Autumn will have arrived and left by the time you read this column. Just as the falling leaves signify the end of another growing season, the September 2003 Annual Meeting of SDBP signaled the end of a prolonged period of growth for the Society. The transition of society administration to Nicolette Zuecca and Association Headquarters is now complete. Many of you had the opportunity to meet and talk with Nicolette and her colleague Tina Squillante during the Pittsburgh meeting, and will have more opportunities over the next few years. They have already shown the capability to efficiently run the annual meeting, and behind the scenes Nicolette and other AH staff are hard at work on various Society activities.

Among the changes afoot for the Society:

• **Web based Society activities** – over the next year we will be moving toward on-line renewal of membership and dues payments. With this we will also be more efficient in reminding members of their dues through electronic dues notices. The SDBP web site has had the conference brochure on line for the past few years, and this will continue along with online registration for the annual meeting. New timelines will allow us to have this information available further in advance of the meeting, allowing members to better plan their fall travel schedules. We also anticipate having online abstract submission for the 2004 Annual Meeting.

• **Increased utility of the SDBP web site** – we are continuing and expanding the listing of fellowship opportunities, with plans to add various psychology post-doctoral positions as well as pediatric fellowships. There will also be job postings and other more timely additions to the site. There are plans for a Members Only channel on the site that will allow us to keep our directory up to date on a more regular basis than the annual printed listing we have had in the past.

(Continued on page 2)
Dr. Patricia Nash is originally from Indiana and attended Indiana University Medical School. Following her residency at IU Medical Center in Indianapolis, she moved first to Milwaukee, Wisconsin for a year, then to Columbus, Ohio, where she completed a three year fellowship in Behavioral-Developmental Pediatrics. She is now a faculty member of the Pediatrics department of the Ohio State University College of Medicine. She is in the Section of Behavioral-Developmental Pediatrics at Columbus Children’s Hospital. Her areas of interest are Down Syndrome, Autism Spectrum Disorders, and Attention Deficit Hyperactivity Disorder. She also enjoys teaching medical students and residents.
mission. Among these is increased interdisciplinary activity – in research, in training and in patient care. I will be working with the Executive Council to promote greater interaction with other societies that share our interest, such as the Society for Pediatric Psychology. There is a good deal of common ground shared by these two societies, and much to be gained in terms of advancing training concerns, health care provision and reimbursement, and advocating for public policy supportive of developmental and behavioral issues.

The subspecialty certification efforts that resulted in formal recognition of developmental-behavioral pediatrics also brought formal recognition of neurodevelopmental disabilities. Many of us recall the efforts to advance a single subspecialty; despite the existence of the two sub-boards, we still have much in common. As a reflection of this, we have several members of our Society who are certified in both fields. Encouraging the active participation of those certified in neurodevelopmental disabilities can only benefit our mutual goals of advancing child health.

My second goal for SDBP is to advance our standing as the foremost resource for training in developmental and behavioral pediatrics. We have been successful in this with our collaboration with the American Academy of Pediatrics in conducting the DB-PREP course in August 2002. The Education Committee plans to continue this activity with a second course in August 2004. While this has been a course aimed at preparation for board certification, we should look at this as an opportunity to raise the standard of child health care by considering topics pertinent to primary care practitioners.

Teaching evidence based methods of assessing and managing developmental concerns to those providing primary care would potentially have a tremendous impact on child health and routine health supervision. There may be opportunities to present such topics either through the DB-PREP course, our annual meeting, or perhaps even other settings.

The evidence for such best practices will come through our efforts at interdisciplinary research on developmental concerns, and our experience with interdisciplinary teams in the context of health care – further reason to return to our interdisciplinary roots and once again nurture such activities.

As we determine what should be done to promote optimal development and how it can be carried out, we need to use our collective voice to speak for children and adolescents everywhere and inform public policy makers of these needs. The Advocacy Committee has been busy with several such activities and will continue to work on this.

Finally, I want to encourage each member to become involved in the Society through the work of one of the Standing Committees – Advocacy, Communications, Education, Practice Issues and Research. Membership on the Committees is open to all – find your interest and pursue it! We are a Society rich in talent, and we want to put it to good use. If you have any questions regarding any of the Committees, feel free to contact the appropriate Committee Chair, myself, or Nicolette Zuecca. We want your input and your energy to help us reach our goals.

