Durham VA Medical Center
Psychology Internship Training Brochure
CONTACT INFORMATION

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Match Number: 141411
Application Deadline: November 1st, 2021 11:59pm EST
Website: http://www.durham.va.gov/services/psychology-internship.asp

ACCREDITATION STATUS
The Durham Veterans Affairs Medical Center (VAMC) Psychology Internship Program is accredited by the Commission on Accreditation of the American Psychological Association (APA). The next site visit is scheduled to occur August 2023. For information regarding APA accreditation of this internship or other accredited internships, please write or call:

Office of Program Consultation & Accreditation
American Psychological Association
750 First Street NE
Washington, DC 20002-4242
202-336-5979
www.apa.org
LAND ACKNOWLEDGEMENT

The Durham VA Psychology Internship Program acknowledges that the lands our facilities occupy are the ancestral lands of the Shakori, Lumbee, Eno, Moratok, Neusiok, and Tuscarora people. Today, North Carolina recognizes 8 tribes: Coharie, Lumbee, Meherrin, Occaneechi Saponi, Haliwa Saponi, Waccamaw Siouan, Sappony, and the Eastern Band of Cherokee. We recognize those peoples for whom these were ancestral lands as well as the many Indigenous people who live and work in the region today.

COVID-19 IMPACT ON TRAINING

The COVID-19 pandemic has created numerous personal and professional challenges for us all. One of these challenges is uncertainty about what will happen next week, next month, and especially even a year from now. The Durham VA Medical Center Psychology Training Program has prided itself on its transparency, providing detailed and accurate information about our program and training opportunities. With COVID, transparency means we cannot definitively predict how specific rotations or adjunctive training opportunities may evolve for the 2022-2023 training year. With confidence, we can say that there will likely be more utilization of telehealth and technology-based delivery platforms. We do not expect there to be any significant changes to the base clinical services or populations served through rotations and adjunctive experiences described in our materials. With that being said, we have detailed some of the changes that have occurred below. However, due to the fluid nature of the situation, these changes may or may not continue throughout the training year. Although we have faced many challenges since the start of the pandemic, our dedication to high-quality clinical care and psychology training and our dedication to the trainees themselves has never been stronger.

Conditions of Psychology Training in Response to COVID-19

The Durham VA’s Mental and Behavioral Health Service Line (MBHSL) has applied a risk stratification approach to resuming in-person (face-to-face) care at our sites. The MBHSL is currently in Phase 2. During phase 2, as clinically indicated and with a clinically appropriate risk benefit assessment, clinicians provide face-to-face appointments for Veterans new to mental health and/or new to Durham VA. Although new intakes can be delivered via telehealth technologies (including VA Video Connect and telephone), clinical needs may suggest that a face-to-face visit will provide optimal care. Face-to-face care may be the preferred modality for new intake evaluations in trainee clinics for learning considerations. Currently, office-based outpatient work for trainees occurs 2 days per week (same days every week) with face-to-face care when the clinical benefits outweigh the clinical risks. When we enter phase 3 (currently projected to start September), the MBHSL will offer telehealth appointments whenever possible and feasible.

- The VA campuses have strict restrictions on patients or other members of the public visiting based on four levels of priority. Durham VA HCS has implemented universal
masking, meaning that anyone who enters our campuses is required to wear a mask, including patients who have outpatient appointments.

- Residential or inpatient settings are operating with limited in-person staff contact with patients. In-person contacts are currently allowed by trainees. Alternatively, patient contacts can be made through telephone or video visits. For in-person care, all residential and inpatient settings are practicing extra vigilant hand hygiene and social distancing, are using a gown/mask/glove protocol when appropriate and have a no visitor policy to the units.
- All trainees will continue to receive the required hours of weekly supervision (individual and group in-person or video is preferable, telephone only when needed). Trainees should expect routine supervisory observation using in-person or telehealth modalities, as well as co-treatment with supervisors and other licensed mental health staff.
- All didactics and seminars are currently held remotely. Any future in-person seminars will be planned with appropriate social distancing.
APPLICATION & SELECTION PROCESS

Eligibility
Candidates for the Durham VA Medical Center Psychology Internship Program must be US citizens enrolled in a doctoral (PhD or PsyD) clinical or counseling psychology graduate program, accredited by the American Psychological Association (APA) or Canadian Psychological Association (CPA), or clinical science programs accredited by Psychological Clinical Science Accreditation System (PCSAS). Candidates must be approved by their graduate program’s Director of Training as ready for internship and preferably have only minor dissertation requirements remaining. Candidates’ graduate programs must be accredited by APA, CPA, or PCSAS prior to January 1, 2022 to be considered eligible for Durham VAMC’s internship in the upcoming Match (i.e., matching for the 2022 – 2023 training year). Applicants must have a minimum of 300 hours of Intervention. Given that the COVID-19 pandemic impacts some applicants’ ability to accrue assessment hours, no minimum number of assessment hours is required. Preference is typically given to candidates who have supervised assessment and intervention experience with a range of psychopathology across diverse populations and settings, as well as supervised training in objective psychological test administration and interpretation. Preference is also given to candidates whose training has included both integration of individual and cultural diversity factors across professional roles and a thorough grounding in research design and application. Male applicants born after 12/31/1959 must have registered for the draft by age 26. VA is unable to consider applications from anyone who is not currently a U.S. citizen. Verification of citizenship is required following selection. All interns must complete a Certification of Citizenship in the United States prior to beginning VA training.

