have dramatically less access to and possibility for economic security. This understanding must be at the forefront of any decision making that impacts autistic people. And, by the way, if you are working with people at all, your decision making impacts autistic people.

6. What would you want clinicians to know before working with people who have intersecting identities?

It is okay to not be an expert on everything and everyone. Center your practice on the individual, not yourself or your academic title. Listen to the individual and give them agency in their care. Work with them in their care instead of placing yourself in a position of highest authority on their care. Take the time to help your clients self-advocate if they are not already able to do so. Provide them with the tools and support to be able to self-advocate for the care that is best for them. Listen to them when they do and take action on their behalf based on their wants and needs rather than your own.
If at any point, you are not able to do the above, ask someone who is informed and able to support you so that you can.

7. Do you have anything else you want to share?

As you learn more about intersectionality yourself, you will experience grief as you identify and uncover your own biases—we ALL have them. Do not do this work alone. Having a support system is crucial to being able to move through the powerful emotions that we have as we become fully self-aware and able to center our work on others instead of on ourselves.

And, if you have already done this work, do it some more. We all have room to grow. We all experience privilege in some ways and oppression in others. Do not let your experience of oppression make you think that you understand that of others. We can always learn from others and we will never know everything or be perfect in any way.

Being an expert doesn't mean you are not human and mistakes are part of our humanity. You will make mistakes that may harm others. When you do, work through it with self-compassion, ask for support, grow from it, and authentically make the necessary amends.

Division 33 Student Interview

KD Harris, M.A., Doctoral Candidate, California State Polytechnic University (Pomona); Co-Founder and Executive Director of the Social Impact Non-Profit, Let's Talk LD

1. How would you define intersectionality? What does intersectionality mean to you and why is it important to consider when working with or interacting with autistic individuals?

As a critical scholar, I believe that it is important to seek understanding of complex frameworks directly from the source; in the case of Intersectionality, the appropriate source is Dr. Kimberlé Crenshaw. Dr. Crenshaw is a leading civil rights activist and professor (Columbia University and the University of California at Los Angeles). She is one of the principal legal scholars who developed a framework for understanding how societal and legal structures can be inherently racist. That framework, Critical Race Theory (CRT), is an effective tool for interrogating and deepening understanding of the impact of structural inequality.

Intersectionality grew out of the CRT framework and is anchored in Black feminist theory and antiracist thought. In response to the limited scope in which courts were applying discrimination law, Dr. Crenshaw developed the Intersectionality theoretical framework as a means of examining how to appropriately identify and remediate race and sex discrimination in legal cases involving Black women (Crenshaw, 1989). Specifically, Intersectionality was a means of understanding how Black women as a class were multiply-burdened by racism and sexism. As noted by Crenshaw (1989), "the intersectional experience [of Black women] is greater than the sum of racism and sexism" (140). I would encourage your readers to read Dr. Crenshaw's seminal work, *Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics*.

2. How aware do you feel society is of intersectionality and its impact on autistic individuals?

If I am completely honest, my guess is that most people have no more than a superficial understanding of this important framework. Even Crenshaw concedes this point. Attempts to apply this complex legal theory are often misguided. When all is said and done, I believe that we must approach our understanding of this consequential legal concept in two ways: as it is theorized and as it is practiced, considered through the lens of power dynamics. As a theory, Intersectionality provides us with a lens for framing discussions and research that examine discrimination and structural inequality. Intersectionality can also guide practices that are designed to identify and mitigate the impacts of discrimination and structural inequality. In a wonderful article in Vox (5/28/19), Crenshaw discusses "identity hierarchies". These hierarchies are based on how traits such as gender, race, and gender identity are valued by society in general, and by norms established by the group possessing the most power more specifically.

I will respond to the second part of your question by way of an example. White, able-bodied, heterosexual men enjoy intersectional privilege. Let us say we want to examine the discrimination that may be experienced by a Black, Autistic, female who is bisexual. It is important to focus the lens on how power dynamics position this individual against the intersectional privilege embodied by white able-bodied, heterosexual men. Applying an intersectional lens would offer a framework for interrogating how the lived experiences of the individual in our example might be specifically shaped and multiply-burdened by racism, ableism, sexism, and homophobia. Dis/ability advocates and advocates can use Intersectionality as a tool that can help us understand that being Autistic is not a monolith. Effective equity and advocacy work requires the application of an intersectional lens to understand how multiple sources of oppression are shaped by intersecting social identities, and vice versa.

Division 33 Student Interview

3. How has intersectionality impacted your life?

I am a middle-aged, Black, cisgender woman with acquired physical dis/abilities, who was born in the American South. My parents were born into racial segregation in this country. Intersectionality and Critical Race Theory are powerful frameworks for understanding the contours of the discrimination I have experienced, both personally and professionally. As a dis/ability activist and advocate, I recognize how important an understanding of Intersectionality can be when trying to appreciate the impact of the oppression faced by those within the community that I serve, who may have different overlapping social identities. I recognize how critically important conversations about identity markers are to equity work.

4. How has intersectionality made your experience as an autistic individual/caregiver of autistic person unique?

As the parents of two multi-racial Autistic (adult) children, my husband and I recognized the importance of creating opportunities for our children, across all critical stages of their development, to explore the wholeness of who they are. Those opportunities were punctuated by many family conversations where we explored the values, rich histories, and traditions that are so important to our family. As parents we were intentional in our efforts to deepen our children's understanding (in age-appropriate ways) of how identity markers might shape their lived experiences because of the existence of structural inequality in the United States. My husband and I knew that ableism, racism, and sexism are baked into institutions. With that said, we also made sure that our children developed the skills to internalize affirming counternarratives as a means of confronting societal narratives designed to diminish their personhood. We also understood that it continues to be especially important for our children to have opportunities to access counterspaces where deficit-oriented (ableist, sexist, racist) thought is challenged.

