

Spring 2019

Hem/Onc/BMT SIG Newsletter

SIG Chair Letter

Greetings Hem/Onc/BMT SIG members!

We are pleased to present our SIG newsletter providing updates on activities of the Hematology/Oncology/BMT SIG. We hope to have the chance to connect with many of you at the Society of Pediatric Psychology Conference (SPPAC) next week-- our SIG will be hosting an open meeting on Thursday afternoon at 4:30pm and a research symposium "From Screening to Follow Up" on Saturday morning at 10:30am (see page 7).

THANK YOU to all of our members who submitted nominations for our upcoming SIG leadership positions for the 2019-2021 term, including a new Co-Chair to represent Hematology. Dr. Soumitri Sil will be finishing her term as SIG Co-Chair this summer and elections for the incoming Hematology Co-Chair are currently underway. There are two other leadership team members who will be transitioning out of their current roles. We would like to recognize Dr. Jeffrey Karst (Member at Large: Communications) for all of his hard work over the past two years on our SIG newsletters, listserv communications, and oversight of elections. We would also like to thank Dr. Cindy Karlson (Member at Large: Research) for her successful efforts in leading SIG symposia and coordination of our student research recognition at SPPAC. We are looking forward to introducing our new leadership team to you all at our SIG meeting next week!

We appreciate the contributions made by the entire SIG leadership team and Dr. Cynthia Gerhardt ("Ask the Expert") to create our Spring newsletter content. Please feel free to contact us with any ideas that you have about future newsletter items or to be considered for a newsletter spotlight.

Thank you for your interest & hope to see you in New Orleans!

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Join us on twitter during SPPAC 2019! See back page for details.



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Dr. Sil



**Dr. Gilleland
Marchak**

Leadership Team

Oncology Co-Chair:

Dr. Jordan Gilleland Marchak

Hematology Co-Chair:

Dr. Soumitri Sil*

Member at Large:**Advocacy**

Dr. Claire Russell

Member at Large:**Research**

Dr. Cindy Karlson*

**Members At Large:
Education/Training**

Dr. Molly Gardner

Dr. Kristin Long

Communications**Webmaster:**

Dr. Jeffrey Karst*

Student Representatives:

Megan Perez

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* Indicates outgoing member of leadership team



SIG MISSION

- Collaborate with organizations with a similar focus (i.e., COG, APOS, IPOS) and current SPP SIGs that often overlap with the Hem/Onc/BMT population (i.e., AYA and C&L SIGs).
- Provide networking opportunities within SPP for members who have a clinical and/or research interest in Hem/Onc/BMT; in particular, connecting students and trainees with an interest in Hem/Onc/BMT with early, mid, and established career Hem/Onc/BMT psychologists.
- Provide a forum for discussion and sharing of information and ideas regarding clinical and research practices across institutions.

RESEARCH SPOTLIGHT

Recent Articles of Interest (Click on Link for Full Articles)

- * Pai et al.: Screening for family psychosocial risk in pediatric hematopoietic stem cell transplantation with The Psychosocial Assessment Tool (PAT)
- * Willard et al.: Trajectories of psychosocial and cognitive functioning in pediatric patients with brain tumors treated with radiation therapy
- * Bills et al.: Social-environmental factors and cognitive and behavioral functioning in pediatric sickle cell disease
- * Sil et al.: Pediatric pain screening identifies youth at risk of chronic pain in sickle cell disease
- * Lim et al.: Emotion-Focused Avoidance Coping Mediates the Association Between Pain and Health-Related Quality of Life in Children with Sickle Cell Disease



ADVOCACY SPOTLIGHT



Advocacy efforts can take place at different levels, including within an institution, locally, or at the state or national level. While previous articles have highlighted opportunities to advocate at the national level for policies that promote the interests of the hem-onc-BMT population, it is also important to consider options for advocating at the institutional, local, and state levels. In this article, several examples of advocacy efforts across different institutions are highlighted.

Institutional

As psychologists, we advocate daily for the needs of our individual patients as they navigate the healthcare system and make decisions about medical care. There may also be opportunities to more



broadly advocate for our patient populations within your institution. For example, at Nationwide Children's Hospital, the Sickle Cell Disease program has collaborated with NCH and the local Be the Match chapter to sponsor an annual bone marrow drive during sickle cell disease awareness month. This is an opportunity to provide education to staff and patients about sickle cell disease and the importance of being a bone marrow donor.