Matched interns are subject to fingerprinting, background checks, and urine drug screens (which might occur as a random screening, during the internship). One of the most misunderstood issues in this area is with regard to the recreational and medical use of marijuana (cannabis) as well as products containing THC (tetrahydrocannabinol) or CBD (Cannabidiol). Some trainees assume that having a prescription for marijuana/cannabis, being matched to an internship program that is located in a jurisdiction that allows the recreational use of marijuana/cannabis, or obtaining a medicine over-the-counter (e.g., CBD oils) means that their use of these substances will be acceptable to internship programs. However, VHA, which includes the Durham VA Internship Program, prohibits the use of marijuana/cannabis, THC, and/or CBD in all circumstances and must terminate a trainee who tests positive regardless of medical need, the presence of a prescription, the fact that it was obtained over-the-counter, or its legal status.

Match results and selection decisions are contingent on passing these screens. Matched interns are also required to meet the essential functions (physical and mental) of the training program and to be immunized following current Center for Disease Control (CDC) guidelines and VHA policy for healthcare workers to protect themselves, other employees and patients while working in a healthcare facility. Like the influenza vaccine, VHA mandates that all VHA
health care personnel, including Psychology Interns, be vaccinated for COVID-19. This requirement is met by verification through the intern's doctoral program Director of Clinical Training (DCT). The DCT must verify that the intern has satisfactory health to perform the duties of the clinical training program, a recent TB screen, and Hepatitis B vaccination or signed declination waivers. Please click on the following link for more detailed information on eligibility to train in a VA setting.

We seek applicants who have a sound clinical and scientific knowledge base from their academic program, as well as strong skills in assessment, psychotherapy, and research techniques. Further, we seek applicants who practice cultural humility and value social justice advocacy as it relates to psychologists' ethical obligation to ensure that they “exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices” (APA Code of Ethics – Principle D: Justice, 2017). Our selection criteria are based on “goodness-of-fit” with our training opportunities. We prefer to build an Intern class that comes from many different kinds of programs and theoretical orientations, from different geographical areas, of different ages, of different cultural backgrounds, and with different life experiences.

Very strong candidates for our internship would be those who have achieved one or more of the following in their graduate school and practicum experiences:

- **Intervention:** 500 intervention hours accrued in quality settings with populations consistent with our site (e.g., military personnel or Veterans, hospitals, adults, severe psychopathology, diverse and/or underserved), and experience with at least one empirically supported treatment.
- **Assessment:** 150 assessment hours, at least 5 integrated reports, and good experience with diagnostic interviewing and utilizing sound personality and cognitive assessment instruments.
- **Scholarship:** Research productivity as evidenced by one or more first author publications in a quality peer-reviewed journal or several peer-reviewed publications for which the applicant is a contributing author.
- **Commitment to Diversity, Equity, and Inclusion:** Demonstrable pattern of valuing diversity through academic activities (e.g., practicum experiences targeted to diverse and/or underserved populations; research experiences targeted to diverse and/or underserved populations; focused coursework) and in their applications and interviews.
- **Individual Diversity:** Demonstrated through non-traditional activities (e.g., holding multiple jobs to finance education, advocacy/outreach/service activity, volunteer work, lived experience).
Application
As a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC), the Durham VAMC internship participates in the computer matching program and adheres to all APPIC policies. Internship applications are submitted electronically. To submit an application, please go to the APPIC website (www.appic.org) for instructions on how to complete the online APPIC Application for Psychology Internships (AAPI).

Instructions and forms for the Applicant Agreement form required for the Match from the National Matching Program may be downloaded at web site at www.natmatch.com/psychint. Applicants who cannot access the website should contact National Matching Service (NMS) directly to request instructions and registration forms.

Interested individuals who meet eligibility criteria must submit the following materials:

- APPIC Online Application for Psychology Internship (AAPI)
- Cover letter indicating interests & a rank-ordered list of your top 4 preferred rotations
- Curriculum vitae
- Official graduate transcript(s)
- 3 letters of reference (addressing clinical and research experience)

APPLICATION DEADLINE:
11:59pm (EST)
November 1, 2021

INTERVIEWS
Top candidates will be invited for virtual interviews, which will occur on the four dates listed below. Please be sure to indicate an email address and a daytime telephone number in your application materials so you can be reached to schedule an interview. Inquiries may be made via e-mail at Jessica.Fulton@va.gov.
Invitations to interview will be issued by electronic mail, no later than December 3, 2021. Individuals who do not interview virtually will not be considered for selection through the APPIC Match.

**SELECTION**

The Durham VA Psychology Internship Program is a member of APPIC and complies with all APPIC guidelines in the recruitment and selection of interns, and participates in the NMS Match program. We abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any Internship applicant. A complete copy of APPIC policies and the computer matching program can be found at the APPIC website, http://www.appic.org/.

Successful candidates who match with the Durham VAMC Internship will be contacted by phone and e-mail, as part of discussions regarding rotation assignments. For 2022-2023, the Internship Program training year begins on August 1, 2022.