5. In what ways can we, as a society, better recognize the impact of intersectionality and work to support autistic individuals who experience various intersectional identities?

It is my personal belief that you can neither responsibly nor effectively support Autistic individuals, or any neurodivergent person for that matter, if you do not understand the ways in which structural inequality can shape the lived experiences of people with multiply-marginalized identities. It is also important to not just focus on inclusion, but most importantly create spaces where Autistic people can feel a sense of belonging. It is important to be aware of the existence of "identity hierarchies".

6. What would you want clinicians to know before working with people who have intersecting identities?

Intersectionality is a powerful tool for becoming aware of one's own privilege and creating opportunities for people who have intersecting identities to explore who they are. Most importantly, it is important to understand how systems of oppression can convey disadvantages, limitations, or disapproval that are compounded for people with multiply-marginalized identities. Clinicians must appreciate that racial trauma and other forms of harm are exacerbated by a failure to fully understand the impact that systems of oppression can have on vulnerable populations.

7. Do you have anything else you want to share?

Do no harm. This will require that we all recognize the ways in which we may be complicit in sustaining systems of oppression. As stated earlier, identities are not monolithic. It is important for clinicians and other allies to take the time to discover how identity markers shape the lived experiences of multiply-marginalized people. It is also important to ensure that multiply-marginalized people are provided with opportunities to be the tellers of their own stories and to serve as researchers and as subjects in scholarly conversations and research studies. This will deepen a collective understanding of the process of identity formation within multiply-marginalized groups.

Division 33 Student Research Award

August 2023 APA Convention

Help-Seeking Barriers for Ethnic Minority Caregivers Accessing Autism Interventions: A Systematic Review

Amani Khalil, Niamh Christie, Jane Yatcilla, and Xiang Zhou

Amani Khalil is a counseling psychology PhD candidate at Purdue University and an intern at Nationwide Children's Hospital Child Development Center.

Caregivers play an important role in early help-seeking and intervention for children with Autism Spectrum Disorder (ASD), thus providing one critical means to address the racial disparity identified in the ASD literature (Bejarano-Martín et al., 2020). A recent national survey study indicated that White and racial-ethnic minority caregivers of children with autism (CCA) reported no differences regarding the child's treatment needs based on the number and type of ASD symptoms or insurance coverage (Zeleke et al., 2019). In contrast, racial-ethnic minority CCA were less likely to contact a physician or healthcare professionals about their concerns and more likely to delay their contact to have their child evaluated (Zeleke et al., 2019). However, little evidence exists to explain why such a gap exists in the help-seeking behaviors between White and racial-ethnic minority CCA.

To address this gap in knowledge, we conducted a systematic literature review identifying articles that have studied barriers in help-seeking for CCA. A broad literature search across four major databases was conducted (i.e., PubMed, PsycINFO, Education Resources Information Center, and Child Development and Adolescent Studies). The coding team identified a total of 17 articles that focused on barriers to autism intervention access among racial-ethnic minority families. A thematic analysis was used to analyze data across the studies.

In our findings, we identified four common help-seeking barriers including: structural barriers, provider competence, ASD literacy, and cultural stigma.

(1) Structural Healthcare barriers describe the logistic and language barriers racial-ethnic minority CCA encounter in accessing ASD services (thirteen studies), with two subthemes labeled as accessibility and language barriers.
(2) Provider competence is defined as parents' concerns regarding incompetent services deterring them from seeking help. We further identified three subthemes within provider competence—culturally competent diagnosis, perceived discrimination, and trust in the provider.
(3) ASD literacy refers to racial-ethnic minority families' knowledge of autism and typical child development, as well as when, where, and how to access autism-related services.
(4) Cultural stigma refers to negative cultural attitudes regarding developmental disabilities (12 studies). This was the most frequently reported theme across articles included in the systematic review.

Collectively these studies demonstrate how cultural stigma towards autism increase isolation from cultural communities.

Division 33
Spotlight on Self-Advocates

Katie Sanford is a Clinical Research Coordinator (CRC) at Nationwide Children's Hospital Child Development Center.

My work has included screening for candidates in Autism and Mental Health research, as well as studying the effects of ADHD medications on children with both ASD and ADHD. I was previously screening for patients for our Behavioral Health Genomics Study, a Pilot that aimed to study the likelihood of inheriting Bipolar Disorder/Schizophrenia, Autism, or the risk of suicidal thoughts in children/adolescents of families with histories of Bipolar Disorder/Schizophrenia. I am currently working with Johnny Dudley, Logan Amon, Dr. Anita Naranayan & Dr. Maria Streng on AWARE (formerly PCORIADHD), and while we are just beginning to take off in the research process, we are in the process of figuring out our method of recruitment. I am also an Autistic Self-Advocate, who was diagnosed in my childhood (but I officially learned about my ASD diagnosis when I was ten).

I am interested in Self-Advocacy because I believe we need more Autistic voices advocating the pathways for ASD Research. While well-intentioned, many research endeavors and "cures" are based in flawed methodologies and do more harm than good, such as using bleach to "cure" ASD. On the more mainstream front, while Applied Behavior Analysis by itself is not bad when it comes to teaching life skills in Autistic kids, I believe we need serious reforms when it comes to the practice's more questionable methods. For example, unless it's as a last resort for Self-Injurious Behaviors, I am fully against using electric shocks as a means of compliance. In addition, I would love for people who want to enter the field of ABA to be highly experienced in implementation, so children in their care are not solely exposed to rote methods such as Discrete Trial Training (DTT) or being made to superficially mimic their peers without understanding the purpose of these tasks. Lastly, I would also like to see ABA providers provide teachings on how to advocate for oneself, and methods to protect from Sensory overload, as I feel these are underrated social skills for an Autistic individual to thrive in a world not equipped for them.