Local

Advocacy efforts can also be strengthened by partnering with other organizations or institutions at the local level. To better meet the needs of Adolescent and Young Adult (AYA) cancer patients in the Milwaukee area, the MACC Fund Center at Children's Hospital of Wisconsin and the Froedtert & MCW Cancer Center have collaborated to develop the AYA Cancer Program of Excellence. Through this partnership, patients ages 15-39 are provided timely education and access to age specific clinical trials, fertility preservation counseling, insurance/financial counseling, psychosocial support and transition to survivorship services.



State

At the state level, there may be opportunities to advocate for legislation to improve healthcare and quality of life for hem-onc-BMT patients. At St Jude Children's Research Hospital, service line development and clinical care have led to efforts to advocate at the state level for the needs of young cancer patients. The Early Childhood Clinic, led by Jennifer Harman, Ph.D., is an interdisciplinary program aimed at promoting optimal development in young children with cancer who are at risk for developmental delay due to their diagnosis and treatment. Through that clinic, St. Jude has advocated for the state to add specific cancer diagnoses to those that automatically qualify for state-based early intervention services.



In Ohio, the Ohio Bleeding Disorders Council (OBDC) organizes a Statehouse Day each year when the legislature is in session to advocate for the health care needs of those affected by bleeding disorders. The OBDC is an organization that is represented by individuals from all over Ohio, including patients and families affected by bleeding disorders as well as staff from the HTCs (Hemostasis and Thrombosis Centers). The OBDC contracts with a lobbyist who helps the members understand the current legislation and develops talking points for participants. Appointments with House Representatives and Senators are prearranged for patients/families/HTC staff to meet with those who represent their locale.



There are a variety of advocacy opportunities available for psychologist interested in promoting the needs of the Hem/Onc/BMT population at the institutional, local, state and national levels. It is clear that members of the Hem/Onc/BMT SIG and their institutions are developing and implementing creative ways to engage in advocacy efforts. For trainees interested in advocacy, talk with your mentors and others in the field to see what efforts are already underway.

Do you have examples of institutional, local, state or national advocacy efforts from your institution? If so, please contact the SIG advocacy chair, Claire Russell, at Claire.russell@nationwidechildrens.org and provide a brief summary to be shared in future newsletters.

ASK THE EXPERT

"What can I do during my training and early career years to develop a foundation for future grant funding? Are there specific strategies or experiences you found particularly helpful early in your training or career? "

This is a great question, as grant support is fundamental to a successful research career. You can never start too early. Those first successes in training build upon one another to lay the foundation for a productive research career as an independent investigator. Here are some tips that may help:



Dr. Cynthia Gerhardt

Find a successful mentor. Get involved in research during training and seek mentorship from someone who has grant funding. Hands on experience in a lab during undergraduate and/or graduate school allows you to develop key skills and determine what interests you most. Take any opportunity to proof-read or contribute to your mentor's grant submissions when you can. This helps you become familiar with the basic format and process of preparing grants. Keep collecting research mentors as you go!

Publish first authored papers. As you develop a scientific interest or niche, it is important to publish papers that build upon your thematic line of research. This may be a bit difficult as a trainee, as you may be pulled into a mix of papers in your mentor's lab. It is great to collaborate with others and co-author conference presentations and papers to maximize your productivity. However, try to prioritize a couple of first authored publications each year that reflect your primary interests as well.

Learn about different funding mechanisms. Depending on your area of interest and career stage, you may find grant opportunities at your institution, NIH, and other foundations that fit your needs. Small grants or dissertation awards from your department or organizations like SPP are a terrific place to start. NIH offers grants to develop investigators at different career stages, including individual F31 dissertation awards, T32 fellowship awards, and a variety of mentored K awards for junior faculty. Institutions that have a Clinical Translational Science Award (CTSA) to support clinical research may also offer TL1 and KL2 grants for trainees or junior faculty. You can sign up to receive grant announcements through NIH and other foundations or use one of several search tools to find the right grant mechanism for you.

Take a grant writing class. Sign up for a grant writing workshop during your fellowship or early career and ask your mentors or colleagues if they would share their successful grants. It helps to know the step by step process and how a final application should look. Some investigators may be a bit reticent to honor this request, but you might also be surprised that many are willing to help. Some institutions have a virtual library of successful applications, so ask! NIH offers information online for new investigators like sample grants and videos of a mock study section. Your CTSA may also offer free resources or grant writing classes.