“The Durham VA’s commitment to quality training and the well-being and satisfaction of trainees is unparalleled. Even in the midst of a global pandemic, I felt supported and respected. The Durham VA staff and leadership really stepped up, adapted quickly and flexibly, and consistently worked overtime to ensure the best overall experience and training! These characteristics were well-established and observable pre-COVID, but when put to the test, Durham VA staff and leadership did not falter. An excellent hospital and training facility all around.”

- 2019-2020 Intern
PROGRAM DESCRIPTION
The Durham VA Medical Center (VAMC) Psychology Internship is located in Durham, NC, the most ethnically diverse of the major communities in the state. The veteran patient population is similarly diverse, and providers serve intergenerational Veterans from a wide range of ethnic, religious, disability status, sexual orientation, and gender identities.

The Durham VAMC Internship Program provides a one-year (12-month), full-time training experience for clinical and counseling psychology doctoral (PhD or PsyD) students from APA- or CPA-accredited programs. The program provides broad-based, culturally responsive, generalist training in clinical assessment, intervention, consultation, research/scholarly inquiry, and clinical supervision. The Program has been in existence for more than 40 years and is accredited by the APA’s Commission on Accreditation. Our program adheres to a scientist-practitioner philosophy of training. Psychology faculty are committed to contributing to the development of well-rounded, competent clinical psychologists prepared for the independent practice of health service psychology, as well as developing clinically-informed researchers and faculty. Many faculty members have joint academic appointments at our primary affiliate, Duke University Medical Center, as well as other nearby academic institutions (e.g., University of North Carolina – Chapel Hill). The Durham VAMC and its research programs also offer opportunities for postdoctoral psychology training.

With psychology training staff who are dedicated to the professional development of our trainees, this setting provides the intellectual stimulation associated with a university teaching hospital providing state-of-the-art clinical care and health care research delivered in a region filled with a variety of recreational and cultural opportunities. Culturally and socially responsive practice is integral to the mission of our training program at the Durham VA. We recognize the importance of acknowledging and supporting individual differences in our trainees, and within relationships between our trainees, staff, and patients. We work to identify, respect, and nurture the unique personal attributes that an individual brings to each relationship, and believe that fostering a culturally rich and diverse training environment is foundational to a strong training program, and to nurturing professional psychologists capable of providing culturally sensitive, socially responsive, and patient-centered care. To that end, we promote an awareness of, and sensitivity to, individual and cultural diversity identities across multiple settings during the training year through discussions during supervision, seminars, and workshops.

“The program does not take a ‘one size fits all’ approach to training. In each of my rotations, my supervisors talked with me about my specific training goals. They then made efforts to provide me with the instruction and clinical experiences needed to meet these individualized goals and regularly checked in with me about my progress.”

-2017-2018 Intern
TRAINING MODEL & PROGRAM PHILOSOPHY

Our program adheres to the scientist-practitioner philosophy of training. We provide training in and encourage use of evidence-based psychological practice. Our developmental training model emphasizes the progression from graduate student to professional ready for entry-level independent practice in psychology. The primary focus of the internship year is graduated experiential learning. Competencies in professional practice are developed through clinical practice, supervision, didactic training and mentorship. Delivery of patient care is secondary to the educational mission of the internship. Interns play an important role in selecting their own training opportunities and developing training plans to meet their specific needs.

PROGRAM AIMS

The Durham VAMC internship program’s overarching aim is to prepare interns for success in their postdoctoral and entry-level employment within the profession of psychology. For most of our interns, their career paths include work in academic medical centers, VA medical centers, academic appointments, or other research settings. In support of the intern’s prior education and training, we provide culturally responsive, generalist training to prepare interns for practice in clinical, research, or academic settings. Through modeling and the training experiences of the internship, the importance of clinical practice that has its foundation in the science of psychology is stressed. The program formally integrates science and practice in many ways including didactic seminars on practice issues that are based on current empirical literature, the use of empirically-validated and -supported assessment and clinical interventions, and encouragement and provision of administrative leave to attend scientific meetings. Our goals are consistent with the Durham VAMC’s mission to provide quality care to Veterans, while advancing state of the art services through research and education. Consistent with APA’s Standards of Accreditation, our program has nine primary goals.

“I loved my training year at the Durham VA. I always felt supported and like there was a wide variety of people I could go to for support, from my supervisors, my professional development mentor, and the training director. Everyone seemed genuinely interested in my training goals and wanted to make sure rotations were meeting the experiences I wanted.”

-2020-2021 Intern
Interns develop entry-level competency in the following areas:

- Research
- Ethical and legal standards
- Individual and cultural diversity
- Professional values and attitudes
- Communication and interpersonal skills
- Assessment
- Intervention
- Supervision
- Consultation and interprofessional/interdisciplinary skills

These competencies are developed through 4 major program components:

1. Experiential clinical training
2. Didactic training
3. Experiential training in evaluation and research/scholarly inquiry
4. Supervision and mentoring

PROGRAM STRUCTURE

The internship year is divided into six-month semesters for purposes of clinical rotation assignments. Each Intern participates in two rotations per semester, and rotation assignments are based on consideration of both the Intern’s interests and identified training needs. Every effort is made to assign a set of clinical rotations that will balance the intern's training goals and interests with training needs to ensure a broad range of clinical experiences.