As far as career goals, I am interested in pursuing a Master's in Psychology Research. As far as what branch of Research I am planning to go for, I am currently undecided, but my end goal is to become a PI. I originally wanted to pursue a career in educational research, but I realized I am not confident enough to stand my ground in the face of obstinate parents, teachers, and school administrators on what is best for student learning. In addition, tying into my personal philosophy on Autistic people in research, I also believe we need more Autistic leaders in Autism research, or in the very least, at least one Autistic person in a leadership research position. I think the concerns of the Actually Autistic community can be a useful moderator in pushing for ethics in studies, as well as curbing overly ambitious researchers from becoming too radical in pushing for treatments that can be considered risky.

Division 33 Student Research Award

August 2023 APA Convention

The Influence of Culture on Stigma and Self-Blame Experienced by Parents of Autistic Youth

Rachel Meyer, Shumin Guan, Suma Suswaram, Jenna Eilenberg, John Wilson, Wenyan Feng, Andrea Chu, and Kristin Long

Rachel Meyer is a graduate student and research assistant at the Boston University School of Public Health.

Cultural beliefs (e.g., beliefs that a child's autism is the result of parents' sins) influence stigma experienced by parents of autistic individuals. Autism-related stigma can lead to parent self-blame, which can adversely impact parenting behaviors and youth outcomes. The current study aims to examine cross-cultural differences in autism-related stigma and parents' experiences of self-blame.

Twenty-three parents/caregivers of autistic youth (25% Asian, 29% Black, 46% White; 8% Hispanic or Latino) participated in semi-structured interviews, conducted in English or in Chinese by a native speaker. Purposive sampling was used to ensure diversity in family race/ethnicity. Interviews were audio-recorded, transcribed verbatim, and checked for accuracy. Transcripts were systematically coded and analyzed using applied thematic analysis.

There were differences across race, ethnicity, and local community culture in parent/caregiver experiences with stigma and self-blame. Most parents/caregivers reported experiencing stigma across multiple levels of their social ecology, including their family, neighborhood/school, and broader racial/ethnic community. Although less common, families that did not report experiencing any stigma tended to be White or Asian. Parents/caregivers who faced stigma often also discussed experiencing self-blame (e.g., feeling embarrassed by their child's actions in public, or feeling ashamed by their own lack of understanding of their child's autism).

There are cross-cultural differences in parents' experiences with autism-related stigma and self-blame. Increased awareness of cultural differences in stigma and self-blame can help to identify culturally-relevant treatment targets for family-based autism services, thereby improving the quality of life of parents and their autistic children.

Congratulations to our incoming Division 33 President, Dr. Rachel Fenning!

Division 33
Spotlight on Researchers

Dr. Kevin Stephenson is an assistant professor in the department of Pediatrics at The Ohio State University and a neurodevelopmental psychologist at Nationwide Children's Hospital.

Dr. Stephenson has several ongoing multidisciplinary research collaborations supporting work within neurodevelopmental disabilities across disciplines of gastroenterology, neonatology, and epilepsy. He also provides methodological and statistical support on these teams. Dr. Stephenson's own primary research interests include validation and psychometrics of clinical assessment tools used in neurodevelopmental disabilities as well as supporting caregivers through parent-mediated interventions while also understanding important caregiver characteristics such as parenting stress and parenting self-efficacy.

Validation and Psychometrics of Intelligence and Developmental Tests in Neurodevelopmental Disabilities

Dr. Stephenson's most recent work in this area has focused on the nature of cognitive abilities in children on the autism spectrum. A study by Dr. Stephenson and colleagues investigated the validity of the Wechsler Intelligence Scale for Children (WISC-V), a commonly used assessment of IQ in children and teens. This study showed that IQ is largely being measured the same way for children with ASD compared to neurotypical children. However, subtests of working memory and processing speed may underestimate IQ skills with children with ASD. The General Ability Index (GAI) is an unbiased measure of IQ in children on the autism spectrum. Follow up work by Dr. Stephenson using both the WISC-V and the Stanford-Binet is showing that so-called cognitive profiles as measured by IQ tests may not be valid or as stable as traditionally believed and there is limited psychometric support for the practice of interpreting patterns of strengths and weaknesses within subdomains of IQ tests. In contrast, global IQ scores are reliable and valid predictors of many important outcomes, even in cases where there may be large discrepancies between individual subtest scores. Dr. Stephenson's goal with future research work is to identify other ways to quantify and measure other aspects of cognition that may work better to inform treatment planning as well as finding other ways to identify cognitive strengths and areas for need for youth with neurodevelopmental disabilities.