“I will be working with the Executive Council to promote greater interaction with other societies that share our interest, such as the Society for Pediatric Psychology. There is a good deal of common ground shared by these two societies, and much to be gained in terms of advancing training concerns, health care provision and reimbursement, and advocating for public policy supportive of developmental and behavioral issues.”
**Dr. Patricia Lester**

“Developmental Predictors of Somatization in Adolescents and Patients with HIV: A 12-Month Follow-Up”

Patricia Lester, MD is the Medical Director of the Child and Family Trauma Clinic in the Division of Child and Adolescent Psychiatry at UCLA and a clinical researcher at the UCLA Center for Community Health. Dr. Lester completed her medical education and adult psychiatry training at the University of California, San Francisco. She completed a fellowship in Child and Adolescent Psychiatry at UCLA. Dr. Lester recently completed the third year of a five year NIH funded Career Development Award (K-23) examining developmental risk factors for somatization in adolescents of Parents with AIDS and their infant offspring. In particular, the investigation is focused on the impact of early bereavement, traumatic exposure and attachment relationships on developmental psychopathology in a high-risk population of families. Dr. Lester’s earlier research has focused on the impact of HIV illness on family and child development and mental health. She has authored articles on the psychological and social impact of HIV illness on children and their families, including adolescent somatization, illness disclosure, custody planning, and adolescent childbearing. Dr. Lester’s academic and clinical background reflects a longstanding commitment to understanding the impact of stressful events on the developmental cycle of the family. Dr. Lester is currently conducting a study on family based interventions for childhood trauma with the UCLA-Duke University National Center for Child Traumatic Stress.

**Dr. Angie Trzepacz**

“Social, Emotional and Behavioral Functioning of Children with Hemophilia”

Dr. Angie Trzepacz graduated with a double major in English and psychology from the University of Massachusetts at Amherst in 1990 and then worked for a few years as a proofreader and editor for a publishing company before returning to graduate school. She graduated with her PhD in Child Clinical Psychology from the University of Cincinnati in 2001. She is currently working full-time for The May Institute in Walpole, MA. Her position is half-time clinical work, providing psychotherapy for children, adolescents, adults, and families, and half-time research. She is in the process of starting a new research program that involves collecting data on the adjustment and functioning of children and adolescents who are clients at a community mental health center. She plans to examine gender differences and also assess parent-child agreement. She also hopes to collect longitudinal data to assess changes over time and evaluate which areas of children’s functioning are most positively impacted by therapy.

She and her husband celebrated their 12th anniversary recently. He is currently completing his post-doctoral fellowship in Molecular Genetics at UMass Medical School. They have three children ranging in age from 6 months to 7 years who keep them very busy and remind them what is really important in life.

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**HAGGERTY-FRIEDMAN PSYCHOSOCIAL FUND FOR RESEARCH IN DEVELOPMENTAL—BEHAVIORAL PEDIATRICS**

Students seeking to participate in biopsychosocial pediatric research may apply for special scholarship support through the Haggerty-Friedman Psychosocial Fund for studies in Developmental-Behavioral Pediatrics. Mentors are matched with students to investigate behavioral and developmental problems among children and adolescents and the psychosocial issues affecting them and their families.

Interested medical students should apply at

http://www.urmc.rochester.edu/scrc/haggerty-friedman.htm

located in the Department of Pediatrics, Strong Children’s Research Center Summer Program at the University of Rochester.

**Deadline: February 13, 2004**
The Education Committee presented its fourth Annual Workshop on Teaching Developmental and Behavioral Pediatrics to Pediatric Residents prior to the SDBP Annual Meeting on Friday, September 19, 2003 in Pittsburgh, PA.

The workshop was composed of 8 interactive workshops presented by ten faculty members representing programs at 9 institutions nationwide. One focus of the workshop was ‘Promoting Cultural Competence’ at the request of last year’s participants. Other topics included using a wide variety of resources including videotapes, the Internet, schools and child care setting to teach Developmental-Behavioral Pediatrics, evaluating your DBP rotation with consideration of recent RRC requirements, using family drawings to teach family systems, and teaching residents to honor the family’s perspective.

