



**2021-2022**

**U.S. Department of Veterans Affairs  
Gulf Coast Veterans Health Care System  
Doctoral Internship in Psychology  
Biloxi, Mississippi**



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## WELCOME

The Psychology Internship Training Faculty at the Gulf Coast Veterans Health Care System (GCVHCS) greatly appreciates your interest in our doctoral internship in health psychology. Our program has been in existence since 1951 and continually accredited since 1981. Our program aims to train interns to provide evidenced based and recovery focused clinical care and be a critical consumer of scientific research. We value the contributions interns make to our training program and the care of Veterans all along the Gulf Coast, and we have a strong commitment to promoting the development of interns' clinical skills and professional competences, all while honoring interns' individualized professional goals. Beyond the contributions interns have made during their internships, they often go on to take staff psychologist positions here and continue to contribute to the legacy of our program. Please let us know if you have any questions as you consider your internship opportunities. We look forward to reviewing your application. Thank you for your interest in our program.

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## PROGRAM INFORMATION

### **Our Vision**

The Psychology Internship training program embraces the philosophy that the pre-doctoral internship year represents a transition period for the emerging professional psychologist during which the intern moves from the role of graduate student to that of the autonomous professional. Training and supervision during the year should prepare the intern to enter the field of health service psychology with those skills needed to function independently and with the confidence and professional self-awareness to make maximum use of the individual's talents. Therefore, our training goal is to develop generalists who can function in a broad range of professional settings using a variety of skills. Reciprocally, our training program stimulates and enriches the training faculty and enhances the quality of patient care.

The internship program emphasizes a generalist specialty with development of extensive proficiencies in various facets of psychology (i.e., personality, intellectual, neuropsychological and psycho-diagnostic assessment, psychotherapy, scholarly inquiry, research competence, consultation) with a rural Veteran patient population. The training year provides time to develop professionally and to set the stage for further post-doctoral specialization to enhance the diversity of the training experience. The faculty encourages applications from individuals with a variety of competencies and interests. The program facilitates professional development of interns by increasing their sensitivity to the cultural and individual diversity of the patients we serve and the professionals with whom we work. Significant attention is given to encouraging interns' personal, professional, and ethical development, consistent with the demands of becoming a psychologist.

### **Our Goals**

The primary goal of the program is to train future independent licensed practitioners whose clinical decisions are informed by the integration of science and professional practice of

psychology, in keeping with a Scholar-Practitioner Model. Significant attention is given to encouraging the intern's personal, professional and ethical development, consistent with the developmental needs of becoming a health service psychologist. Attention is also given to intern training needs, long term professional goals, and anticipated public health needs. Our specific goals for interns include:

**Growth in Knowledge**

We focus our clinical training and didactics on preparing a rich professional practitioner knowledge base. The internship is designed to provide a broad range of training experiences in the contemporary practice of professional psychology with some opportunity for subspecialty training and to satisfy licensure requirements for most states in the U.S.

**Sensitivity to Cultural and Individual Diversity**

We strive to provide the interns diverse and wide-ranging clinical training experiences with an appreciation of multicultural/diversity sensitivity. The program facilitates professional development of interns by increasing their sensitivity to the cultural and individual diversity of the Veterans we serve, including those living in rural areas, and the professionals with whom we work. To enhance the diversity of the training experience, the faculty encourages applications from individuals with a variety of competencies and interests, as well as applicants from diverse backgrounds.

**Appreciation of Professional Diversity**

The program is designed so that interns have interactions with and supervision by several of the training faculty. This provides for a broad range of experiences with psychologists who have diverse racial, gender, academic, theoretical, practice, and specialty backgrounds. Further, many of our training opportunities incorporate an interprofessional approach to treatment, allowing interaction with an interdisciplinary team.

**Generalized Competence**

The internship program emphasizes and develops a broad range of generalist skills (i.e., personality, cognitive, neuropsychological and psycho-diagnostic assessment, psychotherapy, scholarly inquiry, research competence, consultation) with diverse Veteran patient populations.

**Preparing for Future Professional Roles**

The training year provides time to develop professionally and to set the stage for further post-doctoral specialization in the areas of health psychology/behavioral medicine, neuropsychology, geropsychology, and posttraumatic stress disorder. Interns will be prepared to assume clinical and research-focused professional health care positions wherein they will provide empirically based interventions and likewise contribute to the professional knowledge base. The Veterans Health Administration (VHA) prides itself on

providing state-of-the-art training for healthcare professionals, then hiring former VA trainees to serve Veterans in their professional careers. Our internship program embraces these values, and many of our graduates go on to successful careers in VHA.

### **Our Model**

In keeping with our goals, all internship training is designed to be sequential, cumulative, and graded in complexity as the year progresses to meet both the needs of the interns and community at large.

### **Rotations**

Each intern completes three, four-month rotations. Currently, no rotations are required, allowing interns to choose the training opportunities that will best help to meet their longer-term professional goals. Split rotations (two half-time rotations) are possible, with the prior approval of the supervisors involved and the Director of Training. Rotation offerings may vary depending on supervisory availability. The Director of Training has final approval on all rotations.

### **Long Term Projects**

The long-term project gives each intern the opportunity to design and pursue a specialized training experience in which he or she will participate throughout the entire training year. The long-term project may be clinically oriented, may focus on program development, may involve another facet of service provision (e.g., outreach, prevention, etc.), or may involve research. Four hours per week is devoted to the long-term project.

### **Dissertation Support**

Although interns will be very busy with their clinical work, the training faculty encourages them to organize their professional activities, whether on-duty or off-duty, so that progress continues the dissertation. While support in completing the dissertation is available on a limited basis, it is presumed that interns have proposed their projects, collected data, and are in the final stages of analysis and write-up when they begin their internship year. Some dissertation topics, however, require samples that can only be obtained in settings like our Healthcare System. In the past, some interns have utilized our Veteran population to collect dissertation data. This arrangement, though, is not guaranteed to be available and would require extensive preparation in reference to IRB and the GCVHCS Research and Development Office requirements prior to initiation of the internship or very soon after initiation of the internship. We prefer that interns complete their dissertations during the training year, and then focus intensely on licensure and obtaining postdoctoral employment.

### **Additional Training**

Each Thursday is devoted to training seminars, group supervision, or other meetings (CE programs, Grand Rounds presentations, Training Supervisors Meeting). Other training activities include conducting cognitive and personality assessments with Veterans,

serving a term as Chief Intern, and developing and implementing work stress-anger management programs for medical center employees.

### **Supervision and Evaluation**

Supervision is an integral part of the training program and is designed to foster education, professional competence, personal and professional growth, ethical responsibility, and personal integrity. At the beginning of the internship year, the Director of Training reviews the goals of supervision, process of supervision, and characteristics of good supervisors and supervisees. Outlines of this information are provided for each intern to reference during the training year. Supervisors are licensed psychologists who share their knowledge and expertise, model technique and professional behavior, and encourage interns to develop generalist skills using a variety of assessment-diagnostic, intervention, treatment team consultation, and research methods. Interns are expected to apply critical thinking and contemporary, empirically based skills to professional, legal, and ethical issues related to the practice of psychology. Interns receive a minimum 4 hours of supervision per week, at least two of which are individual supervision. The remaining supervision hours occur through extra individual or group supervision, including the weekly Group Supervision meeting with training leadership. Additional supervision may likely occur through other scheduled or unscheduled and formal or informal supervision contacts and sessions.