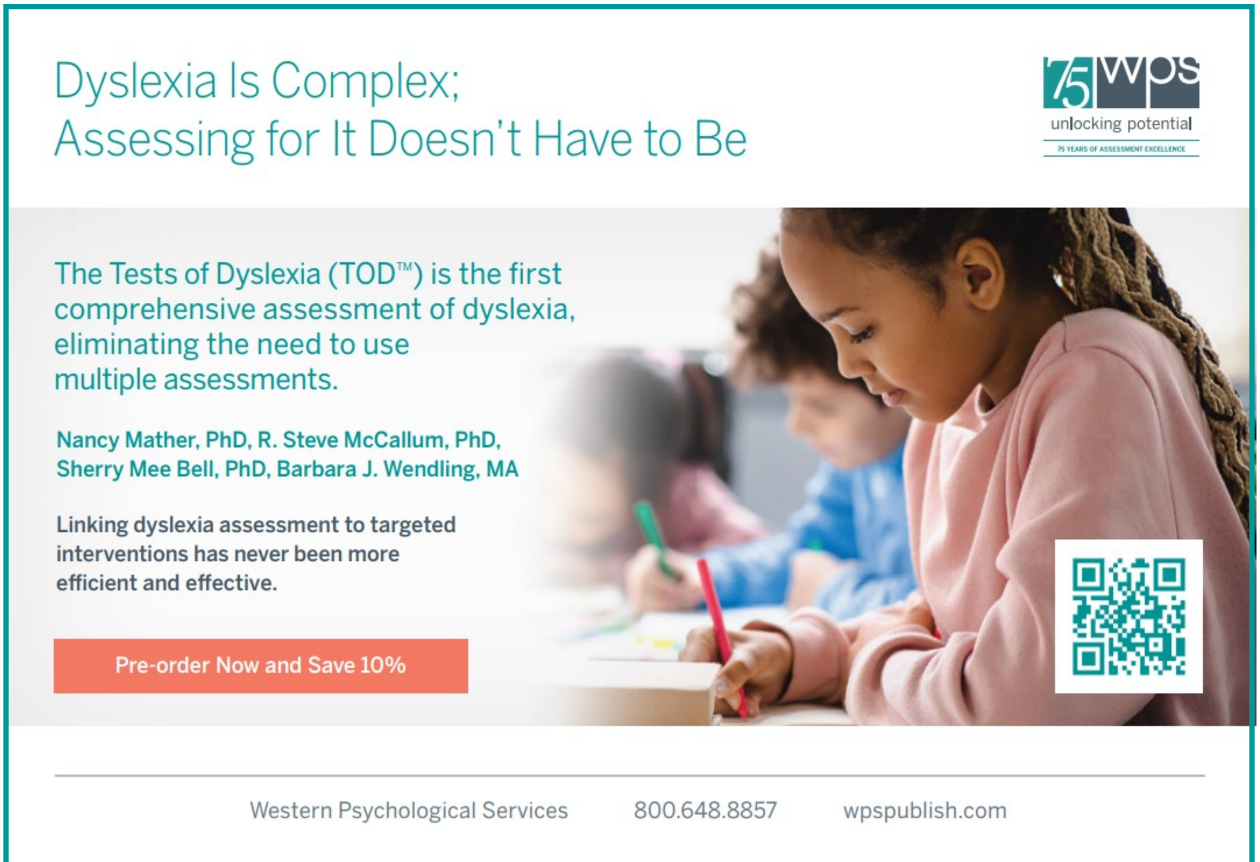
Understanding Parenting Stress and Parenting Self-Efficacy

Parenting stress has repeatedly been shown to be higher in families of children with neurodevelopmental disabilities compared to their neurotypical peers. Child disruptive behaviors are commonly associated with parenting stress, but that relationship is not well understood. Parenting self-efficacy is a caregiver's belief and confidence that they can bring about meaningful changes in their child's life. Unfortunately, many caregivers of children with neurodevelopmental disabilities have lower levels of parenting self-efficacy. Dr. Stephenson and colleagues found some evidence that improving parenting self-efficacy may help reduce the stress that parents feel when managing aggressive behaviors their children may have. Data from his research suggests that this may be especially vital for families who have limited financial resources and social support. Caregiver-focused resources, such as the Family ECHO: Autism program, championed by Amy Hess and others within the Autism Care Network, will

Division 33
Spotlight on Researchers

continue to be important sources of support for families.

Lastly, Dr. Stephenson is active in efforts to expand the availability of evidence-supported behavioral interventions for caregivers and their families, such as the RUBI Parent Training Program. A highlight of his current activities is participating as part of multidisciplinary expert teams with ECHO: RUBI and Dr. Stephenson hopes to better understand the outcomes and impact of this promising dissemination avenue.



Division 33 Student Research Award

August 2023 APA Convention

Benevolent Childhood Experiences (BCEs), Emotion Regulation Difficulties, Perceived Stress, and Life Satisfaction in Autistic Adults

Carrie B. Faaberg, Theresa Andrzejewski, and Christina G. McDonnell

Carrie Faaberg is a recent graduate with a bachelor's degree from the University of Wyoming.

Autism is a neurodevelopmental diagnosis that is characterized by differences in communication and social interaction and restricted, repetitive behaviors. Little is known about how benevolent childhood experiences (BCEs) impact autistic individuals, nor how BCEs are associated with emotion regulation difficulties, life satisfaction, and stress.

This study aimed to identify rates of BCEs among autistic adults, examine correlations between BCEs, emotion regulation, life satisfaction, and perceived stress, and determine associations between BCEs and psychosocial outcomes. Method Participants included 274 autistic adults who completed the BCEs Scale, Difficulties in Emotion Regulation Scale (DERS), Perceived Stress Scale (PSS), and Satisfaction with Life Scale (SWLS).

Autistic adults reported an average of 6.51 (SD = 2.39) BCEs. The most frequently endorsed BCEs were having opportunities to have a good time, having at least one friend, and having a caring teacher. The least frequently endorsed BCEs were liking oneself, liking school, and having a supportive non-caregiver adult. BCEs significantly positively correlated with life satisfaction and negatively correlated with emotion regulation difficulties and perceived stress levels. Overall multiple regression models analyzing individual BCEs with outcomes were significant, and the BCE of liking oneself was significantly associated with fewer difficulties in Faaberg 3 emotion regulation. Having good neighbors and a predictable home routine were significantly associated with less perceived stress, and having a supportive non-caregiver adult and liking oneself were associated with more life satisfaction.

These analyses highlight the impact of BCEs for autistic individuals, which can help others better understand how to support autistic people across their lifespan.

2023 Council Meeting Highlights

Vanessa Bal, PhD
Division 33 APA Council Representative

APA's Council of Representatives held a hybrid meeting Feb. 24-25, with most Council members convening in person in Washington, DC.

Below is lightly adapted from the meeting overview provided by APA staff. My additions are marked in **green**. A full draft of the meeting minutes can also be accessed here and documents for further reading are linked below. Please feel free to reach out to me if you have questions or want more information (vanessa.bal@rutgers.edu).