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<th>August –March</th>
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The required workweek generally ranges from 40-45 hours. Clinically-related activities comprise approximately 70% of the intern's time each week. The remaining time is devoted to mentorship meetings, research/program evaluation, didactic training, and administrative activities.

“The overall structure is a strength of this training program. It has allowed me enough time to achieve competence within a given area, while also enabling me to explore a number of different content areas.”

-2017-2018 Intern
Supervision
The Durham VA Medical Center Internship Program consistently receives high marks from interns for the quantity and quality of supervision available to them. Our supervisors adhere to a developmental model of supervision and are dedicated to empirically based practices. VA is strongly committed to making evidence-based psychotherapies (EBPs) widely available to Veterans and has developed and implemented competency-based EBP staff training programs nationally in VA. We are fortunate that the majority of our staff hold provider status in at least one of the many EBPs (e.g., Cognitive Behavioral Therapy for Chronic Pain, Acceptance and Commitment Therapy for Depression). Our psychology supervisors also serve as training consultants for VA dissemination programs, including: Motivational Interviewing/Motivational Enhancement Therapy, Cognitive Behavioral Therapy for Insomnia, Prolonged Exposure, and Cognitive Processing Therapy. In addition to receiving formal didactic training and opportunities to implement these interventions, interns have the opportunity to bank credentials for VA provider status in Cognitive Processing Therapy during internship. Regarding the structure of supervision, interns receive at least 4 hours of supervision each week – two or more of those hours are individual supervision – and will find staff available and open to additional, unscheduled supervision sessions when needs arise. Given the unparalleled value of direct observation in the trainee’s development, this is the primary supervision modality used across rotations. Other modalities of supervision are also utilized, including review of audio/video recording, case discussion, and case presentation.

Research / Scholarly Inquiry
Participation in research/scholarly activity is required of interns throughout the year. One half-day each week (4 hours) of training time is protected for research or program evaluation activities. The Durham Medical Center is home to a vast network of research endeavors, many in conjunction with the Mid-Atlantic (VISN 6) Mental Illness Research Education and Clinical Center (MIRECC), Durham Center for Health Services in Primary Care, and Duke University Medical Center. Interns typically have three types of staff involved in research training. First, their Clinical Rotation Supervisors are responsible for evaluating the Intern’s competencies, which
includes research competencies and goals, on a quarterly basis. Those supervisors will communicate with the Intern throughout the year, quarterly at a minimum, about progress toward the Intern’s research goals. The second type of staff involved in the Intern’s research training is their Research Mentor. At the beginning of the year, Interns will have the opportunity to meet potential research mentors and will be asked to select a research mentor. The Research Mentor is the Intern’s primary point of contact for mentoring the Intern in their research-related activities on internship. Interns are encouraged to seek out VA clinicians and researchers whose interests align with their own as a strategy for not only identifying potential research mentors, but to build skill in establishing research collaborations. The third type, research collaborators, are any individuals (in addition to the Intern’s Research Mentor) who have ongoing research or program development/evaluation projects and have invited Interns to contribute. These working relationships are quite variable in nature and scope and are negotiated at the outset.

Although proposing and implementing a research protocol during the internship year is likely not feasible due to VA Institutional Review Board timelines, psychology staff and affiliated training program staff have active research programs with which Interns may become involved including posttraumatic stress disorder, psychological assessment, smoking cessation, sleep disorders, chronic pain, and health services research. To foster effective use of outlets for academic communication and research dissemination, Interns are invited to formally present their scholarly work to the psychology faculty through research talks, job talks, and a research poster session. Participation at professional meetings is encouraged, and professional development time (authorized absence) supports these activities. Common research activities of Interns include journal article review, program development and evaluation, manuscript preparation, and qualitative or quantitative literature review.

Interns are often eager to complete/continue work on their projects from previous training/work settings, and we are eager to support that work. Interns are encouraged to consider small-scale or time-limited commitments to VA projects, even if they have other non-VA opportunities, to allow them to learn more about research work in this setting. Ultimately, Interns can opt out of VA-based research opportunities to focus on ongoing non-VA research if they desire.
DIVERSITY

Our program is predicated on the idea that increased self-awareness and appreciation for other worldviews and cultures makes psychologists more effective clinicians, consultants, researchers, educators, and advocates. We believe that diversity among departmental members strengthens our staff, stimulates creativity, promotes the exchange of ideas, and allows us to provide more sensitive and effective patient care. Diversity, equity, and inclusion permeate and inform all training, policies, and practices of the Internship Training Program. While we have required didactics, we aim to infuse individual and cultural diversity into every aspect of our curricula. Durham is a richly diverse city, home to a greater makeup of ethnic minority groups than any of the five largest cities in North Carolina. Durham is also home to a large and thriving LGBTQ community, and was named the Most Tolerant City in the US in 2012 by The Daily Beast. Of note, our facility is listed in the Health Care Equality Index as a leader in LGBT healthcare. Further, the LGBT Veteran Care Coordinator for the Durham VA HCS is a staff psychologist who contributes to training in both our Internship and Fellowship Programs.