Specific rotation activity goals and objectives are communicated to interns in writing at the onset of each rotation activity. Faculty supervisors meet monthly to discuss the progress of interns toward meeting these goals and objectives. At mid-rotation, supervisors and interns are prompted to exchange feedback on the rotation experience and review goals and objectives. Patient and hospital staff feedback are reviewed and integrated into the evaluation of intern progress. At the end of each rotation, interns and their primary supervisors complete formal, written competency evaluations that are forwarded to the Director of Training. The information in these evaluations is used by the DOT to provide ongoing feedback to interns, supervisors, and academic training directors. Successful completion of relevant rotations, seminars, and general activity objectives constitute exit criteria for completion of the program.

### **Problem Issues and Due Process Resolution**

Normally, problematic behavior or less than satisfactory performance is resolved by the intern and the rotation supervisor. In rare instances, formal remediation is necessary. We have a written due process document which details policies and procedures that are implemented in these cases. The procedures for handling grievances are designed to protect the rights of the student, the supervisor and the training program. You may obtain a copy of this document by sending an e-mail request to Dr. Evans at [dian.evans@va.gov](mailto:dian.evans@va.gov).

**Required Hours and Holidays**

There are 10 Federal Holidays throughout the year and interns accrue 13 days each of Annual Leave and Sick Leave as Federal Employees. In order to certify the 2000 hour per year requirement of most states and account for time off on holidays and use of Leave, interns are required to obtain and document an average of 45-50 hours of work per week.

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**ANTICIPATED ROTATIONS 2021-2022**

**Behavioral Medicine/Health Psychology (Half-Time):** The Clinical Health Psychology/Behavioral Medicine rotation emphasizes use of an expanded biopsychosocial perspective in the prevention and treatment of health-related conditions. The mission of Health Psychology is to maximize the physical and psychological functioning of Veterans through health promotion programs, individual goal-oriented treatments, and group psychoeducational programs that teach self-management of chronic medical conditions, while additionally reducing overall health care costs through application of these programs. We operate under the premise that learned ways of thinking and behaving can compromise health or promote wellness. Interns on this rotation are trained to respond to consultations from healthcare providers and to assess and treat a wide variety of medical conditions that are caused or impacted by lifestyle and/or psychological factors. Medical conditions frequently treated by health psychologists include chronic pain, chronic obstructive pulmonary disease, cancer, tension and migraine headache, temporomandibular disorders, insomnia and other sleep disorders, diabetes, irritable bowel syndrome, obesity, and compliance with difficult medical regimens. They may also offer disease management, primary prevention, and health promotion programs (e.g., tobacco cessation, weight loss), as well as programs in population health management. Interns may work with interdisciplinary teams comprised of a variety of health-care professionals. Current programs of this type may include the OEF/OIF Traumatic Brain Injury/Polytrauma program, OEF/OIF/OND Post-deployment Clinic, Inpatient Medical/Surgical Unit, and the MOVE! weight management program. Currently, a substantial amount of clinical time is spent evaluating and treating Veterans in the Behavioral Sleep Medicine (BSM) clinic, to include learning/delivering Cognitive Behavioral Therapy for Insomnia (CBT-I). References for this rotation include:

Belar, C., & Deardorff, W. (2009). The practice of clinical health psychology in medical settings. American Psychological Association.

Buyse, D. (2014). Sleep Health: Can we define it? Does it matter?. *Sleep*, 37(1), 9-17c. <https://doi.org/10.5665/sleep.3298>

Harvey, A. G., & Buysse, D. J. (2018). Treating sleep problems: a transdiagnostic approach. New York: The Guilford Press.

Mead, M., & Irish, L. (2019). Application of health behaviour theory to sleep health improvement. *Journal Of Sleep Research*. <https://doi.org/10.1111/jsr.12950>

Walker, M. (2017). *Why we sleep*. New York: Scribner.

**General Mental Health (Outpatient):** The Mental Health Outpatient Clinic (MHOC) is multidisciplinary and provides opportunity for interprofessional training. The clinic is staffed by psychologists, psychiatrists, pharmacists, physician assistants, nurse practitioners, social workers, addiction therapists, and nurses. It is an open clinic, which means that it accepts consults and referrals from all services throughout the hospital. The clinic provides a wide range of mental health services, as well as coordination of Veteran care across the facility. The population served by this clinic is diverse and represents a wide range of clinical issues and presenting problems. Frequently presented clinical issues and diagnoses include: mood disorders, substance related disorders, schizophrenia and other psychotic disorders, anxiety disorders, sleep disorders, impulse control disorders, personality disorders, bereavement, marital discord, anger management, emotional dysregulation, gender and sexual disorders, pain disorders, combat and non-combat PTSD, Military Sexual Trauma (MST), and Adjustment Disorders. Less frequently presenting issues include Eating Disorders, Somatoform Disorders, and Dissociative Disorders. Comorbidity is present in most patients treated within this clinic, which provides an even broader and more diverse exposure for interns. The Veteran population is diverse with respect to racial/ethnic identity, gender, and age and typically corresponds with our local VA Medical Center catchment population.

**Geropsychology:** Interns who select the Geropsychology rotation work primarily geriatric Veterans in the Community Living Center (CLC) performing psychological and neurocognitive assessments and providing interventions. The intern works in conjunction with geriatricians, often attempting to improve patient functioning to allow return to a home-based environment. Other cases involve working to improve quality of life, enhance emotional integrity, help modify maladaptive or disruptive behaviors, and foster a sense of community for veterans who are expected to remain residents of the CLC. Opportunities are available to work with Veterans and their families in the Hospice Program, Rehabilitation Program, Transitional Care Unit, Dementia Unit, and residential “neighborhoods.”

**Home Based Primary Care (Half-Time):** The Home-Based Primary Care Psychology (HBPC) rotation is an amalgam of health and geriatric psychology provided in the Veteran’s home, often located in rural areas. By supplying these Primary Care services within the Veteran’s home, an ecological context for implementation and assessment of our behavioral health interventions is established. A traditional biopsychosocial model suggests that biological, psychological, and social factors impact a Veteran’s disease process; however, services that are developed from this mold are traditionally provided and researched in a static environment, i.e., a medical center. In HBPC, we intervene from every perspective guided by the Veteran’s environment. We work with the family, neighborhood and church friends, nursing services, home health, dieticians, occupational health, social work, chaplaincy, and primary care physicians. This places Psychology in a unique position to ensure that a Veteran’s entire surroundings are modified to promote lasting change. On occasion, interns will have the opportunity to work with a Veteran approaching the end of his or her life. The intern will be trained in assessing the psychosocial

needs of the dying Veteran, family, and caregivers. Psychosocial needs may include processing with the Veteran his or her cultural, spiritual, and existential concerns. Assessment opportunities include training in financial, healthcare, decisional capacity, and independent living capacity evaluations. Interns may conduct diagnostic assessments for PTSD, MDD, GAD, dementia, etc. It is not uncommon for the intern to assess whether the Veteran's physical disease or treatment of the disease is impacting his or her emotional distress and/or cognitive impairment.