APA's Strategic Plan Progress To-Date:
Council began the process of reviewing and updating APA's current strategic plan. Since the strategic plan was adopted in 2019, APA has been regularly gathering information to assess progress in advancing its short-and long-term goals. Rooted in APA's organizational foundation of science and belief in data-driven decision making, APA governance and staff are asking questions that probe the effectiveness of APA's transformation in accomplishing the association's mission and achieving impact. Four years into the implementation and evaluation of the strategic vision, the data show APA is generating noticeable momentum as an association.

A review of the strategic plan and accomplishments are available publicly, IMPACT in Action: Reflecting on APA's Strategic Plan and Progress To-Date.

Did you ever wonder what impact APA has more broadly on the field, our society, or globally? Or even what are the main things that APA is striving to accomplish? The linked PDF provide 55 pages of information to answer these questions, but don't be put-off by its length!

Pages 4-15 provide overviews of progress on APA's 4 strategic aims, Key lessons learned, Examples of strategies in action and Indicators of progress and key challenges in advancing our strategy. Here are just a few ways that APA is making an impact!

Utilize psychology to make a positive impact on critical societal issues. For example, The Climate Change resolution adopted in March 2020 helps policy makers to understand the role of human behavior in climate change.

Elevate the public's understanding of, regard for, and use of psychology. Did you know: From 2018-2022 APA saw a 945% increase in the # of media clips featuring APA, APA members and research published in APA journals!?

Prepare the discipline and profession of psychology for the future. Have you read the Science Spotlight newsletter? Listened to the Essential Science Conversation Series? Or attended Science Training Sessions? These are all ways that APA is being intentional about engaging with scientist members of APA to ensure that all members of our field are being adequately supported.

Strengthen APA's standing as an authoritative voice for psychology Did you know: APA's EDI Inclusive Language Guidelines has had more than 35,000 unique viewers since their release in 2021.

If you want to read more of these examples, I encourage you to at least hone in on the first 15 pages… In the remaining pages, you can find more detail on the strategic plan adopted in 2019. This is all important context for opportunities for public comment for future drafts of the strategic plan, or may spur your interest in joining APA leadership on one of its Boards or Committees.

You can also view a video overview of strategic impact progress that was posted in August 2022 here

and a video with members' reflections on more general global impact here.

Adoption of Policies
The Council unanimously adopted revised APA Principles for Quality Undergraduate Education in Psychology and approved December 2032 as the expiration date. These principles offer best practices that faculty members, programs, and departments can adopt to facilitate student learning and development, in ways that fit their institutional needs and missions. This document is designed to complement, and to be used in conjunction with, the APA Guidelines for the Undergraduate Psychology Major.

The Council voted by 151–4, with one abstention, to adopt Educational Guidelines for Equitable and Respectful Treatment of Students in Graduate Psychology Training Programs. These guidelines encourage graduate psychology programs to promote the equitable and respectful treatment of graduate students throughout their education and training so that students may fully benefit from their graduate education and maximize their potential within and beyond their graduate programs.

The Council adopted a resolution on Equity, Diversity, Inclusion, and Accessibility in Quality Continuing Education and Professional Development by a vote of 139-8, with two abstentions. This resolution is aimed at providing CE sponsors and the broader public evidence-based recommendations to support the integration of equity, diversity, inclusion and accessibility in continuing education. The policy may be used as a foundation to develop additional resources that build on this document and provide tangible support to CE sponsors to infuse EDIA thoughtfully and intentionally in their offerings.

I appreciated the opportunity here to request the addition of "neurodiversity" as one of the identities listed in the section acknowledging the intersectionality of identities and lived experiences. While this is a relatively minor edit, I see these as opportunities to ensure that individuals with neurodevelopmental disabilities are included in all conversations APA is having. With recent autism prevalence rates released in March 2023 estimating 2.8%, and increasing numbers of Black, Hispanic and Asian or Pacific Islander being identified, this seems more critical than ever.

Guidelines
The Council voted unanimously to extend the effective date of the APA Specialty Guidelines In Forensic Psychology through December 2026. The purpose of these guidelines is "to improve the quality of forensic psychological services; enhance the practice and facilitate the systematic development of forensic psychology; encourage a high level of quality in professional practice; and encourage forensic practitioners to acknowledge and respect the rights of those they serve."

Report of An Offer of Apology, on behalf of APA, to First Peoples in the United States
The Council accepted a Report of An Offer of Apology, on behalf of the American Psychological Association, to First Peoples in the United States. This report builds upon APA's Apology to People of Color for APA's role in Promoting, Perpetuating, and Failing to Challenge Racism, Racial Discrimination, and Human Hierarchy in U.S., which the Council adopted in October 2021. The offer of apology to First Peoples will be delivered by the APA president to the Society of Indian Psychologists at a time and place to be determined jointly with the SIP leadership. The report was received by a vote of 148-2, with three abstentions.

APA Resolution on Confidentiality and Reproductive Health. The Council passed a policy asserting that confidentiality is central to the practice of psychology, and that psychologists should follow the APA Ethics Code when it comes to patient confidentiality surrounding reproductive health. The policy reaffirms "that a psychologist's allegiance to the Ethics Code, including ethical standards related to patient confidentiality, should be given the utmost attention and significance especially when psychologists are faced with ethical conflicts with a law requiring the disclosure of confidential information regarding sexual and reproductive health, including birth control; fertility treatment; contemplating, seeking, or having had an abortion; and related issues."

The vote was 148-4, with one abstention. This measure follows on a resolution the Council passed in February 2022 reaffirming APA's commitment to reproductive justice as a human right, including equal access to legal abortion, affordable contraception, comprehensive sex education and freedom from sexual violence, with a particular emphasis on individuals from marginalized communities.