“My internship year at the Durham VA has been truly restorative. I have learned so much and formed many amazing relationships with staff and fellow trainees. Everyone at this site works very hard to get trainees the training they want, and I have benefited immensely from this focus on trainees. I could not imagine a better year of internship!”

- 2018-2019 Intern
**Belonging, Representation, Equity, Accountability, and Learning Initiative**

Our Belonging, Representation, Equity, Accountability, and Learning (B-REAL) Initiative works collaboratively to advocate and foster awareness and knowledge about individual and cultural diversity, equity, and inclusion. The Initiative seeks to accomplish this by creating a welcoming, equitable, and inclusive atmosphere that promotes open dialogue about issues of culture and diversity while promoting the safety, well-being, and success of all within our department and the larger VA system. Interns are welcomed and encouraged to participate in our B-REAL initiative and diversity training activities.

The B-REAL initiative aims to create an atmosphere where consideration of diversity is intuitive in the practice of psychology and to cultivate a culture of acceptance and inclusion in which diversity is integral, authentic, intrinsically valued, and visible. To that end, the initiative incorporates diversity as a central component of our training for staff and trainees at all levels through continuous discussion and training. Specifically, the initiative organizes Lunch and Learn Seminars, Roundtables, and the Diversity Mentorship Program.

**Diversity Lunch and Learn Seminar Series**

The Lunch and Learns are designed as a space for post-doctoral fellows to develop skill in facilitating discussions on an area of interest within the broader domain of diversity. Discussions are meant to be approached without any assumed expertise on the part of the fellow or staff facilitators and will not be evaluated in any formal manner by attendees. Articles/chapters are commonly used to supplement discussion and learning.

**Diversity Roundtable**

Diversity Roundtable is a communitarian, experiential, and process-oriented forum on diversity, equity, inclusion and belonging. This optional monthly workshop is attended by staff and trainees, facilitated by Dr. Craig Libman. Interns are encouraged to attend and participate; previous intern classes have been instrumental in advancing and refining programming for the Roundtable. The Diversity Roundtable aims to challenge white supremacy, patriarchy, and prevailing social hierarchies, and promote racial, ethnic, gender, class, and age/ability equity and inclusion. This forum serves as an open, nonjudgmental space for the psychology department to continually explore and advance their culturally responsive practice and awareness of multicultural and social justice issues.

“At the DVAMC, I've deeply appreciated serving a very diverse Veteran population. Such experiences vastly refined my clinical skills while simultaneously enriching my multicultural sensitivity.”

-2014-2015 Intern
Diversity Mentorship Program

The Internship Program created a Diversity Mentoring Program to enhance the training experience of psychology trainees. We believe that attention to individual differences and diversity is vital to the development of competent psychologists. The purpose and goals of the diversity mentoring program include (1) providing psychology trainees the opportunity to discuss diversity-related experiences with someone who is supportive and not in an evaluative role for the trainee, (2) to develop a mentoring relationship with someone who is not a direct supervisor of the trainee’s clinical work, and who can offer guidance and support in navigating diversity-related experiences during the training year, and (3) to support the development of psychology trainees both personally and professionally, particularly as it relates to issues surrounding diversity. Aspects of the diversity mentoring program, the professional development mentoring program, and the research mentoring program may at times overlap. However, the diversity mentoring program is an optional experience for trainees designed to facilitate discussions specifically related to issues of diversity, equity, and inclusion as relevant to the Intern’s professional identity and development. Mentoring meetings may include such activities as discussion of recent diversity related interactions (e.g., interactions with staff, Veterans, colleagues), discussion of topics related to diversity, discussion of professional development issues related to diversity, and review of journal articles or other literature related to a diversity topic of interest.
What Interns Have to Say about Diversity Mentorship

“The Diversity Mentorship program is a unique and cherished aspect of the training program. My diversity mentor facilitated a space where we could openly explore how each of our identities intersected with one another and the impact that this had on how we approach clinical work, supervision, research, and form our identity as a psychologist. This experience significantly reduced my emotional stress.”

-2020-2021 Intern

“During my training year, the Durham VAMC incorporated the option to have a Diversity Mentor through the year. I found this mentorship program invaluable during my training and development. I chose a mentor who was a person of color and could provide support and validation as I navigated the clinical and professional challenges through the year. I am a person of color who firmly believes that representation matters and having a mentor of color gave me space to voice my thoughts and feelings associated with working in a predominantly white environment and working as part of the VA system. I enjoyed and benefitted from her thought-provoking questions and resources, as well as her overall supportive demeanor and empathic listening approach. I believe this gave me the space to openly reflect on professional identity development aspects influencing my professional development and career goals.”

-2020-2021 Intern

“This mentorship program provides a welcomed opportunity to have dedicated space just to discuss diversity related topics. During my mentorship meetings I was able to discuss things such as current events related to DEI, institutionalized racism and white supremacy within the VA, my own identity factors and the work I was doing related to DEI, and specific case consultation needs related to diversity factors. I found the case consultation to be one of the most helpful parts of diversity mentorship. This is an area I often feel does not get enough ‘air time’ in supervision because there are so many factors to balance in a short period of time. Diversity mentorship gave me the opportunity to really explore identity factors of the Veterans I work with and how they might interact with my own identity factors and the broader VA system as a whole. I felt that this experience helped me to serve my clients more effectively and helped to keep DEI work at the forefront of my clinical work.”