In addition, the Committee has been working with the Society to plan the second CME program in preparation for the second certifying examination in Developmental-Behavioral Pediatrics (DB-PREP). At the present time Glenn Aylward, Linda Grossman and Pam High, as representatives of the Society, are collaborating with the Developmental and Behavioral Section of the American Academy of Pediatrics in setting up DB-PREP number two, which will be offered in August of 2004. Course registration is expected to begin in February of 2004. A limit of 270 course participants is expected and so interested members should register early. Following the course, it is likely that the syllabus will be available for purchase.

The Advocacy Committee will continue to solicit names of individuals/groups to recommend to the Presidents’ Committee for the Special Recognition Award at future Annual meetings. We will also work with the Program Planning Committee to help identify possible presentations on various advocacy issues at Annual meetings.

Top advocacy priorities identified by the Advocacy committee include:

- **Children’s access to mental health services** including expanded insurance coverage and availability of trained mental health professionals.
- **Children’s access to developmental and behavioral services** emphasizing the integration of developmental problems with behavioral concerns.
- **Access for children with special health care needs.**
- **Parity for mental health services with physical health services** which impacts all of the other priorities.

The Advocacy Committee is collecting copies of journal articles and reports that pertain to our priority areas of access to care and reimbursement parity. Among the materials are, for example, the Pediatrics article by Jane Foy, et.al. describing the North Carolina Pediatric Task Force on Mental Healthcare Access and Reimbursement, and articles by Lynn Wegner, Michelle Macias, Frances Glascoe and others describing coding and parity efforts for developmental and behavioral health services. We would like to be able to have these references available to interested SDBP membership either through the web site or newsletter.

**Other activities.** We will continue to recommend commentaries to JDBP about specific advocacy related topics such as the Surgeon General’s report on health disparities; coordinate activities with the Practice Committee to identify models of systems of care linking developmental and behavioral services to primary care practices and integrated community care programs; and coordinate planning with the Communication Committee to develop links to advocacy news, networks, advice, etc.
The issue of lobbying is a central interest to the committee. The consensus was that SDBP should do a number of things to promote developmental and behavioral services and our discipline from a public standpoint. The committee will develop a proposal for a promotional “work kit” for the membership to include some or all of the following:

- A list of services that developmental pediatricians provide, i.e. “What is a developmental/behavioral pediatrician?”;
- A documentation and explanation of Board certification and what that implies in terms of services and reimbursement;
- Summary of documentation for the need for services we provide;
- A listing of the national SDBP membership;
- Based on national studies and surveys, list the likely DBP “needs” of a given community-city, suburban, rural, types of collaboration;
- What generalist pediatrics do vis a vis DBP, what DBP specialists can do, and how generalists and DBP pediatricians collaborate to optimize children’s development;
- Advice to parents on how to request coverage from MCO’s.

The committee felt these “tool kits” and the materials included could be shared with not only families, but also schools, primary care pediatricians/family physicians, state legislators, public interest advocates and insurance companies.

The Journal of Developmental and Behavioral Pediatrics is growing in stature and adding weight on the professional growth curves. According to the ISI Journal Citation Report, the Journal’s impact factor rose in 2002 to 1.608, the highest rating it has achieved over the past five years. In 1998, the impact factor for the Journal was 0.885. The 2002 number reflects the impact of the Journal’s scholarly content over the past two years. Using another measure, the ranking of the Journal in the Behavioral Science category was 33:39; in Pediatrics 28:71 in 1998. Now the ranking in Behavioral Science is 27:39; in Pediatrics 15:68. With lower numbers meaning a higher position on the listing. Considering that this ranking lines us up with very large circulation journals such as Pediatrics, we can be very proud of this position. Thank you to all reviewers, authors, and editors who work to maintain and improve the quality of the articles published in the Journal.

A goal for the upcoming year is to reduce the amount of time an article remains under review. In 2002, our average time from submission to initial editorial decision was 109 days. In 2003, we have reduced this time by 7 days and our average is 102 days. Our goal for this year is an optimistic 60 days. We will be implementing a web-based review system in early 2004 which we believe will improve the efficiency and time we spend reviewing. We will be contacting our reviewers with missing information, especially email addresses, and to be sure we are ready to proceed with our web-based review. Harassment to a mild degree and incentives will help push and pull the process along. Stay tuned for some changes.