Establishment of a Committee for the Advancement of General Applied Psychology. The Council voted 144-13, with one abstention, to amend the Association Rules to establish a Committee for the Advancement of General Applied Psychology. The committee's purpose

2023 Council Meeting Highlights

will be to promote, in settings outside the direct delivery of health care services, the utilization, application and advancement of science where psychologists work to enhance performance, learning, and well-being of individuals, groups, organizations, and society as a whole.

Amendments to Association Rules

The Council voted 147-2, with four abstentions, to amend the Association Rules to modify the review process for Board of Director member-at-large candidates and to apply that review process to all other members of the Board of Directors. Changes include asking prospective candidates, upon being slated, to disclose to the Election Committee claims made against them within the last 10 years for malpractice or unethical or unprofessional conduct, or if they are currently the subject of criminal indictment. The Election Committee will then evaluate the disclosures and determine whether the candidate can remain on the slate. The decision of the Election Committee can be appealed to the Board of Directors.

Recommendations from the Council Effectiveness Implementation Oversight Task Force

The Council voted to accept recommendations to publicize new business items in advance of Council meetings and give the movers and any opponents time to address the new business items at the Council plenary session. The motion passed by 104-40, with eleven abstentions. This was part of a series of recommendations aimed at making it easier to get new business items on the Council agenda. Several recommendations related to this effort were postponed until the Council's August meeting.

The Council voted 103-52, with two abstentions, to create a liaison program of Council members who would be assigned to up to eight selected boards and committees. The program will be managed by the Council Leadership Team.

Presidential Citations

APA President, Thema Bryant, PhD, presented Presidential Citations to psychologists Gordon C. Nagayama Hall, PhD and Wendi Sharee Williams, PhD, for their contributions to the field.

APA2023

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Division 33 Programming: APA Convention 2023

	Thursday (8/3)	Friday (8/4)	Saturday (8/5)
8 am	**Symposium (1hr)** Transdiagnostic Interventions for Spanish-speaking Families of Neurodivergent Children	**Division 33 Executive Committee Meeting**	
9 am			**2023 Edgar A. Doll Award Invited Address (Ben Handen)**
10 am		**Jacobson Award for Critical Thinking Invited Address (Anna Esbensen)**	
11 am	**Symposium (1hr)** Overcoming Challenges in Assessment of Individuals with Severe Developmental Disabilities	**Lunch**	**Lunch**
12 pm	**Lunch**	**ECP Mentoring Event**	
1 pm	**2022 Edgar A. Doll Award Invited Address (Alice Carter)**	**Symposium (1hr):** Daily Diary & Ecological Momentary Assessment Approaches to Studying Families of Youth with ASD/IDD	**Critical Conversation (1hr)** Autism, Sex, and the Neurodiversity-Affirming Frame
2pm			**Symposium (1hr):** Diving into Autistic Adulthood: A Focus on Adaptive Behavior and Psychosocial Factors Over Time
3 pm	**Symposium (DIV 33 1hr)** Beyond Effectiveness: Child- and Family-Centered Considerations for Early Autism Intervention	**Division 33 Poster Session II**	
4 pm	**Division 33 Poster Session I**	**Symposium (1hr):** Enhancing Executive Functioning with Interventions for Elementary Students with ASD/ ADHD	
5 pm		**Division 33 Business Meeting & Presidential Address (Cameron Neece)**	
6 pm	**Division 33 Cross-Divisional DEI Social (Co-Listed: 2, 5, 12, 16, 22, 25, 27, 29, 32, 48, & 49)**	**Division 33 Social Hour**	

Early Career Psychologist Column

Thriving Amidst Transformation: Empowering Early Career Psychologists to Navigate a Changing Profession

Hannah Barton, PhD, BCBA
Nationwide Children's Hospital
The Ohio State University

Jessie Greenlee, PhD
Psychology Department
Lafayette College

As early career psychologists (ECPs), we are at a pivotal moment in our profession. The field of psychology is continuously evolving, influenced by societal shifts, technological advancements, and emerging research. For many of us, the methods and theoretical frameworks we were trained under are being challenged. The lens of our research is shifting as are the methods. The role of diversity, equity, and inclusion has been highlighted as an area for development across training, clinical practice, and research. And the trainees we work with are utilizing new and innovative technology and practices we were not trained in.

In this column, we will explore the various roles and actions that ECPs in training and clinical positions can take to thrive in these changing times and to make a lasting impact. Specifically, we will focus on changes in **research**, **advocacy**, and **harnessing the power of technology**. By embracing these opportunities, we can shape the future of psychology while honing our skills and expertise. Finally, we end our thoughts with suggested action items for ECPs who wish to navigate the changing landscape of neurodevelopmental psychology and to make a meaningful impact

Research forms the cornerstone of our profession, driving evidence-based practice and enhancing our understanding of human behavior and psychological processes. As our field moves away from medical-driven models toward a neurodiversity affirming framework, research endeavors aligned with this approach are increasingly prevalent. For instance, community-based participatory methods that engage and partner with individuals, families, and communities affected by neurodevelopmental conditions are increasingly common (Israel et al., 2018). There has also been calls for research that focuses on the strengths and abilities of individuals with neurodevelopmental conditions across the lifespan (Fletcher-Watson et al., 2019). This shift toward neurodiversity affirming research will help uncover potential changes, adaptations, or co-occurring conditions that may arise over time, providing valuable insights into the complex nature of neurodevelopmental conditions. By embracing these approaches, ECPs can contribute to a more inclusive understanding of neurodevelopmental conditions and develop interventions, support systems, and policies that align with the lived experiences, goals, and aspirations of individuals with autism and related disorders.

