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I am very pleased and honored to have been named a Fellow of the Society of Counseling Psychology. In this address, I would like to thank my mentors, colleagues and family while reminiscing about some career highlights.

First, to my many mentors and colleagues, I want to humbly say, “thank you!” One can control many things about our careers, but with whom—and for how long we work with colleagues—seems mostly out of our control. I feel very fortunate to have had the guidance of excellent mentors, and the good fortune of good colleagues for some 30+ years. John Alcorn and Jim Hollandsworth were my primary mentors in my doctoral program, during the late 1970s-early 1980s—a vibrant and exciting time at the University of Southern Mississippi. A time and place where, looking back, I think Counseling Health Psychology was defined, developed and nurtured. Most would say that counseling psychology’s work in health psychology was born with Carl Thoresen at Stanford and I agree, but I think USM—under the direction of John Alcorn and Jim Hollandsworth—was one of the primary programs where it was nurtured and developed. I was lucky to be one of their students, learning about health psychology during a time when it was essentially brand new! In fact, many (Belar & Deardorff, 2009) place 1978, with three major events occurring all during that year (formation of APA’s Division of Health Psychology (38), charter meeting of the Society of Behavioral Medicine, establishment of the Academy of Behavioral Medicine Research) as the year health psychology was born. I enrolled at USM in Fall Semester, 1979. From USM I did my internship at the West Virginia University School of Medicine in Morgantown where I worked with more good mentors—Rick Seime, Frank Collins and Lyn Dahlquist. All three were supportive while challenging. All three contributed extensively to the mission of training competent and capable, doctoral level graduates in clinical health psychology. In retrospect, I realize how much influence all three of them have had on the specialty of clinical health psychology—particularly their impact on training and accreditation at the doctoral, internship and postdoctoral level. I guess I ought not be surprised when I realize that I think my main influence has also been on training in counseling health psychology—very much like these mentors.

I also want to thank my current, long-term colleagues at Ball State. Sharon Bowman is at the top of this list. As our department chairperson for many years, I have been fortunate to work with/for her, while experiencing her support, guidance and witnessing close-up, her tireless commitment to our field. I will always look back and realize how important her presence in my professional life has been. Theresa Kruczek and Larry Gerstein are second on my list as we have worked closely together for many years, in many combined efforts to build, develop, supervise and strengthen effective training opportunities for our doctoral students. Although this has not been without conflict, easy, or always fun, I think we have always tried to focus on what seems best for our students, and in the end, have been rewarded with the privilege of working with many competent and capable graduates, watching them move ahead in successful careers. My other long-term Ball State colleagues—Dave Dixon, Paul Spengler, Charlene Alexander, Stef Aegisdottir, Kristen McGovern, Molly Tschopp, and Jacob Chan—have all contributed to what has been an exciting, always engaged and highly productive department. In fact, with this Fellow Talk, we are a proud department that boasts seven APA Division 17 Fellows (Dixon, Bowman, Gerstein, Spengler, McGovern, Aegisdottir, Nicholas). Thanks to all of you for your many years of support, guidance and friendship. I have tried to reciprocate by being a supportive, cooperative, and kind colleague.

Career Highlights

#1. A commitment and passion for helping those whose lives have been affected by cancer. In February, 2015 my single-authored book, *Psychosocial care of the adult cancer patient: Evidence based practice in Psycho-Oncology,* was published by Oxford University Press. Soon after it came out, I found myself telling others, in response to their queries about the book, that it represented, *my life’s work!* I hadn’t really thought about it in that way until it was finished, but that is a very genuine and accurate answer. My life’s work has been about my helping cancer patients and their families, and about training graduate students to know how to do so. My affiliation with I.U. Health Ball Memorial Hospital’s comprehensive cancer center is now in year twenty-two. In 1994, I was asked to see if we could develop an affiliation with the Department of Radiation Oncology at Ball Memorial. I was eager to do so as psycho-oncology has always been my primary emphasis, tracing back to my dissertation on anticipatory nausea and vomiting, completed in 1982. In 1994 I began the Ball Memorial affiliation with two advanced doctoral students who were excellent to begin this relationship. We began by developing an assessment procedure for identifying those patients and family members who were experiencing distress, and demonstrating difficulties in psychosocial adaptation (later to be defined (Nicholas & Veach, 2000) as (a) maintaining active involvement in those things of importance in one’s life, (b) to remain able to do one’s life roles—spouse, parent, employee, etc.—and (c) to manage expected, normal emotional distress). With the cooperation of the radiation oncology staff, we began interviewing all willing patients and families, completing a detailed written assessment report that was then reviewed by the radiation oncologists and oncology nurses. The staff appreciated the reports and felt that they were providing more comprehensive and holistic cancer care to their patients. During the interview, when we identified patients in distress and in need of further services we continued to see them and provided individual, couples, or family counseling as needed. In 2004, the department of radiation oncology and the local medical oncologists moved into one location—a newly built comprehensive cancer care center—which now offers collaborative care (radiation therapy, chemotherapy, a range of supervise services) by multiple disciplines. We have continued this relationship. I provide services, one day per week, and multiple doctoral students (approximately 60) have completed the training. Four years ago I added master’s degree students in clinical mental health counseling. Most recently, we have formalized our role to include the now required (by cancer center accrediting bodies) *screening for psychosocial distress* which has allowed us to become a more integrated, specialty care service. We now are a routine part of every patient’s experience in which we (a) screen them for levels of psychosocial distress (see NCCN Guidelines), (b) inform relevant staff of patient’s self-reported level of distress and perceived need for further services, and (c) provide individual, couples, family and group interventions when warranted. Multiple weekly collaborative care meetings occur in which we are represented and highly valued. To see the growth and value of this service has been rewarding.

#2. Promoting clinical health psychology by Counseling Psychologists. In about 1997, when Division 17 began the formation of sections, the Health Psychology section was one of the first developed. I was one of the founding members and have found this section to be *my professional home* within APA. I have had many roles within this section including newsletter editor, member-at-large, chair-elect, chair and past-chair. I am pleased that one of our Ball State graduates—Larra Petersen-Lukenda—is the current section Chair. From involvement with this section I have also served on the Interdivisional Health Care Committee (as SCP representative) and am currently on the Board of CCHPTP (the APA training council for clinical health psychology), and the Clinical Health Psychology Specialty Council. My hope is that this involvement, along with key publications (Nicholas & Stern, 2011; Nicholas, 2015; TCP Special Issue on Cancer) will serve to advance SCP’s involvement in health psychology, while modeling for others how to make counseling health psychology a viable and sustainable subspecialty for many years to come.

Other career highlights include directing our department training clinic (1987-1999); helping to establish the Institute for Wellness (1987-1993) by serving as its Coordinator of Research; and, at present, helping to establish Ball State’s College of Health, a new college to which our department is moving, where we will be positioned with other health-related disciplines, to the benefit of our students and faculty in the emerging health care environment where interprofessional education/collaboration and integrative care are essential.

Finally, when reflecting on receiving Fellow Status at age 64, I like to think that represents my lifelong commitment to family, faith and my unwillingness to allow work to overshadow my primary identity as a husband, father and now, grandfather. To Pam, Leah, AJ, Jacob, Jon and Calvin, I will let you be the judge of how well I accomplished that goal, but know it’s not for lack of love for all of you!