Give yourself plenty of time to apply. Writing a grant always takes longer than you think, so start several months in advance of any deadline. Work with your mentor or collaborators on a realistic timeline. At this point, you have probably spent several years gaining research experience and publishing papers. If you are a new faculty member, hopefully you negotiated a strong start up package to establish your lab. This allows you to collect pilot data to show feasibility and preliminary data in support of your application. It is often helpful to speak with a program officer at the funding agency and know about recently funded grants or priorities. They may also offer feedback on your aims or choice of study section. Ask others for edits on drafts as you go, and celebrate after each submission!

Be persistent. Most grants are not funded on the first try. Don't take the reviews personally! If you have published, you have probably started to develop a thick skin in response to reviewer comments. Take some time to lick your wounds or vent about those crabby reviewers, but always remember the big picture. Your work is important. If you are doing good science, you will find a way to get it funded. Resubmit, resubmit, resubmit! Consider multiple funding sources. Keep going and good luck!

**SOCIETY OF
PEDIATRIC
PSYCHOLOGY
ANNUAL
CONFERENCE**

SPPAC



APRIL 4-6, 2019 | NEW ORLEANS, LOUISIANA

CELEBRATING 50 YEARS OF SPP 1969-2019

Hem/Onc/BMT SIG Meeting

Thursday, 4:30-5:30 PM, Bissonet Room

Hem/Onc/BMT & C-L SIG Symposium

“From Screening To Follow Up”

Saturday, April 6th, 10:30—11:45; Galerie 6

Symposium Chairs: Cynthia Karlson, PhD & Kevin Tsang, PsyD

Presenter 1: Jeffrey Karst, PhD

*Referral Outcomes from a Neurocognitive Screening Program for
Pediatric Sickle Cell Disease*

Presenter 2: Dana Albright, PhD

Implementing Standardized Psychosocial Screening for Pediatric Inpatients

Presenter 3: Blanca Velázquez-Martin, MA

*Building a New “Normal”: Supporting the Family’s Transition to Life After Pediatric
Cancer Treatment*

Presenter 4/Discussant: Jordan Gilleland Marchak, PhD, ABPP

Implementation of Electronic Psychosocial Screening in Pediatric Oncology

Symposia with Hem/Onc/BMT Related Talks at SPPAC

Date/Time	First Author	Presentation Title	Symposium Title
Friday 2:15 PM	Katie Devine, PhD	Peer Mentoring to Improve Transition Readiness among Young Adult Survivors of Childhood Cancer: Preliminary Results	Peer Mentoring Interventions for Young Adults with Chronic Illness
Friday 2:15 PM	Adrienne Viola, MPH	The Development of a Medical Student Mentor Intervention to Improve Transition Outcomes in Young Adults with Sickle Cell Disease	Peer Mentoring Interventions for Young Adults with Chronic Illness
Friday 2:15 PM	Anna Hood, PhD	Self-Management Intervention Improves Behavioral Activation in Adolescents and Young Adults with Sickle Cell Disease	Outstanding Research by Students and Trainees
Friday 2:15 PM	Valerie Crabtree, PhD	Feasibility and Acceptability of Light Therapy to Increase Energy in Adolescents and Young Adults Newly Diagnosed with Solid Tumors	Sleep as a Mechanism for Promoting Resilience in Adolescents and Young Adults
Friday 5 PM	Sarah Martin, PhD	A Closer Look at Health-Related Stigma in Adolescents with Sickle Cell Disease	The Impact of Social Rejection: Navigating Health-Related Stigma in Pediatric Chronic Illness
Saturday 10:30 AM	Cecelia Valrie, PhD	Good Sleep Patterns Promote Resilience for Healthcare Use in Response to Pain in Youth with Sickle Cell Disease	Sleep and Pain: Using Research to Inform Clinical Practice in Youth with Pain to Promote Resilience
Saturday 1:15 PM	Steven Hardy, PhD	Factors Associated with Adherence to mHealth Cognitive Training in Youth with Sickle Cell Disease	Applications of Technological Tools Across Multiple Pediatric Populations: Lessons Learned and Future Directions for Implementation
Saturday 1:15 PM	Matthew Hocking, PhD	Differences in Neural Activation in the Social in Pediatric Brain Tumor Survivors During Social Processing Tasks	Neuroimaging in Pediatric Psychology Research: Mechanisms and Intervention Targets