A neurodiversity affirming framework also brings issues of diversity, equity and inclusion to the forefront of the research agenda. The need for more racial, ethnic, gender, and economic diversity in our research samples, our research teams, and in those making funding and policy decisions is not a new idea. But the implementation of diversity in intellectual and developmental disabilities (IDD) research has fallen short. ECPs have the opportunity to be drivers of change rather than waiting for more equitable and inclusive research to come to us. Others have identified actions we can take across different levels of institutional systems from individual labs and investigators generally (e.g., Dewsbury & Seidel, 2020; Mar, 2020) to autism and IDD research specifically (e.g., Maye et al., 2021; Williams, Smith, & Boyd, 2023). We are at a unique point in our careers to implement these inclusive practices from the start as we set up our own labs, recruit students, submit grants, and set research agendas.

ECPs are also grappling with a **quickly changing technological landscape**. Artificial intelligence (AI) has become an integral part of our modern world, revolutionizing various industries and sectors. In the field of psychology, AI is likely to impact our training, research, and clinical practice. For ECPs the use of AI is an exciting, and inevitable, practice. ECPs are particularly well-positioned to lead and to adapt to the use of AI due to our role as educators, clinicians, and researchers with early-career flexibility. However, it is crucial for us to carefully consider the ethical, privacy, and clinical implications associated with the use of AI.

AI has already arrived in education, and academic institutions are reacting to the use of AI in classrooms. Many educators are wary of software such as ChatGPT (Huang, 2023); however, the potential of AI in teaching has been recommended by many, including APA (Abramson, 2023). AI can be useful to clinicians and educators when planning and organizing clinical tasks. ChatGPT may be used to organize templates, streamline writing in smartphrases, and to format commonly used recommendations. It can also be used to change the reading level or to provide family-friendly explanations for psychological concepts. AI tools can assist in tasks such as planning and disseminating general results or recommendations, potentially increasing efficiency and accuracy. AI should be seen as a complementary tool that supports, rather than replaces, the psychological expertise of psychologists.

One of the foremost considerations when utilizing AI in clinical work is maintaining patient privacy and adhering to the HIPAA regulations and FERPA. It is essential that psychologists ensure that the data collected and utilized by AI systems do not include patient health information (PHI). Notably, the use of AI is likely coming to healthcare systems such as Epic (Fox, 2023; Microsoft News Center, 2023). The use of AI in patient care also poses ethical risks related to authorship and recommendations. While programs such as ChatGPT can compile general recommendations for patients, a clinician should always review and revise recommendations as the human responsible for documentation. It is crucial to ensure that human psychologists provide oversight, interpretation, and clinical judgment. Lastly, the use of AI may be limited by academic or clinical institutions. Clinicians need to consider the use of new technologies within the limits of their institutional parameters.

Moreover, ECPs should be vigilant in critically evaluating the effectiveness and validity of AI algorithms before incorporating them into their clinical and research practice. It is essential to engage in ongoing professional development and training to understand the strengths, limitations, and potential biases of AI systems. By staying informed and cultivating a deep understanding of AI technologies, ECPs can make informed decisions about their use, ensuring that they align with ethical and evidence-based practices.

Finally, in training and clinical settings, psychologists should remain mindful of the potential biases embedded within AI algorithms. AI systems are trained on vast amounts of data, and if that data is biased, it can lead to unfair and discriminatory outcomes. As responsible practitioners, we must actively monitor and evaluate the biases that may emerge in AI-generated content and take necessary steps to rectify them. This involves training and supervision of AI systems, as well as conducting regular audits to identify and address biases that may arise.

Early Career Psychologist Column

The role of psychologists extends beyond clinical practice and research. We have unique responsibilities and opportunities as leaders in the field of neurodevelopmental conditions to advocate for and alongside the needs of those affected by these conditions. While the importance of advocacy is not new to the field of psychology, evolving issues (e.g., autistic advocacy, LGBTQ+, mental health parity, telehealth) relevant to the field of neurodevelopmental disabilities represent **new areas for advocacy within our community**.

Many ECPs may not have been explicitly taught how to advocate or how to explicitly foster population health and wellness with trainees. Engaging in advocacy efforts may take various forms, depending on our individual strengths and interests. We can participate in professional organizations and networks that focus on advocating for mental health parity, reimbursement reform, and research funding. Joining forces with like-minded colleagues and stakeholders amplifies our collective impact and strengthens our advocacy initiatives. We can also reach out to legislators, policymakers, and community leaders to educate them about the challenges faced by individuals with neurodevelopmental disorders and the importance of addressing these issues through supportive policies and funding.

Additionally, we can utilize social media platforms and other communication channels to raise awareness and mobilize support for our advocacy goals (Askham, 2023). As ECPs, we must recognize that our advocacy efforts are not limited to our professional lives. We can also advocate for change on a personal level by promoting awareness, understanding, and inclusivity within our communities following a population health and wellness lens. Key to this effort, similar to changes in research practice, will be the inclusion of those with lived experiences of neurodevelopmental conditions like autism. A neurodiversity affirming approach is not limited to research and clinical practice and should guide our efforts as advocates and allies. ECPs can be leaders in these efforts as the false dichotomy between science and advocacy continues to break down.

There are many action steps ECPs can take to become involved in these areas of change. We have included some of our ideas about how to take action and encourage others to do the same.

Collaborate with community organizations: Build strong relationships with local and national organizations that focus on neurodevelopmental disabilities and psychological practices. Collaborate with these organizations to understand the needs of the community, advocate for policy changes, and develop programs and services that address those needs. Connect with online communities and forums where neurodiverse individuals and their allies discuss research and share resources. Engaging in conversations with diverse perspectives can help broaden your understanding of neurodiversity-affirming research and its implications. Need some tips? Check out the APA's guide to advocacy: https://www.apa.org/advocacy/guide

Advocate for inclusive policies: Work towards promoting inclusive policies that support individuals with neurodevelopmental disabilities. This may involve advocating for accessible healthcare, inclusive education, employment opportunities, and equal rights. Use your expertise to inform policymakers and advocate for changes that positively impact the lives of individuals with neurodevelopmental disabilities.