-2020-2021 Intern
PROFESSIONAL DEVELOPMENT

The internship year provides extensive opportunities for professional development. Professional growth and development over one's career are paramount to success as a psychologist. Therefore, in addition to informal mentoring by rotation supervisors and other training staff, each Intern will choose a mentor for professional development for the training year. Professional development mentors help the Intern negotiate the internship program, develop post-internship goals, and work toward completion of program requirements. Generally, Interns are encouraged to seek mentors who are not their clinical supervisors to maximize the collaborative and non-evaluative aspects of this mentoring relationship.

EVALUATION

Training needs/goals are elucidated through the development of individualized training plans. In addition to having broad training goals, rotation assignments help Interns narrow and identify targeted goals unique to each clinical setting. Ongoing communication between interns and supervisors allows for continuous feedback and refinement of goals. Progress is also monitored through an ongoing liaison between the internship Training Director and the intern's graduate program. Quarterly competency assessments of intern performance are completed by rotation supervisors and help direct and evaluate progress toward training goals. Competency assessments are shared with respective graduate programs. Interns are also asked to provide anonymous evaluation of rotation experiences and supervisors to foster ongoing improvements of the program.

2020-2021 Interns Katherine Kelton, Melanie Roys, Alex Lipinski, Tate Halverson, Jamie Smith, and Sam Peter.
ACUTE MENTAL HEALTH
Psychology Faculty: Josh Tiegreen, PhD

The Acute Mental Health (AMH) rotation provides training on an acute inpatient psychiatric unit. The full spectrum of psychopathology and functional decline is assessed and treated in clinical settings. In addition, challenging ethical, social, and legal issues are addressed as part of this clinical training experience. This rotation is particularly well-suited for interns interested in developing new skills and enhancing their proficiency in psychological and neuropsychological assessment. This rotation provides interns with exposure to patients experiencing the full range of acute and chronic serious mental illness. There are three primary components to this rotation: 1) individual psychosocial rehabilitation and recovery services, including brief psychotherapy, 2) group therapy, and 3) assessment.

The Psychiatric Acute Recovery Center (PARC) offers a wide range of patients with acute psychiatric disorders and exacerbation of chronic disorders who are admitted to the inpatient psychiatry unit. Psychological services are provided on a consultation basis. Interns assume a significant role as members of the multidisciplinary treatment team, which provides many opportunities for growth and development of competence and professional identity. Interns gain experience in many treatment modalities including brief psychotherapy, group psychotherapy, and psycho-educational groups. Interns participate in interdisciplinary case conferences with patients and their families. In addition, interns develop clinical interviewing skills and receive extensive experience in objective psychological (MMPI-2, PAI) and neuropsychological screening / assessment. With this training, interns learn to identify a rationale for the assessment, construct a test battery, organize and report data, and answer referral questions.

“I came to internship wanting to gain a wide range of experiences, and training experiences were tailored to my goals...I am leaving internship with an array of skills that will be invaluable to me.”

-2015-2016 Intern
The Substance Use Disorders (SUD) Clinic - The Substance Use Disorders (SUD) Clinic provides outpatient services to Veterans diagnosed with SUD. Many Veterans have comorbid disorders, including serious mental illness, providing the opportunity to assess and treat individuals with complex psychological profiles. The intern functions as a member of a multidisciplinary outpatient SUD team providing psychological assessment and treatment. Assessment experiences include conducting evaluations in the SUD screening clinic, where the intern develops clinical interview skills needed to assess the nature and severity of SUDs as well as other psychological, social, and health problems. The intern also has the opportunity to perform more comprehensive psychological assessment of Veterans with substance use disorders, including administration of personality assessment and/or cognitive screening measures. The intern is able to develop group therapy skills with this population by co-leading/leading a weekly group, typically CBT targeting either initial change in use or relapse prevention. In addition to this group treatment, the intern follows several cases individually. Given the heterogeneous nature of the clinic population, individual cases provide the opportunity to treat both SUD and co-occurring mental health problems. Overall, the SUD Clinic training experience emphasizes evidence-based treatments, drawing most strongly on cognitive-behavioral and motivational enhancement approaches. Among these is CBT-SUD, an evidence-based intervention that is part of the VA national EBP dissemination program. Dr. McNiel is a consultant for this initiative.