**Inpatient Psychiatry:** During the Inpatient Psychiatry rotation, the intern will become a part of an interdisciplinary treatment team consisting of representatives from psychology, psychiatry, social work, nursing and allied health disciplines. The intern is afforded an opportunity to assess and intervene with patients from diverse backgrounds, exhibiting florid presentations of a wide range of psychiatric disorders. The intern will be involved with various activities including, but not limited to, intake interviewing, development of treatment plans, consultation, providing patient education, individual and group psychotherapy, and conducting diagnostic assessments. This rotation serves as a rich source of clinical training in the area of assessment.

**Neuropsychology (Half-Time):** Interns on this rotation assist in conducting neuropsychological assessments for referred patients, progressing to increased independence in administering the evaluations over the course of the rotation and writing the integrated report. Referral questions include differentiating normal aging and early dementia, determining cognitive functioning after moderate-to-severe head injury or after a significant illness affecting the central nervous system, and assessing the potential impact of cognitive difficulties on work performance.

**PTSD Clinical Team (PCT – Outpatient):** This rotation offers an opportunity for interns to experience working in an outpatient PTSD specialty clinic. While the priority for the Biloxi PCT is serving Veterans with PTSD or Trauma-related disorders resulting from combat, opportunities typically exist to work with other types of trauma as well (e.g., training accidents, military sexual trauma, etc.). Most of the Veterans treated within the PCT have served in combat theaters including Vietnam, Gulf War (Deserts Storm and Shield), and post-9/11 conflicts (e.g., Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND)). One of the goals of the Biloxi PCT is to administer gold-standard evaluations using the CAPS-5 to obtain an accurate diagnostic impression that will directly inform treatment choices made collaboratively with Veterans. We aim to utilize level A psychotherapies (i.e., PE, CPT, EMDR) per VA/DoD Clinical Practice Guidelines as much as possible. There is often ample opportunity to gain experience using motivational interventions to prepare Veterans for PTSD EBPs.

It's common for Veterans in PCT to have experienced multiple traumatic experiences throughout the lifetime, sometimes beginning in early childhood. Equally common in this population are the presence of co-occurring disorders such as depression, substance use disorders, etc. The treatment of "complex trauma" and/or co-occurring disorders typically includes consideration of preparatory or adjunct therapies such as Seeking Safety, STAIR, DBT, Relapse Prevention, Motivational Enhancement Therapy, etc. Interns completing the PCT rotation can expect to gain exposure to treating the PTSD/SUD population and exposure therapies (e.g. PE, COPE) and



competence in foundational skills using cognitive behavioral strategies to treat PTSD (e.g., CPT, Trauma-Informed Guilt Reduction). Training experiences on the rotation include one-on-one interventions as well as the opportunity to co-lead group therapy.

**Residential Rehabilitation Treatment Program-Domiciliary (RRTP-DOM):** RRTP-DOM is a 72-bed residential program where Veterans live in a therapeutic community setting and receive treatment for PTSD, chronic mental illness (CMI), and/or substance use disorders (SUD). Veterans who are homeless and seeking to become employed full-time may also be eligible for the compensated work therapy (CWT) program. Veterans attend structured group therapy and lectures, process groups and individual therapy. A wide variety of interventions are offered across these modalities of treatment including anger management, mood management, introduction to 12-Step Recovery, education on the biological basis of addiction, medication management of symptoms, and ambulatory detox if needed. Veterans with a history of substance use disorders are also required to attend AA/NA meetings. The average length of stay for Veterans in the RRTP-DOM, apart from those participating in CWT, is 45-days.

Interns on this rotation acquire skills necessary to function as a member of a multidisciplinary treatment team, will conduct psychological interviews on new admissions, develop mental health treatment plans for individual patients, conduct suicide risk assessments, and create safety plans. To develop the skills necessary to function as a member of a treatment team, interns will attend treatment team meetings and at least one weekly screening committee meeting. This rotation also affords interns the opportunity to acquire skills in conduction of individual and group psychotherapy for patients which address a wide variety of behaviors that arise from substance abuse/dependence, PTSD, and/or CMI. Interns will conduct weekly individual psychotherapy and co-facilitate group therapy sessions. Interns develop their own learning plans, much like the treatment plans developed by our individual patients. They may select to work with any variety of patients and groups.

**Military Sexual Trauma (Half-Time):** In addition to honing skills in empirically-based treatment of Veterans with sexual trauma, this part-time rotation offers an opportunity to engage in program development activities across our Health Care System (e.g., creating, organizing, and participating in outreach activities, as well as advocating and helping foster a welcoming environment and expanding clinical competency by conducting staff education presentations).

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## POSSIBLE ADDITIONAL ROTATIONS 2021-2022

**Integrated Primary Care Mental Health (PCMHI):** The Integrated Primary Care Mental Health rotation offers interns the opportunity to work as embedded practitioners in the outpatient primary care clinics. Here, interns will serve as first points of contact for Veterans newly expressing mental health concerns and/or seeking mental health services. An integral component of this position is collaborating with physicians, nurses, nurse practitioners, physician's assistants, dieticians, and clinical pharmacists to ensure that a holistic approach is taken in treating each veteran. Through this rotation, interns also could gain experience in

lethality assessment and crisis intervention. This area of service is rapidly growing within the VA system, as the standard of care increasingly involves a team approach to treatment with the goal of providing all the Veteran's healthcare needs under one roof. Through the Integrated Primary Care Mental Health rotation, interns may hone their skills in clinical interviewing, diagnosis, and triage in addition to providing short-term, solution-focused treatment (i.e., four to six sessions) and addressing issues incorporating both mental health and behavioral health components. As with the MHOC, the Integrated Primary Care Mental Health accepts referrals from most other services.

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## OUR FACILITIES AND LOCATION

The Biloxi Medical Center is the administrative hub of the health care system, and home to medical and surgical in- and outpatient programs, Primary Care medical teams, Emergency Department, extended care programs providing rehabilitative therapies and geriatric care, and various specialty clinics. Inpatient and outpatient mental health services for Veterans in the rural and urban Mississippi Coastal area are also located in Biloxi. In addition to general psychiatry and geropsychiatric inpatient units, outpatient programs include a Mental Health Clinic, Psychosocial Rehabilitation and Recovery Center (PRRC), Post-Traumatic Stress Disorders Clinic, and Women's Mental Health Clinic. The Psychosocial Residential Rehabilitation Treatment Program provides intensive bed programs for substance abuse, PTSD, serious mental illness and homelessness-work therapy. The Mobile, Eglin, and Panama City Outpatient Clinics as well as the Joint Ambulatory Care Center provide community-based primary medical and mental health care to eligible southern Alabama and northwest Florida Veterans with the Biloxi VA Medical Center providing tertiary inpatient care as needed. All treatment (i.e., mental health, medical, or extended care) is formulated under the primary care model with patients assigned to single providers supported by specific health care teams. Interns in our Biloxi Internship program may rotate to the Mobile Outpatient Clinic as well as within our main facility.