Raise awareness: Engage in public education and awareness campaigns to promote understanding and acceptance of neurodevelopmental disabilities. Use various platforms, such as social media, community events, and professional conferences, to share accurate information, challenge stereotypes, and combat stigma surrounding neurodevelopmental disabilities.

Early Career Psychologist Column

Foster collaboration and interdisciplinary work: Collaborate with professionals from different disciplines, such as educators, medical practitioners, and social workers, to provide comprehensive and integrated care for individuals with neurodevelopmental disabilities. By fostering interdisciplinary collaboration, we can create a more holistic approach to support the needs of individuals and their families.

Mentor and educate trainees: As early career psychologists, we have the opportunity to mentor and educate future psychologists and healthcare professionals. Incorporate advocacy training and education on population health and wellness into your mentorship and teaching roles. Teach trainees about the importance of advocacy and equip them with the skills necessary to be effective advocates in their own careers.

Incorporate AI education in training: Develop curricula or workshops that address the ethical, privacy, and clinical implications of AI use in psychology. Equip emerging psychologists with the knowledge and skills necessary to navigate AI technologies responsibly and ethically.

Promote equity in AI usage: Provide instruction on the acceptable usage of AI, ensuring equal access to the tool for all trainees. Address issues of equity and fairness in the implementation of AI technologies in training programs.

Stay informed and engage in professional development: Continuously evaluate the effectiveness and validity of AI algorithms before incorporating them into clinical practice. Stay updated on the strengths, limitations, and potential biases of AI systems through ongoing professional development and training.

Learn about neurodiversity affirming research and practice: Learning about neurodiversity-affirming research is an ongoing process, and staying informed about the latest developments in the field will help you deepen your understanding and contribute to creating a more inclusive and accepting society. Look for academic journals and books that focus on neurodiversity and autism research. Search for publications by reputable researchers and organizations that promote a neurodiversity approach. Remember to critically evaluate sources, consider multiple viewpoints, and approach the topic with an open mind.

Follow neurodiversity-affirming organizations and websites: Stay up to date with organizations and websites that prioritize neurodiversity in their research and advocacy efforts. Examples include the Autistic Self Advocacy Network (ASAN), Autism Women's Network (AWN), and Thinking Person's Guide to Autism (TPGA). These organizations often provide resources, articles, and research findings that support a neurodiversity perspective.

Seek out neurodiverse voices: Listen to and learn from neurodiverse individuals themselves. Neurodiverse advocates and bloggers often share their insights, experiences, and opinions about research from a neurodiversity perspective. Reading their blogs, following their social media accounts, and engaging in respectful conversations can offer unique and valuable perspectives.

Article References:

SCAN ME

Division 33 Award Winners

Edgar A. Doll Award (est. 1980)		Sara Sparrow Early Career Research Award (est. 2008)	Jacobson Award (est. 2007)
1981	Sam Kirk		
1982	Gershon Berkson		
1983	Marie S. Crissey		
1984	Sidney Bijou		
1985			
1986	Norman Ellis		
1987	Ed Zigler		
1988	H. Carl Haywood		
1989	Donald MacMillan		
1990	Henry Leland		
1991	Alfred Baumeister		
1992	Earl Butterfield		
1993	Brian Iwata		
1994	Ivar Lovaas		
1995	Stephen Schroeder		
1996	Donald Baer		
1997	Richard Eyman		
1998	Nancy Robinson		
1999	Murray Sidman		
2000	Todd Risley		
2001	Don Routh		
2002	Travis Thompson		
2003	John Borkowski		
2004	Gene P. "Jim" Sackett		
2005	Robert Sprague		
2006	Ann Streissguth		
2007	Douglas K. Detterman		Richard Foxx
2008	Michael Guralnick	Luc Lecavalier	
2009	Sara Sparrow		James Mulick
2010	Bruce Baker	Laura Lee McIntyre	
2011	Michael Aman		Stephen Greenspan
2012	Ann Kaiser	Anna Esbensen	
2013	Steve Warren		Sally Rogers
2014	Wayne Silverman	James McPartland	
2015	Laraine Glidden		V. Mark Durand
2016	Michael F. Cataldo	Abby Eisenhower	
2017	Leonard Abbeduto		Marc Tassé
2018	Catherine Lord	Cameron L. Neece	
2019	Jan Blacher		Eric Butter
2020	Philip W. Davidson	Matthew D. Lerner	
2021	Robert Hodapp		Micah Mazurek
2022	Alice Carter	Vanessa Bal	
2023	Ben Handen		Anna Esbensen

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Committee on Disabilities Issues in Psychology
Andrea Witwer
Megan Farley

Task Force for Practice Guidelines for Assessment and Intervention in ASD
Eric Butter
Rachel Fenning
Vanessa Bal

American Psychological Association

APA DIVISION 33: IDD/ASD

Thank you for reading this edition of the Division 33 Newsletter!

Have an idea for a future newsletter? We want to hear from you. Please contact the Division 33 Newsletter Editors:

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PSYCHOLOGY IN INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND AUTISM SPECTRUM DISORDER Editorial Policy

Psychology in Intellectual and Developmental Disabilities/Autism Spectrum Disorder is an official publication of Division 33 of the **American Psychological Association**. It is devoted to keeping members informed about the activities of Division 33 and to present news and comment concerning all aspects of service, research, dissemination, and teaching in psychology and IDD/ASD. Brief articles about policy issues in psychology and IDD/ASD, as well as descriptions of service programs and preliminary research summaries are invited. We are especially interested in articles inviting the reaction and comment of colleagues in future issues. Comments and letters will be published as space allows. Manuscripts must conform to APA style and should be submitted via an email attachment. Articles, comments, and announcements should be sent to the current Division 33 President Books, films, videotapes, and other material also may be submitted to the Editor for possible review. Unless stated otherwise, opinions expressed are those of the author and do not necessarily represent official positions of Division 33.