We welcome your feedback and comments as we approach this transition. How did you think your most recent experience with the Journal was handled? What would have made it better? Please send comments to sdixon@sofast.net and mfsharkey@aol.com.

We look forward to continued growth and vitality at the Journal.

A DEVELOPMENTAL/BEHAVIORAL PEDIATRICIAN

Private Practice Opportunity

Opportunity to join Developmental/Behavioral Pediatrician in busy private practice in the Los Angeles area, with extensive referral base. Must have experience in developmental testing, assessment, and treatment of children with a wide variety of developmental disorders including Autism, Cerebral Palsy, Learning Disabilities, ADHD and other neuro-developmental and neuro-behavioral problems.

Please send inquiries and CV to SDBP mailbox sdbp@ahint.com
Hard to believe, that we just held our 21st annual meeting! And what a meeting it was. We had our highest attendance ever to hear about the current research in our field, learn more about “the state of the art”, participate in a wide variety of workshops to update skills, and attend working groups, advocacy sessions, and committee meetings to expand our efforts to help children and their families.

The meeting was held at the Omni William Penn Hotel in downtown Pittsburgh, PA on September 18th through the 22nd. People enjoyed being right within walking distance of many Pittsburgh sights. The Omni William Penn Hotel is a historic old hotel with much of the classic old hotel charm, a great place for our meeting. Thanks to Heidi Feldman who helped with local coordination, especially planning the social event. This took place Sunday evening at the Senator John Heinz Pittsburgh Regional History Center and featured a celebration of the many years that Noreen Spota has been our dedicated administrative director. Society presidents from the past years shared stories of Noreen, both the humorous and the touching. It was a fitting tribute to her many years of hard work for our society.

The meeting itself featured a number of outstanding presentations as well as time for the SDBP committees to meet and important opportunities for meeting participants to network with others in attendance. The central core of the meeting continues to be the Sunday and Monday morning presentation of scientific papers. This year, eighteen papers were presented and, as usual, provoked much discussion as well as inspiration for new research among both the seasoned researchers and those new to the field. The topics were wide ranging – from “Sleep Behaviors and Bedtime Rituals in Toddlers of Teenage Mothers” to “Interpersonal Stressors and Resources as Predictors of Parental Adaptation Following Pediatric Traumatic Injury” and from “Behavioral Phenotypes in Older Children with Autistic Spectrum Disorders and Fragile X,” to “The Impact of Psychostimulant Treatment on Drug/Alcohol Abuse Among Children with AD/HD,” reflecting the depth and breadth of our field.

The afternoons on Sunday and Monday were devoted to State of the Art sessions on Child and Family Traumatic Stress in Medical Settings, Design and
Implementation of a Domestic Violence Education Program for Pediatric Faculty and Residents, The Neuroscience of Adolescence, Children’s Oppositional Behavior as Learning Disability, Adolescent Depression, and Spirituality and Medicine. A research seminar focused on obtaining funding from federal sources. Special clinical topics included one on Principles and Tools for the Care of Children with Disabilities. Advocacy sessions included a luncheon presentation by the recipient of the Society’s Advocacy Award, Lucy Spruill, a social worker and advocate for persons with disabilities in the Pittsburgh area, as well as a session on Preventing Shaken Baby Syndrome: Translating Research into Action. Dr. Karen Olness was the recipient of the SDBP lectureship this year and gave a thoughtful presentation entitled “Remember the Toothpick: The Importance of Careful Diagnosis in Developmental-Behavioral Pediatrics” reminding us all not to jump to conclusions but engage in a careful assessment of each youngster.

Pre-meeting activities included the hypnosis course which continues to be popular, a Friday session devoted to resident education and highlighting cultural competency organized by the education committee, and Saturday workshops on such diverse topics as medical records as part of practice management organized by the practice committee, the use of balint groups in residency training, and topics in autism, as well as the opportunity for research mentorship sponsored by the research committee.

Those who attended came away with lots of new ideas for improved research, teaching and clinical practice as well as the invigorating opportunity to share experiences and ideas with colleagues. We hope everyone will set aside September 30th – October 4th, 2004 for next year’s meeting at the Knickerbocker Hotel in downtown Chicago.