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## OUR AREA: THE GULF COAST

The Gulf Coast area is a relaxed beach resort setting. French and Spanish explorers settled the area in the late 1600's attempting to gain strategic and economic control of the mouth of the Mississippi River. The area has been home to Native Americans (the Biloxi Indians), French Acadians ("Cajuns"), African Americans, Slavic Fishermen, and more recently, Vietnamese Americans. Since the 1950's, numerous federal agencies and large industries have been located here including: the National Space Technologies Laboratories, the National Oceanographic and Atmospheric Administration, Keesler Air Force Base (a major Air Force electronics, communication, and medical/surgical training facility, the home of the Naval Construction Battalion (Seabees), and the Pensacola Naval Flight Training Center (home of the Blue Angels precision flying team).

The Mississippi Gulf Coast is a major tourist destination and is home to several casinos with their related hotels, fine dining and entertainment facilities. Each year, the interns enjoy many Coast

diversions including Mardi Gras, art and entertainment festivals, yacht and powerboat racing, and various fishing rodeos and seafood festivals. Some other noteworthy annual events include: “Cruisin’ the Coast” hosting some 5000 antique and classic cars, “Smokin’ the Sound” offshore powerboat races, and the Mississippi Deep Sea Fishing Rodeo. Fine cuisine and entertainment have always been a part of the Mississippi Gulf Coast tradition, as have the 26 miles of beach and the bays, bayous and rivers with their associated water sports and recreation. The Gulf Coast Coliseum and Convention Center is host to big name concert entertainment, boat and camper shows, arts and crafts exhibitions, and numerous conventions. In 2015, Biloxi became home to a minor-league baseball team, the Shuckers.

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## RESEARCH FACILITY

The Gulf Coast Veterans Health Care System is accredited as a research facility by the Association for the Accreditation of Human Research Protection Programs (AAHRPP). In our efforts to provide quality and cutting-edge care to Veterans, this facility encourages all disciplines to pursue research endeavors. Some training faculty members actively pursue their own research programs, which may translate to opportunities for interns to participate in research.

### **Our Information Resources**

The Department of Veterans Affairs has been a leader in the development of the computerized medical record. The VA’s Computerized Patient Records System (CPRS) is currently the most sophisticated system in use. Interns will utilize CPRS for chart review of progress notes, consults, radiological reports, health care summaries, discharge summaries, pharmaceutical information, etc. All employees and interns have accounts on the health care system computer network (VISTA – a VA internal intranet system), general internet access, and an e-mail address. Computers are available in all psychology stations (including intern offices). Most health care system communications are conducted via computer. Behavioral Health Service led the way in transitioning the Gulf Coast Veterans Health Care System to the computerized medical record. The Information Management Service-Information Center staff support the clinical, educational, and research activities of the health care system by providing knowledge-based resources in electronic and print formats. The Electronic Library webpage provides a core collection of traditional text resources (book titles, subscriptions, and audiovisual materials and equipment) and an extensive collection of electronic resources. Interlibrary Loan service and assisted computerized literature searches are available. Satellite teleconferencing (i.e., V-Tel) allows live training by, and real-time interactions with, national and international experts.

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## SEMINARS

### **Neuropsychology Seminar**

The Neuropsychology Seminar consists of presentations designed to provide basic education about Veterans in the areas of Neuropsychology, including information about the various domains and disorders that are assessed, basic neuroanatomy, test administration, and report writing. It includes training in the use of standardized tests such as the Neuropsychological

Assessment Battery and Delis-Kaplan Executive Function System. It is useful for individuals preparing to take the EPPP who have had no coursework in Neuropsychology, and it serves as a review for those who have. Discussion of the various domains and disorders are supplemented with case presentations pertinent to the topic being discussed.

Food for thought in Neuropsychology:

Wilson, H., Pagano, G. & Politis, M. (2019). Dementia Spectrum Disorders: Lessons learnt from decades with PET Research, *Journal of Neural Transmission* (2019) 126, 233–251.

Ahmed, Z., Mackenzie, I.R., Hutton, M.L. et al. (2007). Progranulin in frontotemporal lobar degeneration and neuroinflammation. *J Neuroinflammation* 4, 7. <https://doi.org/10.1186/1742-2094-4-7>.

Jellinger K. A. and Korczyn, A. D. (2018). Are dementia with Lewy bodies and Parkinson's disease dementia the same disease? *BMC Medicine* 16, 34. <https://doi.org/10.1186/s12916-018-1016-8>.

Shany-Ur, T., Lin, N., Rosen, H. J., Sollberger, M., Miller, B. L. & Rankin, K. (2014). Self-awareness in neurodegenerative disease relies on neural structures mediating reward-driven attention. *Brain: A Journal of Neurology*, 137, 2368–2381.

Hickey, C., Chisholm, T., Passmore, M. J., O'Brien, J. D. & Johnston, J. (2008). Differentiating the Dementias. Revisiting Synucleinopathies and Tauopathies. *Current Alzheimer Research*, 5, 52-60.

Gruters, A.A., Christie, H.L., Ramakers, I.H., Verhey, F.R., Kessels, R.P. & de Vugt, M.E. (2020). Neuropsychological assessment and diagnostic disclosure at a memory clinic: A qualitative study of the experiences of patients and their family members, *The Clinical Neuropsychologist*, 1-17. DOI: 10.1080/13854046.2020.1749936.

Barbeau, E.J., Ronat, L. & Didic, M. (2020). Case studies and neuropsychology of memory: now it's over? *Neuropsychology Journal*, 12 (1), 19-25. DOI: 10.1684/nrp.2020.0536

### **Psychodiagnostics Seminar**

The weekly Psychodiagnostics Seminar is designed to help interns become more proficient in relating psychopathological signs and symptoms to diagnostic criteria. In addition to a thorough review of the DSM-5 diagnostic nomenclature, case examples are presented and discussed. This seminar also provides an opportunity to examine unusual and problematic cases that present in various settings that interns may rotate through during the training year. Some pertinent readings include:

Marshall, R. D., Yehuda, R., & Bone, S. (2000). Trauma-focused psychodynamic psychotherapy for individuals with post-traumatic stress symptoms. In *International handbook of human response to trauma* (pp. 347-361). Springer, Boston, MA.

Conroy, D. E., & Benjamin, L. S. (2001). Psychodynamics in sport performance enhancement consultation: Application of an interpersonal theory. *The sport psychologist*, 15(1), 103-117.