The Tobacco Cessation Clinic – All interns on the rotation have the opportunity to work with Veterans on tobacco cessation, which is historically a considerably under-addressed area of focus in mental health settings. Emphasis is on motivational and cognitive-behavioral interventions, consistent with the goals of increasing readiness to quit and carrying out specific behavioral changes in support of cessation. As part of this experience, an intern may have the opportunity to co-lead/lead the Tobacco Cessation Clinic, a comprehensive group therapy program that includes motivational enhancement, cognitive-behavioral coping skills training, relapse prevention strategies, effective utilization of social support, and facilitation of pharmacotherapy (e.g., nicotine replacement therapy).
The Rehabilitation, Geriatric, Palliative, and Hospice Care rotation offers interns the opportunity to gain experience across several settings and with diverse patient populations with respect to disease states, sociodemographic characteristics, mental health issues, and life experience. The Durham VAMC Community Living Center (CLC) is a 100-bed unit that provides medical rehabilitation, long-term residential care, hospice care, and a caregiver respite program. Patients admitted for rehabilitation often present with orthopedic injuries, cerebrovascular accidents, limb loss, and other medical and neurological conditions along with adjustment, mood, anxiety, and behavioral concerns that may impact recovery. The Palliative Care Consult Team and Hospice Unit serve patients with chronic or life-limiting illness. Palliative Care is integrated into services throughout the hospital and to outpatients followed by the Palliative Care Consult Team. Interns have the opportunity to assess and treat adjustment and grief reactions, pain and symptom management, and existential angst. Interns gain a comprehensive understanding of factors influencing patients’ physical and mental health in the context of physical illness/disability while working with an interdisciplinary team that includes medicine, psychology, psychiatry, pharmacy, social work, nursing, dietetics, physical medicine, occupational therapy, physical therapy, recreational therapy, and restorative therapy. Psychological Interventions: Individual, couples, family, and group psychotherapy; behavioral modification plans, behavioral medicine interventions. Cognitive, behavioral, and acceptance-based therapies used depending on presenting complaint and context. Reminiscence, dignity, and life review therapies also used in palliative and hospice care. Psychological Assessment: Assessment consults focus on emotional functioning and adjustment to medical illness. Learning opportunities include brief and in-depth assessment of cognitive status, including decisional capacity. Recommendations are made to interdisciplinary team regarding treatment plan and discharge options (e.g., behavioral plan for disruptive behavior, level of care required for least restrictive community). Consultation: Weekly interdisciplinary team case presentations, individual case consultation. Program Development: Interns are invited to develop programs (e.g., groups) based on intern interest and patient need.

“My rotation in the CLC was so invaluable. Not only did it broaden my skill set working on a medical unit but provided me the opportunity to be truly integrated into a medical team where my voice as an intern was heard and valued.”

-2017-2018 Intern
The Outpatient Mental Health rotation provides an opportunity for a comprehensive training experience in a general outpatient mental health clinic, where interns can develop treatment-intervention skills across a full range of clinical problems and psychopathology. Primary responsibilities include:

- Diagnostic/personality evaluations with well-articulated case formulation
- Evidence-based individual and couple psychotherapies
- Developing proficiency with group interventions (e.g., anger management, Unified Protocol, DBT Skills)
- Working on a Behavioral Health Interdisciplinary Program (BHIP) Team

More intensive training experiences are available, such as specialized training in Anger-Management Program (a 3-part group series) or targeting a specific population or therapy approach, depending on intern interests.

From the intern's perspective, the OMH rotation provides an opportunity to refine conceptual, diagnostic, and psychotherapy skills with complicated and puzzling cases. Referrals to this rotation typically involve patients with multiple diagnoses and complex problem combinations, including, but not limited to: depression, panic, OCD, mood and anxiety dysregulation, PTSD, personality disorders, problematic anger and aggression, couple/marital conflict, acute psychological distress, psychosis, and sexual dysfunction. Because of the complexity and diversity of cases, the intern has an excellent opportunity to refine the timing and delivery of psychotherapy interventions in the context of multifaceted challenges. Therapy plans incorporate empirically supported treatment protocols (e.g., CPT, full model DBT), acute crisis management, brief psychotherapies, positive-psychology interventions, psychoeducational programs, and occasionally, more extended dynamic interventions.
The Raleigh II Community Based Outpatient Clinic is a multidisciplinary team comprised of members from psychology, psychiatry, social work, nursing, chaplaincy, and peer support. The clinic provides outpatient mental health services to a diverse population of Veterans spanning all service eras and symptom presentations in the Raleigh area. Interns will gain experience working in an urban mental health clinic setting and may select training goals related to: EBPs for trauma-related symptomatology (e.g. prolonged exposure, cognitive processing therapy, CBCT-PTSD); depression/anxiety (e.g. cognitive behavioral therapy, acceptance and commitment therapy); insomnia; chronic pain; psychoanalytic/psychodynamic therapy. Interns can also gain experience with intake assessments and co-lead a variety of psychoeducational and treatment groups. This rotation is designed to provide a unique CBOC training opportunity, as well as to meet the individualized training goals of each intern. As such, the rotation will include generalist outpatient training with a broad range of treatments/populations, and interns may choose to obtain specialty training in one (or potentially more than one) of the following areas:

- PTSD treatment and assessment (PE, CPT, CBCT-PTSD, CAPS assessment)
- OEF/OIF/OND Veterans (caseload emphasis on this population)
- Older Adult Veterans (caseload emphasis on this population)
- Assessment (diagnostic assessment and treatment planning)
- Acceptance and Commitment Therapy Group for Anxiety and Depression
- Vietnam Veteran Support Group for Combat Veterans
- Mindfulness-Based Intervention Group Therapy
- Group and Individual CBT-Insomnia Treatment
- Group and Individual Chronic Pain Treatment
- Couples Communication Group Therapy

The goal at the end of this training experience is to develop advanced skills related to treatment planning, delivery of evidence-based treatments in areas of interest, monitoring progress through measurement-based care, and working collaboratively with professionals.
HEALTH PSYCHOLOGY
Psychology Faculty: Natasha DePesa, PhD

The Health Psychology rotation offers experience in assessment and intervention with Veterans with a wide range of medical and health-related concerns and representing various service eras, identities (individual, racial, cultural, religious), age, gender, and socioeconomic status.