SPPAC Hem/Onc/BMT Posters

Thursday 6-7 PM

#	First Author	Title
30	Alyssa Schlenz	Practice Patterns in the Detection of Developmental and Behavioral Concerns in Children with Sickle Cell Disease
41	Sarah McCarthy	What Matters to Me? What pediatric stem cell transplant patients want their providers to know
137	Haley M. Sims	Parents Heal: A Pediatric Medical Traumatic Stress Screening and Intervention Program for Parents of Children With Cancer

Friday 8-9 AM

#	First Author	Title
43	Dara Steinberg	"It made me the person who I am..." What Pediatric Cancer Survivors can teach us about Resiliency and Hope
244	Emily Pariseau	Family functioning influences discrepancies in parent-sibling reports of the psychosocial functioning of siblings of children with cancer
297	Chelsea Pratt	The feasibility of assessing neurocognitive functioning over time in pediatric patients with non-Central Nervous System (CNS) solid tumors and non-lymphoblastic leukemia/lymphomas
454	Suzanne Vaccaro	Functional Impairment Concordance Between Cancer Survivors and Controls, and Their Parents' Proxy Report
135	Nichole Smith	Seeking Medical Advice: Use of Social Media for Sickle Cell Disease

Friday 7-8 PM

#	First Author	Title
28	Draycen DeCator	Meta-analysis of executive functioning in three pediatric groups

Saturday 8-9 AM

#	First Author	Title
21	Juliana Alba-Suarez	Parental Relationship Adjustment and Sibling Emotional Adjustment to Pediatric Cancer.
42	Lauren Daniel	EVALUATING THE VALIDITY OF PATIENT-REPORTED OUTCOMES MEASUREMENT INFORMATION SYSTEM (PROMIS) PEDIATRIC SLEEP HEALTH MEASURES AMONG CHILDREN IN ACTIVE CANCER TREATMENT
49	Kemar V. Prussien	Neurocognitive Function in Sickle Cell Disease Across Domains and the Lifespan: A Meta-Analytic Review
59	Jarred Gallegos	Caregiver Preferences for Palliative Care in Pediatric Hematology/Oncology: An Educational Intervention
68	Ellen Henning	Bereaved but Resilient: Evaluation of Outcomes from a Pilot Grief Support Group for Parents after the Death of a Child
69	Christina Sharkey	Screening for Psychosocial Risk Across Cultures: PAT Risk Profiles Among American and Dutch Families of a Child with Cancer
91	Megan Perry	Associations between Facilitative Parenting and Social Functioning in Survivors of Pediatric Brain Tumors
134	Madelaine Keim	Primary and Secondary Caregiver Depression Predicting Observed Family Interaction following a Cancer Diagnosis: An Exploration of the Buffering Hypothesis
142	Mallorie Gordon	Social Skills and Cognitive Proficiency in Youth with a History of Brain Tumor
197	Lauren Quast	The Protective Role of Problem-Solving Skills for Health-Related Quality of Life in Parents of Pediatric Cancer Survivors
218	Heather Bemis	Secondary Control Coping as a Resilience Factor for High-Risk Mothers of Children with Cancer
221	Sarah Bills	Obstructive sleep apnea and cognitive deficits in comorbid pediatric sickle cell disease
229	Savannah Davidson	Child Insurance Status is Associated with Mothers' Perceived Stress in Families of Children Being Treated For Cancer
236	Laura Bava	Psychosocial Functioning by Parent and Teacher Report in Latino Survivors of Childhood Acute Lymphoblastic Leukemia and Lymphoma
251	Sasja A. Schepers	Towards Evidence-Based Healthcare and Optimal Communication Using Patient-Reported Outcome Measures (PROMs) in Pediatric Oncology Practice: from Research to Clinical Practice
269	Suzanne Braniecki	Neurocognitive Outcomes in Children, Adolescents & Young Adults with High-Risk Sickle Cell Disease (SCD) who have undergone Familial Haploidentical Stem Cell Transplantation: a prospective study from pre transplant period to 2 years post transplant
273	Rachel Tillery	Impact of the Parent-Child Relationship on Psychological and Social Resilience in Pediatric Cancer Patients
289	Meredith Ehrhardt	Resiliency and Quality of Life Among Youth with Bleeding Disorders and their Siblings
322	Stephanie Merwin	Cognitive functioning impacts associations between prolonged hospitalization and disease-related worry in youth with sickle cell disease
335	Maru Barrera	Trajectories of psychosocial risk in families of children newly diagnosed with Cancer.
336	Christina Murphy	Examination of Psychosocial Outcomes across Race, Ethnicity, and Income for Pediatric Patients with Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma and their Parents
346	Jaclyn Nofech-Mozes	Pediatric cancer health care provider knowledge of family psychosocial difficulties interacts with child pain-related quality of life to predict caregiver quality of life six months later
359	Laurel Etkin-Spigelman	Psychosocial Risk Screening and Intervention Rates in Pediatric Oncology
362	Leandra Desjardins	Pediatric Cancer Quality of Life 6 Months Post Diagnosis: Examining the Influence of Parent Factors
384	Katherine McLean	Trauma symptoms and self-care in pediatric oncology providers
410	Olivia Clark	Disruption of White Matter Integrity in Pediatric Brain Tumor Survivors: Links to Day-to-day and Performance-based Deficits
414	Melissa Young	Establishing Needs in Pediatric Neuro Oncology and Neurofibromatosis Patients within a Multi-Disciplinary Clinic
418	Alexandra Cutillo	Psychosocial Risk and Services Offered after Pediatric Central Nervous System Tumor Treated with Surgery Only
462	Ariel Blakey	The role of caregiver employment and knowledge of child sickle cell disease history in the context of caregiving stress
466	Nicole Kramer-Lange	Deriving an Emotion Regulation Subscale on the Psychosocial Assessment Tool in Pediatric Oncology
237	Jensi Gise	Posttraumatic Growth in Young Adult Survivors of Adolescent Cancer: The Relevance of Changes in Peer Relationships and Self-Esteem
280	Laura Reinman	Depression in Sickle Cell Disease: A profile of depression components and their determinants
381	Morgan Bifano	Improving health disparities for transition-age youth with sickle cell disease through opioid wean: A case series
328	Steven Reader	Screening for Family Psychosocial Risk in Pediatric Sickle Cell Disease: Validation of the Psychosocial Assessment Tool (PAT)
220	Stefania Pinto	Racial/ethnic minority differences in the relationship between emotional symptoms and self-regulation of food intake in pediatric cancer survivors and healthy peers