### **Professional Issues Seminar**

This weekly seminar will meet throughout the internship year. This seminar includes didactic sessions and group discussions covering a range of topics relevant to professional development and practice including such areas as ethical concerns, multicultural or diversity topics, supervision, licensure, and other career development issues. Interns will have opportunities to present on a chosen area of interest in diversity and facilitate group discussion. Throughout the seminar, recent journal publications relevant to professional development will be made available for review and discussion. Learning objectives include developing additional knowledge and skills in targeted areas of practice, understanding the role of cultural diversity and gender variables in practice issues, and developing the identity and skills of a health service psychologist.

### **Psychological Assessment Seminar**

The Psychological Assessment Seminar meets weekly for the entire year. The goal of the assessment seminar is to help the intern acquire the skills necessary to select, administer, score and interpret a battery of diagnostic psychological tests. In addition to training in the use of objective and projective assessment instruments, the intern will learn to conduct and document the results of a mental status examination. Relevant concepts will be richly illustrated using case history materials gathered from past and present medical center patients. The seminar also includes instruction in the preparation of the psychological testing report, a review of current literature related to assessment, and discussions of cultural and ethical considerations. Interns are encouraged to bring test data to the seminar for discussion.

### **Evidence Based Psychotherapy (EBP) Seminar**

The Evidence Based Psychotherapy (EBP) seminar is offered monthly and allows for didactic presentations by training faculty dedicated to education in EBPs by EBP-trained staff members. The seminar provides an overview of the theory and practice involved in various VA-approved evidence-based psychotherapies. Currently, this seminar is shared with our sister internship program at the Joint Ambulatory Care Center (JACC) in Pensacola, and with the Rural & Underserved Interprofessional Fellowship Program. Treatments covered include Motivational Interviewing, Cognitive Behavioral Therapy for Insomnia, Acceptance and Commitment Therapy, Interpersonal Therapy, Cognitive Processing Therapy, Prolonged Exposure, Integrative Behavioral Couple Therapy, and Cognitive Behavioral Conjoint Therapy for PTSD.

### **Special Topics in Psychology Seminar**

The Special Topics in Psychology Seminar meets once per month, addressing a variety of topics pertinent to professional practice. Examples include caring for Veterans, advanced trauma therapies, diversity issues, death and dying, disaster mental health, and psychopharmacology. The topics for this seminar change from year to year, based on the current intern cohort's interests.

### **Conceptualization Seminar**

The Conceptualization Seminar is oriented around developing basic clinical conceptualization abilities that may be used to: (1) swiftly and flexibly with a range of cases; (2) facilitate understanding of behavior from a more “whole” perspective that can explain adaptive behavior as well as maladaptive; and (3) provide a counterpoint balance to the reductionistic method of modern psychodiagnostics. Seminars will mostly be interactive and emphasis simple models (e.g. biopsychosocial) over more complicated and rigid, pathology-oriented conceptual models.

Interesting things to contemplate:

Freeman, T., Powell, M., and Kimbrell, T. (2008). Measuring symptom exaggeration in veterans with chronic posttraumatic stress disorder. *Psychiatry Research*, 158, 374-380.

Rosen, G. and Davison, G. (2003). Psychology should list empirically supported principles of change (ESPs) and not credential trademarked therapies or other treatment packages. *Behavior Modification*, 27(3), 300-312.

Wampold, B. (2013). The good, the bad, and the ugly: A 50-year perspective on the outcome problem. *Psychotherapy*, 50(1), 16-24.

Foa, E., McLean, C., Zang, Y., Rosenfield, D., Yadin, E., Yarvis, J., Mintz, J., Young-McCaughan, S., Borah, E., Dondanville, K., Fina, B., Hall-Clark, B., Lichner, T., Litz, B., Roache, J., Wright, E., and Peterson, A. (2018). Effect of prolonged exposure therapy delivered over 2 weeks vs 8 weeks vs present-centered therapy on PTSD symptom severity in military personnel. *JAMA*, 319(4), 354-364.

### **Biology and Behavior Seminar**

Biology and Behavior Seminar is a more topic-flexible seminar that revolves around the interplay between biology and behavior. Topics will be drawn from psychopharmacology, neurology, brain-body connection, and other domains of knowledge. Methods of instruction may involve PowerPoint lectures, article processing, and/or a general discussion of theory.

### **The Interprofessional Treatment Consultation Team**

The Interprofessional Treatment Consultation Team (ITCT) meeting is a regularly-scheduled case consultation meeting involving Psychology Interns in both the Biloxi Psychology Doctoral Internship Program and the JACC Psychology Doctoral Internship Program, Postgraduate Fellows in the Rural & Underserved Interprofessional Fellowship Program, and members of both internship faculties and the postgraduate faculty who will be present at each of the two monthly ITCT meetings. Each trainee will have designated ITCT meetings during which he/she is responsible for presenting a case and leading a clinical discussion regarding that case. Case presentations are rated by all in attendance to enhance case conceptualization and presentation skills during the training year.

### Research Analysis

The Research Analysis, or “Book Club” Seminar is designed as an introduction to a type of peer supervision that you will hopefully continue to pursue as a practicing psychologist. It helps mark the transition between the supervisor-supervisee dyad or group that has marked your training up to this point in time and a more collegial type of supervision. While it may appear to be much like “regular” group supervision, it is not. The presenters each week will be the “experts” in the room; the other individuals, supervisors included, are merely along for the ride. Each month, 1-2 individuals will bring in recent (or favorite) literature regarding their rotation and/or a case that they are working with and lead a discussion with the broader group based on this material. If there is literature that you wish to caution your peers about, that is appropriate as well.

Examples of important literature might include:

Schnitzer, P. K. (1996). “They don’t come in!”: Stories told, lessons taught about poor families in therapy. *American Journal of Orthopsychiatry*, 66(4), 572–582. <https://doi.org/10.1037/h0080206>

Jennings, L., Sovereign, A., Bottorff, N., Mussell, M. P., & Vye, C. (2005). Nine Ethical Values of Master Therapists. *Journal of Mental Health Counseling*, 27(1), 32–47. <https://doi.org/10.17744/mehc.27.1.lmm8vmdujgev2qhp>

Voce, A., Burns, R., Castle, D., Calabria, B., & McKetin, R. (2019). Is there a discrete negative symptom syndrome in people who use methamphetamine? *Comprehensive Psychiatry*, 93, 27–32. <https://doi.org/10.1016/j.comppsy.2019.06.002>

Chiang, M., Lombardi, D., Du, J., Makrum, U., Sitthichai, R., Harrington, A., Shukair, N., Zhao, M., & Fan, X. (2019). Methamphetamine-associated psychosis: Clinical presentation, biological basis, and treatment options. *Human Psychopharmacology: Clinical & Experimental*, 34(5), N.PAG. <https://doi.org/10.1002/hup.2710>

### Research Days

During Research Days, presentations are made by the interns with a review of the relevant recent literature involving a problem in assessment or intervention. Each intern will present all the research for his or her Grand Rounds presentations on his or her assigned Research Days. The Director of Training and the internship cohort will critically review the research being presented and suggest possible further avenues of research.