**SAVE THE DATE**

**The 2004 SDBP Annual Meeting**

Millennium Knickerbocker Hotel
Chicago, Illinois
September 30-October 4, 2004

**Hypnosis Workshop**
September 30-October 2, 2004

**Annual Meeting**
October 3-4, 2004
Bright Futures is a set of principles, strategies, and tools that are theory-based, evidence-driven, and systems oriented that can be used to improve the health and well-being of all children through culturally appropriate interventions that address the current and emerging health promotion needs at the policy, community, health system and family levels. The Bright Futures Guidelines for Health Supervision are now in their second edition, edited by Morris Green and Judith Palfrey.

The Bright Futures Education Center is a 5-year initiative of the American Academy of Pediatrics and the federal Maternal and Child Health Bureau. Its goal is to promote implementation of the Bright Futures Guidelines among health care professionals, communities and families. SDBP is one of the partners in this implementation, and our members are serving in several key roles. Besides Drs. Green and Palfrey (both SDBP members), Lane Tanner is serving as the co-chair of the Early Childhood Expert Panel and Peter Gorski is serving as a member on that sub-committee; Ed Goldson is co-chair of the Middle Childhood Expert Panel; and Martin Fisher is co-chair of the Adolescence Expert Panel. Dan Coury is the SDBP representative to the Project Advisory Committee for the Education Center. Activities of these committees will include examining obstacles to implementation of Bright Futures materials and philosophy in routine health supervision, continuing education activities to promote their use, and participation in other activities related to training programs and reimbursement of preventive services. SDBP has a role in promoting the use of the Bright Futures materials through not only the activities of these members but also potentially through workshops and presentations at our annual meeting and through our members’ activities in their home institutions. For more information on this project check the Bright Futures web site at http://brightfutures.aap.org.

SAVE THE DATE

**DB:PREP**
An Intensive Review of Developmental and Behavioral Pediatrics
Sponsored by the AAP Section on Developmental and Behavioral Pediatrics

**American Academy of Pediatrics**
Society for Developmental and Behavioral Pediatrics
August 11-15, 2004
The Westin Chicago River North
Chicago, IL

An Education Forum for the Developmental and Behavioral Pediatric Subspecialist:
- Seeking education pertaining to the ABP Subspecialty Initial Certifying Examination
- Seeking education as it pertains to the ADB Program for Maintenance of Certification in Pediatrics
- Seeking current and practical application information in the field of Developmental and Behavioral Pediatrics
- The Primary Care Physician who is seeking information in the field of Developmental and Behavioral Pediatrics

Here’s what to expect when you attend
- All In One Place-Extensive Coverage of Developmental and Behavioral Pediatrics Topics
- The Basics and More-Hot Issues and Advances in Developmental and Behavioral Pediatrics
- Meet the Professor-Opportunities for Expert and Peer Networking
- Coding for Developmental and Behavioral Pediatrics-What You Need to Know to Survive
- Tour of Chicago-An Afternoon Free to Shop, Tour and see City Sights

Visit [www.pedialink.org](http://www.pedialink.org) for daily schedules and registration
Details available early 2004
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<th>MEETING</th>
<th>LOCATION</th>
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<tr>
<td>Learning Disabilities Association</td>
<td>Atlanta, GA</td>
<td>March 17-20</td>
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<td><a href="http://www.ldanatl.org">www.ldanatl.org</a></td>
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<td>American Psychosomatic Society</td>
<td>Orlando, FL</td>
<td>March 3-6</td>
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<td>Society of Behavioral Medicine</td>
<td>Baltimore, MD</td>
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<td>Society for Adolescent Medicine</td>
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<td>Assoc Applied Psychophysiology/Biofeedback</td>
<td>Colorado Springs, CO</td>
<td>April 1-4</td>
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<td>Society of Pediatric Psychology</td>
<td>Charleston, SC</td>
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<td>International Society on Infant Studies</td>
<td>Chicago, IL</td>
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<td>Society for Research in Child Development</td>
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<td>International Society for the Study of Behavior Development</td>
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<td>American Academy for Cerebral Palsy</td>
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<td>American Academy of Child &amp; Adolescent Psychiatry</td>
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<td>Academy of Psychosomatic Medicine</td>
<td>Fort Meyers, FL</td>
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