Saturday 12-1 PM

#	First Author	Title
22	Megan Schaefer	Healing the hearts of bereaved caregivers: Impact of legacy artwork on grief in caregivers who have lost a child to cancer
203	Marie Chardon	The Relationship between Executive Functioning and Self-Regulation of Dietary Intake in Survivors of Childhood Acute Lymphoblastic Leukemia
423	Andrea Laikin	Malnourishment, Medical Treatment and Psychosocial Factors in Pediatric Oncology
2	Anne Dawson	Increasing pediatric psychology integration within medical specialty care: Physician perspectives

Student Poster Awards

Please join us in congratulating the below SPP Hem/Onc/BMT student poster award winners! We had an outstanding group of posters submitted this year. Thank you to all the trainees who submitted their presentations!



Trainee First Author: Stephanie Merwin, Ph.D.

Title: Cognitive functioning impacts associations between prolonged hospitalization and disease-related worry in youth with sickle cell disease

Mentor: Steven Hardy, PhD

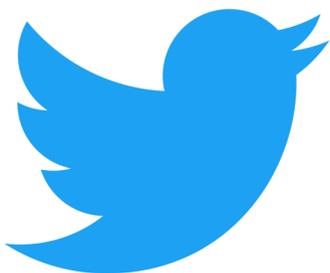
Institution: Children's National Health System in Washington, DC

Trainee First Author: Olivia Clark, B.A.

Title: Disruption of White Matter Integrity in Pediatric Brain Tumor Survivors: Links to Day-to-day and Performance-based Deficits

Mentor: Kristen Hoskinson, Ph.D.

Institution: Nationwide Children's Hospital



Please join our SIG on social media during SPPAC 2019! Tag your conference tweets with the hashtag: **#HemOncBMTSIG**. The most prolific tweeter will be honored in our next newsletter!