### Diversity Case Seminar & Diversity Days Seminar

The Diversity Case seminar is a required seminar where interns present two diversity cases each training year to the Director of Training as well as other faculty members. In addition, interns are encouraged to attend the Diversity Days Seminar. The Diversity Days Seminar falls outside of the regularly scheduled didactics day, occurring on Wednesdays at noon. This multi-site seminar is offered every month as an opportunity for interns and training faculty to examine issues related to working with diverse populations. Presenters are expert practitioners and researchers employed in a variety of settings across the nation. Seminars are offered via V-Tel from remote

sites. Presentations are usually followed by group discussion. Recent topics have included spirituality in combat, the role of acculturation in psychotherapy outcomes, white privilege, and psychotherapy with American Indian populations.

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## ADDITIONAL EXPERIENCES DURING THE INTERNSHIP YEAR

### **Group Supervision**

Group Supervision meets on a weekly basis, supervised by the Director of Training, Assistant Director of Training, and/or Deputy Assistant Director of Training. Interns discuss current cases and elicit feedback from their supervisors and peers. Professional development issues and cohort dynamics may also be a focus of the Group Supervision meetings.

### **Psychology Grand Rounds**

Psychology Grand Rounds programs are held at a minimum monthly. Interns, on a rotating basis, present a case in either assessment or intervention. Faculty, interns and other students attend and participate. Interns must present assessment data, review contemporary literature related to the disorder, and lead discussion concerning the diagnosis and treatment of the case. Attention is given to diversity in patients and populations presented.

### **Assessment Training Program**

The Assessment Training Program provides services to the Biloxi center and to the Mobile Outpatient Clinics. Consultation requests are received from a wide range of sources: Neurology, Medicine, Primary Care, Psychiatry, Extended Care, and even Employee Health. After learning to properly administer the assessment measures, Interns are assigned full psychological assessment reports throughout the year, with a minimum of four (4) cognitive and four (4) personality reports required. This training experience is supported through the Neuropsychology Seminar, Assessment Seminar, and individual and group supervision.

### **Role of Chief Intern**

The Chief Intern is appointed by the Director of Training on a rotating schedule from among the intern class. The primary job of the Chief Intern is to represent the intern class to the Director of Training and the Assistant Director of Training and to assist, as needed, with some of the duties relevant to the psychology training program. The Chief Intern is responsible for chairing the monthly Steering Committee Meeting. He or she also attends, as a representative and liaison for the intern class, a portion of the monthly Training Faculty Meeting. It is not uncommon for the Chief Intern to provide a listing of intern's telephone extensions, office numbers and routing symbols (a "locator list") at the beginning of each rotation and distribute Rotation Evaluation forms during the last week of the rotation for completion by interns and faculty. Chief Interns coordinate additional Director of Training or administrative leadership requests as needed. These varied duties are consistent with the overarching goals of the training program and needs of the Behavioral Health Service.



**Employee Assistance Program (EAP)**

Behavioral Health Service has been at the forefront in providing psychological assistance for employees of the Health Care System. The goal of this program is to help employees deal with stressors in their work setting or away from work that interfere with their ability to perform their work satisfactorily. This can range from dealing with major stressors, such as the aftermath of hurricane devastation, to marital difficulties or interpersonal conflicts on the job. This program is not a true rotation experience. Interns are called upon from time to time to conduct or help in clinical activities, such as brief and focused psychological treatment for employees seeking the services of the Employee Assistance Program or facilitating stress and anger management workshops for staff teams.

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**INTERNSHIP TRAINING FACULTY**
**Ronald W. Alexander, Ph.D.****Titles:** Clinical Health Psychologist**School:** University of Alabama, Birmingham**Internship:** Wilford Hall Medical Center, Lackland AFB, San Antonio, TX**Post-doctoral Fellowship:** Clinical Health Psychology, Wilford Hall Medical Center, Lackland AFB, San Antonio, TX**License:** Kansas, 1999 – Present**Duties:** Dr. Alexander is responsible for providing a full spectrum of health psychology behavioral medicine services within the medical center. He is currently involved with the Health Psychology Behavioral Medicine Clinic, Behavioral Sleep medicine Clinic, MOVE! Program and the Traumatic Brain Injury-Polytrauma screening program. Dr. Alexander is currently a VHA national training consultant for the Cognitive Behavioral Therapy for Insomnia (CBT-I) training program.**Professional Interests:** Dr. Alexander's theoretical orientation is primarily cognitive behavioral with an emphasis on comprehensive biopsychosocial assessment and treatment. His special passion is in the behavioral assessment and treatment of sleep disorders including insomnia, breathing-disordered sleep, and circadian rhythm disorders. He is an avid supporter of the integration of mental health professionals into primary care and specialty medical clinics, with strong emphasis on the behavioral health consultant model of care. He has special interest in the proper referral, and comprehensive assessment and treatment of veterans returning from the conflicts in Afghanistan and Iraq. Dr. Alexander is a strong advocate for patient-centered care and is a member of the GCVHCS Whole Health committee. He is currently developing programs to be provided under the Whole Health system of care.**Personal Interests:** My family, travelling, soccer, music, movies, food, video games**Beth A. Curry, Ph.D.****Title(s):** Clinical Psychologist – Military Sexual Trauma (MST) Veteran Care Coordinator**School:** University of Houston**Internship:** Gulf Coast Veterans Health Care System, Biloxi-Gulfport, MS**License:** Mississippi, 1996 – Present

**Duties:** Dr. Curry works as a psychologist in the Outpatient Mental Health (MH) Clinic at the Biloxi division of the Gulf Coast VA Healthcare System (GCVHCS). She serves as the Military Sexual Trauma (MST) Veteran Care Coordinator. She provides a wide range of psychological services including individual psychotherapy treatment, consultation and brief assessments to Veterans with a broad range of DSM-5 diagnoses including Depression, Anxiety, PTSD, Substance Misuse, Gender related issues, Relationship and Work-School Adjustment problems, Anger issues, Sleep Disturbance, Personality Disorders, and other Severe Mental Disorders including Bipolar disorder, Schizophrenia and Schizoaffective disorder. Dr. Curry covers the MH Outpatient Walk-in Clinic to assist in providing same day access to Veterans and participates in Behavioral Health Interdisciplinary Program (BHIP) treatment team meetings. She provides EAP Services to the Biloxi VA Staff as requested. She also provides training and supervision for graduate level psychology externs, and interns as well as post-graduate fellows through the General Mental Health Outpatient rotation with emphasis on MST and LGBT issues as part of the GCVHCS training program.

**Professional Interests:** Dr. Curry approaches psychotherapy from a predominately integrative perspective with emphasis on cognitive behavioral and psychodynamic therapeutic applications. Dr. Curry's professional interests include clinical evaluation, diagnosis and treatment of a wide array of mental disorders; individual and group psychotherapy processes; professional development graduate student training; supervision of graduate-post-graduate trainees and unlicensed professionals; women's mental health issues; diversity issues; MST; LGBT issues; and the use of mindfulness and metaphors in psychotherapy.

