Commentary: The Wright Ross Salk Award: Reflection on a Strong Foundation Leading to the Robust Future of Pediatric Psychology

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I feel grateful and privileged to receive the 2014 Society of Pediatric Psychology Wright Ross Salk Distinguished Service Award, named for three legendary pediatric psychologists who had the foresight to create the Society for Pediatric Psychology (SPP). It is my intent here to honor their contributions and highlight the gifts I have received through my membership in and affiliation with colleagues, friends, students, and trainees of Division 54.

Logan Wright, Dorothea Ross, and Lee Salk are luminaries in the field of pediatric psychology. In fact, Dr. Ross received the SPP Distinguished Contributions Award in 1979, before I was even aware of pediatric psychology and before I had begun graduate school. As noted at that time, “She was one of the three who founded the Society in 1968, putting her great and sustained energy into this task” (Award Announcement, News and Notes, 1979). Dr. Ross was not able to attend the award presentation, but her remarks were read to the members of the Society in attendance, and her acceptance speech was reprinted in the Journal of Pediatric Psychology (1979), in which she noted: “I feel that the great strides made by the Society in a little over a decade should be numbered among the advances in pediatrics cited in connection with the International Year of the Child.” She went on to describe the “air of vigor and resiliency about the fledgling Society that foretold success, productivity, and longevity” and “our jubilation when the membership roster reached 100” (now at 1,600 members).

Logan Wright was a pioneering founder of SPP and served as the Society’s first President in 1969. These organizational contributions occurred while he was a faculty member in pediatric psychology at the University of Oklahoma Health Sciences Center. Dr. Wright wrote the first seminal article about pediatric psychology, published in the American Psychologist in 1967: “Pediatric Psychology: A Role Model.” His writing about training for pediatricians paved the way for the pediatric subspecialty of developmental and behavioral pediatrics, physicians who continue to be primary collaborators with pediatric psychologists across the country. Following the American Psychologist article, Wright chaired the Committee on Pediatric Psychology as a subgroup of Division 12’s Section of Clinical Child Psychology, with both Dorothea Ross and Lee Salk as members of that committee. It is noteworthy that the founder of pediatric psychology also served as the President of the American Psychological Association (APA) in 1986.

Dr. Lee Salk, brother of Nobel Prize recipient (for the polio vaccine), Jonas Salk, served as the Director of Pediatric Psychology at Cornell University Medical Center. In a 1974 interview with People Magazine, he was described as “…one of America’s most admired practitioners in the contentious field of child psychology.” He was one of the founders and President of the Division of Child, Youth, and Family Services (Division 37) and awarded the first Distinguished Contributions Award from SPP. Dr. Salk was well known for television and print media interviews during the 1960’s, which provided publicity for pediatric psychology and facilitated funding resources. The first meeting of the Society was held at the 1968 San Francisco APA Convention, with the organization initially referred to as the Society FOR Pediatric Psychology, eventually becoming the Society OF Pediatric Psychology.

Each of these individuals played a leadership role in the establishment, promotion, and growth of SPP, now a thriving independent division of APA. This legacy of “distinguished service” is exemplified through the spirit of the SPP’s Wright Ross Salk Award, with this history being carried forward by other pediatric psychologists who continue to serve the Society and its members.

A review of dictionaries highlighted various definitions of “distinguished service” including “characterized by excellence or distinction; noble or dignified in conduct or
appearance; eminent; famous; celebrated; distinctive.” These words alone honor the service for which I received this award. Through my work on behalf of SPP, and the education and training community at large, I have been able to “pay it forward” as a reflection of my own gratitude to others within the field.

My first service on a board of directors was intentionally with SPP, as I felt such kinship with the members and leaders based on conferences and the journal and wanted to become more involved in some way. I had the fortune to serve with key leaders who were dedicated in moving forward the field of pediatric psychology as both scientists and practitioners, with a vision and mission that is both meaningful and heartwarming. My primary responsibilities were with student awards, which set the stage for my longstanding commitment to students and training, and eventually lead to my work developing and coordinating the Mentoring Project for the Division (as a natural outgrowth of the presidential initiative of my friend Dr. Mary Jo Kupst). The commitment of SPP members to “mentor” and network with students and early career professionals has been inspirational to me, making it easy to maintain involvement in this project for many years. Two terms of service with the SPP Board lead to additional board work within the larger education and training community, with a focus on issues facing students, both immediate (quality doctoral and internship programs) and future oriented (development of training guidelines, identifying competencies for the future). Each of these opportunities for service contributed to my hope for the future.

**Thoughts About the Future**

**Professional Identity**

My initial awareness of pediatric psychology occurred during graduate school when I became intrigued by the work being done at the time by the infamous “Kellerman, Katz, and Varni.” Their work inspired me to pursue my dissertation research by studying children’s understanding of pain and then an internship with enhanced training in pediatric psychology. Since that time in the early to mid-1980’s, I was hooked, and the sense of belonging to an important and dedicated group has never wavered. As an aside, I continue to devour all of Jonathan Kellerman’s novels (with his protagonist, “Alex Delaware” serving as an alter ego for many of us from that generation). I also had the fortune to meet Ernie Katz in person during an internship site visit, during which I might have bypassed protocol somewhat, with a poignant introduction explaining my dedication to his work for so many years!

I also have believed in the interprofessional importance of identifying as a “psychologist,” and see that as even more important as our field moves forward in the current epoch of health-care reform. That identity is highlighted within the Blueprint for the Future of Health Service Psychology (Belar, 2013). The Blueprint recommends that we “Value and communicate to the public and other health professionals one’s identity as a psychologist” (Belar, 2013, p. 423). In its early days, Dorothea Ross (Society of Pediatric Psychology, 1979) described angry complaints about the establishment of the Society “…that the pediatric psychologist was an artificial subdivision of clinical and developmental psychologists” with one individual going so far as to describe this as “a parasitic extension.” Despite these critics, within one decade of its formation, she described the Society as “a cohesive and highly respected group,” and soon to become a section within one of the long-established divisions of APA (Division 12, Society of Clinical Psychology). This collaboration between SPP and Division 12 continued through 2000 when Division 54 was born, and pediatric psychology became an independent organizational entity, with 1,001 members at that time, now grown to 1,600.

Leaders within pediatric psychology have sustained this vigor and future orientation for over 35 years. Despite being a relatively small division, SPP was honored with the American Psychological Association of Graduate Students’ (APAGS) Outstanding Division Award in 2013, reflecting pediatric psychologists’ longstanding value placed on education and training, the continuation of Logan Wright’s conceptualization of pediatric psychology, and the professional identity established for our students early in their careers.

**Board Certification**

Despite this strong identity as pediatric psychologists, we continue as a subset within the board certification process of the American Board of Professional Psychology (ABPP) that is geared toward specialty certification in clinical child and adolescent psychology. Board certification becomes even more important with the 2010 passage and implementation of the Affordable Care Act (ACA) (Rozensky, 2011) and its call for accountable care. Many of us actually think of ourselves as “specialists” in pediatric health, although this area is neither recognized by APA as a “specialty” (as done formally through the process of APA’s Commission for the Recognition of Specialties and Proficiencies in Professional Psychology (http://www.apa.org/ed/graduate/specialize/crsppp.aspx), nor is pediatric psychology currently a member of the Council of Specialties in Professional Psychology (http://cospp.org). This should set the stage for movement toward seeking formal recognition as a **specialty** by APA and the subsequent establishment of a separate board certification process for pediatric psychology **specialists** by ABPP (Rozensky & Janicke, 2012). Our friends and colleagues within the
specialty of child and adolescent psychology continue as valued collaborators and role models for this process.

**Competencies**

Articulation of specialized competencies is important to the identity of pediatric psychologists trained as health service psychologists (Belar, 2013, 2014; Health Service Psychology Education Collaborative, 2013). An SPP-commissioned Task Force composed of pediatric psychologists and SPP Board members has facilitated this process with a recent 2014 publication highlighting training in pediatric psychology with recommendations for core competencies across each stage in the sequence of training (Palermo et al., 2014). This represents one of the first efforts to articulate competencies specific to a specialty area through the lens of the APA 2013 Benchmarks Model and the Competencies for Health Service Psychologists (Hatcher et al., 2013; HSPEC, 2013). Other groups have taken steps in this direction as well such as the Interorganizational Work Group on Competencies for Primary Care Psychology Practice, but this is one of the first that is focused on an area of practice represented by an APA division. This is a significant milestone in the evolution of pediatric psychology and SPP and extends the work of Madan-Swain et al. (2012) in the identification of doctoral-level research-based competencies in pediatric psychology.

**Funding Challenge**

Although there are numerous child clinical and pediatric psychology training programs at all levels of the sequence of training (graduate school, internship, postdoctoral fellowship), and through the pipeline to early career positions, funding issues continue to plague development of new training positions. This includes the important issue that all internship positions must be funded and within accredited programs. SPP itself is thriving and is in an organizational and financial position to host a national conference on an annual basis with over 600 in attendance (a feat seldom seen by other divisions). Thirty-five years ago, SPP was challenged with funding issues and was considering additional steps toward a stable financial base including “soliciting contributions to underwrite the cost of publication of the Journal, seeking support from foundations, and assigning several journal pages per issue to commercial advertising” (as noted by Dorothea Ross in her 1979 award acceptance remarks). Despite the current financial stability of SPP as an organization, funding challenges have intensified for research in particular, impacting doctoral program support for students and limiting career building efforts by early career pediatric psychologists who must work harder to obtain research, clinical, and educational funding. Team science (Spring, Moller, & Falk-Krzesinski, 2012) and interprofessional collaboration are the hallmark of funding success, and pediatric psychologists are at the forefront of these efforts. Continued work is needed to ensure that training sites develop stable funding through a national movement toward enhancing third-party payments to programs whose clinical services are provided by doctoral trainees. This includes national advocacy efforts targeting at ensuring that doctoral psychologists are eligible for Medicare and Medicaid payments.