**Personal Interests:** Dr. Curry enjoys reading, gardening, doing small projects around the house, going to movies, traveling to new places, camping (or glamping), watching the Saints and football in general, trying new restaurants, spending time with family and friends, and indulging her four dogs and two cats who are mostly rescued animals.

### **Dian Evans, J.D., Ph.D., M.S.C.P.**

**Titles:** Director of Intern Training, Neuropsychologist, Forensic Psychologist

**Psychology Schools:** Fairleigh Dickinson University, Montclair State University & Fielding Graduate University

**Law Schools:** Loyola University & New York University

**Internship:** Wyoming State Hospital

**Fellowship:** Hackensack University Medical Center

**Licenses:** New York, South Carolina, Louisiana, and New Jersey

**Duties:** In addition to her role in the Doctoral Internship program, Dr. Evans' clinical focus is on assessment.

**Professional Interests:** Dr. Evans' professional interests include training, supervision, neuropsychological assessment, forensic assessment, general assessment, psychopharmacology and the psychology of health and disease.

**Personal Interests:** Favorite avocations include spending time with her husband and family, eating out, music, traveling the world, reading and writing. She likes eating, but not cooking. She very much likes riding in hot air balloons and very much dislikes driving automobiles. If she ever wins the lottery, which she plans on doing this year, she will buy a hot air balloon, hire a limousine

driver, and hire a Chef among other things. Most of all, she loves sitting on her back veranda after work watching nature with her husband and her two dogs, Sazerac, a Shih Tzu and Tipitina, a Pug.

### Racha Fares, Psy.D.

ABN Eligible

**Title:** Neuropsychologist

**Schools:** Florida State University, Webster University, and Adler University

**Internship:** Erie Psychological Consortium- Major rotation in neuropsychological services in outpatient and inpatient settings

**Post-doctoral Fellowships:**

1st year- Forensic Psychology/Neuropsychology Services and Rehabilitation Associates-Jonathan Mack, Psy.D. ABN

2nd year- Neuropsychology Practice-Patrick Gorman's

**License:** Florida, 2016 – present

**Duties:** Dr. Fares conducts full outpatient neuropsychological evaluations and occasional inpatient, bed side assessments. She is the Diversity Mentorship Coordinator and she coordinates and leads Neuropsych Seminar.

**Professional Interests:** Brain injury, movement disorders, agent orange, neurofeedback, cognitive rehabilitation, neurodevelopmental disorders and advocating for the profession.

**Personal Interests:** Poetry, traveling, backpacking, fitness and nutrition, fishing, kayaking, biking, and hiking.

### Shannon K. S. Fussell, Ph.D.

**Titles:** Director of Postgraduate Training, Rural & Underserved Interprofessional Fellowship; Director of Psychology Postdoctoral Training; Outpatient Mental Health Psychologist

**School:** Auburn University

**Internship:** The University Counseling Center – Florida State University

**Licenses:** Georgia and Mississippi

**Duties:** Dr. Fussell coordinates the Evidence Based Psychotherapy Seminar. She is a generalist practitioner in the Outpatient Mental Health clinic, where she provides individual, couple, and group psychotherapy and diagnostic evaluations. Her psychotherapy focus is on the therapeutic alliance, integrating evidence-based practices as appropriate (e.g., CBT, DBT, STAIR). She is experienced in providing conjoint therapy via the Integrative Behavioral Couple Therapy (IBCT) and Cognitive Behavioral Conjoint Therapy for PTSD (CBCT) models and enjoys providing training in working with couples.

**Professional Interests:** Professional interests include training, supervision, developmental psychology, and the therapeutic alliance. Recommended reading includes *The Gift of Therapy* and *Love's Executioner*.

**Personal Interests:** Interests include cooking, enjoying food, kayaking, fishing, bike rides, being outside, playing instruments (with varying levels of proficiency) and singing (badly), being a dog mom, and trying new things.

### Alyssa A. Greineisen, Psy.D.

**Title:** Clinical Psychologist

**School:** Nova Southeastern University

**Internship:** South Florida Consortium Internship Program

**License:** Virginia 2018-Present

**Duties:** Clinical Psychologist for Outpatient Mental Health

**Professional Interests:** Dr. Greineisen's theoretical orientation is cognitive-behavioral. She utilizes short-term evidence-based practices (CBT, ACT, MI) with individuals who have been diagnosed with a variety of psychological disorders including, but not limited to depression, anxiety, and substance use disorders. She also works with many individuals who are motivated to work on interpersonal difficulties and anger. Dr. Greineisen's other professional interests include psychological testing to clarify diagnosis and guide the course of treatment as well as training and supervision.

**Personal Interests:** Dr. Greineisen loves to go out to eat and try new foods and restaurants. She also enjoys being outside and going for walks, riding bikes, and going on her family's boat. She has a toddler and a puppy who keep her very busy.

### Angela P. Hatcher, Ph.D.

**Title:** Program Manager, RRTP-DOM (Residential Rehabilitation Treatment Program-Domiciliary)

**School:** Western Michigan University

**Internship:** Fulton State Hospital

**License:** Michigan, 2010 – Present

**Duties:** Dr. Hatcher is the Program Manager for the RRTP-DOM. Her duties in this role involve administrative and clinical oversight of a multidisciplinary team as well as assisting in clinical duties.

**Professional Interests:** Dr. Hatcher's professional interests include substance use disorders, harm reduction, offender treatment, forensic assessments, and psychopathy. Her theoretical orientation is behavioral, with a cognitive-behavioral influence.

**Personal Interests:** Her personal interests include spending time with her family, traveling, spending time on the water, reading, and watching Saints and Alabama football.

### Jeffrey S. Lawley, Ph.D.

**Titles:** Deputy Assistant Director of Intern Training Psychologist, Behavioral Health Acute Inpatient Unit; Assessment Seminar Coordinator

**School:** University of Southern Mississippi

**Internship:** Michigan State University Counseling Center

**License:** Louisiana, 2010 – present

**Duties:** Dr. Lawley is a generalist psychologist on the behavioral health acute inpatient unit. The acute unit consists of two locked wards that primarily serve Veterans who are in crisis and/or a danger to themselves or others. Individual duties include personality assessment and screening of cognitive functioning, individual and group therapy, and consultation as needed in these areas.

Groups are on a broad range of topics, including mindfulness, impulse management, values-consistent behaviors, and psychoeducation. Interns are welcome to design and implement their own type of standing group. Collaborative duties include working with a large, diverse treatment team to coordinate acute care and plans for mental health treatment after discharge. Prior to working at the VA, Dr. Lawley was teaching at an M.S. program in counseling. Dr. Lawley also previously worked on the RRTP for several years.

**Professional Interests:** Professional interests include psychological assessment, supervision, career development, and multicultural issues in psychology. His theoretical orientation is primarily cognitive-behavioral, with heavy interpersonal, developmental, and narrative influences. (Constructivist, if you have been exposed to that).