**Collaboration and Interprofessional Practice**

Interprofessional practice is a hallmark of the Affordable Care Act as health-care changes move forward. Pediatric psychologists are well equipped to adapt to this interprofessional education, training, and practice mandate, as both multidisciplinary care and collaborative practice have been guiding characteristics of pediatric practice since the days of Wright, Ross, and Salk. For years, we have enjoyed a strong alliance with the American Academy of Pediatrics (AAP). During his 1996 SPP-invited address at the APA Convention, Robert Hannemann, MD, then President of the AAP, presented: “Pediatrics and Pediatric Psychology: A Relationship Poised for Growth.” His memorable quote during this address has guided me throughout the years as I worked to develop collaborative relationships with local pediatricians... “One day I hope to see every child in America touched by a pediatrician and a pediatric psychologist” (Danny Armstrong, PhD, chair,
tencies related to interpersonal skills and communication:

- Be knowledgeable about the core competencies for interprofessional practice, including values/ethics across profession as well as those for interprofessional practice, roles/responsibilities, interprofessional communication, and teams/teamwork. Apply that knowledge in collaborative practice.
- Be knowledgeable about the outcomes literature associated with the delivery of services by health-care teams.
- Use health informatics, including electronic health records, to communicate with other health professionals and patients as appropriate.
- Be familiar with various types of health-care systems and service delivery models and their implications for practice.

Palermo et al. (2014) have further articulated these competencies specific to pediatric psychology and paved the way for enhanced education and training for future pediatric psychologists as well as continuing education models and lifelong learning for established clinicians and faculty. It would well serve our profession—psychology in general and pediatric psychology specifically—for clinicians and researchers to provide journal articles describing in detail successful models for the development of these essential competencies.

**Mentoring and Networking**

SPP is a leader in mentoring students and early career professionals with our Mentoring Project in place since the 2004 presidential initiative of Dr. Mary Jo Kupst (Kupst, 2013; Packard, 2006). Throughout these 10 years, almost 500 division members have participated in the project (as mentor or mentee). Because this is a benefit of membership, our numbers have increased with new student and early career members seeking to be involved to participate in this project and enhance their knowledge and skills. Many of those who participated as “mentees” have moved to a mentoring role with undergraduate and graduate students, “paying it forward” because of their own positive experience. This Project has served as an exceptional process for networking throughout the division, forging new links among members and extending other connections. The value placed by SPP on networking, establishing connections, and education and training in pediatric psychology for our students is reflected in the 2012 APAGS Outstanding Division of the Year Award mentioned earlier. The award recognized the Division’s commitment to mentoring, noting the award was “for superior performance in promoting graduate student development and involvement...and an exemplary level of commitment to providing opportunities for graduate student development.”
Special Interest Groups

The SPP Special Interest Groups (SIGs) also reflect the importance of “connections” throughout pediatric psychology. These SIGs provide another forum for members to connect with each other and engage around areas of mutual interest to establish clinical pathways, research agendas, resource materials, and networking opportunities. Members at all levels of experience play a leadership role, furthering the connections among members and deepening the commitment to SPP as their professional home. The APA Division 54 Web site (http://www.apa.org/about/division/div54.aspx) indicates the following: SPP members are part of an integrated field of science and practice in which the principles of psychology are applied within the context of pediatric health. The field aims to promote the health and development of children, adolescents, and their families through use of evidence-based methods. Becoming involved with SPP has been a gift to me both professionally and personally.

Conclusion

I am honored and privileged to be a part of the history of our Division and pediatric psychology. And, I am among those blessed with this Distinguished Service Award. In accepting this honor, my commitment is to build on the history I have discussed and the work of the leaders before us, and to continue my service to our Division, pediatric psychology, our students and trainees, and my colleagues. As a long-time Packer fan, I cannot help but end with this quote:

Individual commitment to a group effort - that is what makes a team work, a company work, a society work, a civilization work.

- Vince Lombardi

Conflicts of interest: None declared.

References

Packard, E. (2006). Passing along wisdom: Division 54’s formal mentoring program creates relationships between pediatric psychologists at any career stage. APA Monitor, 37, 92.