**Personal Interests:** Personal interests include computers and technology, cars, tabletop and video games of all kinds, and history. A side interest in psychology is early childhood development, as he has a young son. His wife is also a psychologist, and they are patiently waiting for the day when their son realizes exactly what this means.

### Michael D. Prazak, Ph.D.

**Title(s):** Outpatient Mental Health Psychologist

**School:** University of North Dakota

**Internship:** Larned State Hospital (KS)

**Postdoctoral Fellowship:** Gulf Coast Veterans Healthcare System

**Licenses:** Alabama

**Duties:** Dr. Prazak practices in the Outpatient Mental Health clinic, providing group and individual therapy, assessment, and consultation as needed. He also provides training on clinical topics include psychodiagnostics and treatment recommendations to internship and fellowship trainees.

**Professional Interests:** Professional interests include diagnostic assessment, treatment of personality disorders, OCD, NSSI, suicidality, and SPMI. His theoretical orientation is integrated consisting primarily of brief, interpersonal dynamic and REBT. He also maintains research involvement, with present focus related to program evaluation, interpersonal behavior, and spirituality.

**Personal Interests:** Technology, reading, spirituality, animals, and film.

### Joni L. Utley, Psy.D.

**Title(s):** Clinical Psychologist – PTSD Clinical Team (PCT)

**School:** Regent University

**Internship:** University of Massachusetts Medical School/Worcester State Hospital

**Postdoctoral Fellowship:** VA Boston Healthcare System

**License:** Florida

**Duties:** Dr. Utley serves as the psychologist on the PCT, a specialty clinic within the Outpatient Mental Health clinic. She provides trauma-focused psychotherapy primarily to Veterans who have experienced combat-related PTSD, though she typically has a few Veterans she serves with symptoms related to childhood trauma, sexual trauma, and/or addictions. She leads multiple groups, including a dual diagnosis group as she has expertise in the treatment of co-occurring

PTSD and SUD. She also leads a PCT orientation clinic and conducts CAPS-5 evaluations for newly referred Veterans to the PCT. Typical treatment modalities include PE, CPT, TrIGR, Seeking Safety, COPE, WET, and STAIR. Dr. Utley is a VHA national trainer and consultant for the Motivational Interviewing-Motivational Enhancement Therapy Program.

**Professional Interests:** Dr. Utley’s professional interests include PTSD-SUD, motivation for change, complex patient presentations, EBPs, and Interpersonal Process-oriented group psychotherapy. Outside of the VA, Dr. Utley is a senior associate with Treatment Innovations, a company led by Dr. Lisa Najavits (developer of Seeking Safety), that provides workshops and consultation for trauma-informed practice. Additionally, Dr. Utley is a Commander (O-5) in the U.S. Coast Guard Reserve.

**Personal Interests:** Live music, spirituality, travel, dining, attending local festivals and events, running and fitness, raising her two daughters, and Saints football.

### Walter B. Ware, Psy.D., M.S.C.P.

**Titles:** Assistant Director of Intern Training, Clinical Psychologist - Acute Inpatient Unit

**School:** Regent University (PsyD-MS) and Fairleigh Dickinson University (MSCP)

**Internship:** Mississippi State Hospital

**License:** Mississippi, 2012 – present

**Duties:** Dr. Ware operates on one of the two units of the acute inpatient unit. Individual duties are variable but do include provision of group and individual psychotherapy services; psychological assessments for diagnostic clarification; provision and monitoring of brief outcomes assessments; neurocognitive screeners; oversight of formalized suicide risk evaluations; thorough chart summaries to examine for consistent behavioral trends; and other clinically relevant tasks that may be required. In addition to his clinical duties, Dr. Ware serves as the Assistant Director of Training for the Doctoral Internship program. Dr. Ware has previously worked within a PTSD Clinical Team, helped start and run a Substance Treatment and Recovery – Intensive Outpatient Program, and served a dual administrative-clinical role for a court-committed state hospital substance use treatment unit.

**Professional Interests:** Professional interests include the “mechanics” that underlie treatment approaches and theory, psychopharmacology, and acceptance-mindfulness-3rd wave behavioral therapies, amongst other topics. Theoretical orientation is primarily “3rd wave” cognitive-behavioral (primary influence is Acceptance and Commitment Therapy), but frequently includes variations of standard cognitive-behavioral, existential, solution-focused, and interpersonal theory into his overall conceptualizations and treatment approaches.

**Personal Interests:** Personal interests include regular exercise (cardio and weights), audiobook-driven outdoor walks, listening to music at cafes, peaceful water-based experiences, orchestral events, burning money on new electronic gadgets, VR and video games, and playing sports (primarily tennis, soccer-football, and baseball-softball).

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## APPLICATION INFORMATION

### Eligibility

Applicants for the internship program must be degree candidates in APA-accredited doctoral programs in clinical or counseling psychology who have fulfilled departmental requirements for internship as certified by their university training director. Only US citizens are eligible to receive stipend support. A physical exam certifying good health is required of applicants who are selected for the internship program at the Gulf Coast Veterans Health Care System. A security background check is also required.

### Stipend and Benefits

VA Headquarters in Washington, DC notifies us in January of each year of the budget that we will receive for the following internship year. The 2020-2021 stipend is \$26,234 per year. There are ten federal holidays, and interns accrue an additional 26 days of leave during the year. Additionally, interns are granted authorized absence for dissertation related activities and approved educational programs. Interns are eligible for optional Government Life and Health Insurance benefits.

### Applying

Application materials (AAPI) are located on the APPIC web site. **The application deadline is at 11:59 p.m. CST, Sunday, December 6, 2020.** We will receive your completed application when you select us as one of the sites for which you are applying. Our training program faculty will review your application via the Selection Portal of the APPIC site mentioned above. Applicants will be notified no later than December 21, 2020 as to whether they have been invited to interview. Interviews will take place **in person** and will be conducted during **January 2021**.

### Recommendations

We require letters of recommendation from at least three (3) supervisors who are familiar with your academic and applied performance in psychology. One (1) of these letters should be from individuals familiar with your academic work and two (2) from individuals familiar with your applied work (e.g., practicum placements). “Letters of Readiness” from a program’s Director of Training cannot be one of these letters of recommendation.

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## AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) ACCREDITATION

The Psychology Internship Training Program at the VA Gulf Coast Veterans Health Care System is accredited by the American Psychological Association (APA) and has been since 1980. Contact APA at: 750 First Street, NE, Washington, DC 20002-4242. Phone: (202) 336-5979. Visit the APA web site at <http://www.apa.org/>.

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## ASSOCIATION OF PSYCHOLOGY POSTDOCTORAL AND INTERNSHIP CENTERS (APPIC) MEMBERSHIP

The Psychology Internship Training Program at the Gulf Coast Veterans Health Care System is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and fully subscribes to their selection procedures and policies. This site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant. Please visit the APPIC web site to obtain additional information including the Uniform Application and Match Rules at <http://www.appic.org/>.

**APPIC Match Number: 140111**

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## CORRESPONDENCE

Send requests for information to:  
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