- Interns will have the opportunity to conduct individual intakes focused on assessment of biopsychosocial factors that influence functioning and mental health. Common referrals include chronic pain, adjustment to chronic illness or changes in functioning, distress about (unexplained) medical symptoms, medication adherence concerns, and behavioral health concerns (e.g., diabetes management).
- Interns will have at least one group therapy experience on rotation and typically serve as co-facilitators alongside a supervisor and/or postdoctoral fellow. Available groups will vary based on assigned rotation days and clinical needs, but possible experiences include: CBT for Chronic Pain, ACT for Chronic Illness, CBT for Insomnia, and Progressive Tinnitus Management.
- Interns will maintain a small individual therapy caseload based on training goals and clinical needs. Individual therapy within Health Psychology is evidence-based and time-limited (typically 4-12 sessions). Common treatment modalities include CBT for chronic pain, insomnia, and other medical complaints (e.g., IBS); ACT for coping with chronic illness; and MI for health behavior change.

“The psychology staff at the Durham VA are second to none. They all seem to be genuinely interested in us as trainees and committed to helping us in any way they can - whether it be professional development, clinical acumen, research chops, or navigating work/life/"what am I doing with my life" questions.”

-2017-2018 Intern
The **Home-Based Primary Care (HBPC)** rotation offers trainees the opportunity to provide in-home primary medical care and psychosocial services for Veterans whose chronic medical conditions have made it difficult or impossible to access the outpatient clinics for the medical care they need. HBPC serves (1) Veterans with multiple interacting chronic medical problems requiring longitudinal intervention to maintain health status, prevent functional decline, and reduce or delay institutionalization; (2) Veterans with relatively short-term problems, who need health services, home training, and home adaptation until they can be managed in an outpatient clinic, and (3) Veterans with advanced terminal illness who want palliative care. The HBPC Veteran population tends to be older in age. Therefore, HBPC is an excellent rotation to gain a solid foundation of common medical conditions in older adults and how those conditions may impact overall mental and cognitive health.

The psychology trainee becomes an active part of the HBPC program interdisciplinary team, which includes medicine, occupational therapy, physical therapy, nursing, nutrition services, pharmacy, psychology, and social work. A wide variety of psychological services are provided to HBPC clients by the psychology trainee. These services include (but are not limited to):

- psychological assessments, including cognitive and capacity evaluations
- individual and caregiver/family therapy for depression, anxiety, caregiver stress, and other forms of emotional distress
- interventions to address pain, sleep, weight management and tobacco cessation
- consultation with treatment team about methods of enhancing patient adherence to treatment regimens
- utilization of telehealth interventions for provision of services
- in-services to treatment team on psychology-relevant topics

Evidence-based psychotherapies are emphasized. Theoretical orientations utilized include cognitive, behavioral, and acceptance-based and mindfulness-based therapies. The Durham VA HBPC Program operates teams at two sites: Durham (based at VA offices in RTP) and Clayton (based at the Clayton/East Raleigh VA Clinic). Trainees can select a rotation at either site. Trainees will see Veterans within a 10-mile radius of the HBPC site. For Durham, this includes the cities of Durham, Hillsborough, and parts of Chapel Hill. For Raleigh, cities include Raleigh, Garner, and Knightdale. Trainees will have access to a government vehicle to use for home visits.
The *Neuropsychology Clinic* provides training in neuropsychological assessment in two outpatient clinic settings. Veterans may be evaluated in the OEF/OIF/OND clinic, where the primary focus is traumatic brain injury. Older adult veterans are often referred for dementia evaluations taking place in the general neuropsychology clinic. Referrals come from primary care, psychiatry, neurology, and other specialty clinics of the hospital. Common reasons for referral include concerns about neurocognitive and behavioral symptoms related to neurological, psychiatric, and other potentially contributing conditions and events (e.g., Alzheimer’s disease, vascular dementia, Parkinson’s disease, head trauma, stroke, epilepsy, multiple sclerosis, brain tumors, neurodevelopmental disorders, substance use, mood disorders, and others). Through didactic and experiential training, interns will develop skills in the following competency areas: diagnostic interviews and neurocognitive status exams; design of flexible test batteries to address referral questions; neuropsychological test administration, scoring, and interpretation; preparation of evaluation reports; development of recommendations; and provision of feedback to patients. Consistent with the developmental training framework of the internship program, supervision typically progresses over the course of the rotation from a more didactic focus on specific clinical skill building to an increased focus on supporting the development of professional autonomy and clinical decision-making. Training expands the intern’s existing knowledge base in brain-behavior relationship, psychopathology, and the neurosciences, and advances the intern’s development as a scientist-practitioner.
The Operation Enduring Freedom/Iraqi Freedom/New Dawn (OEF/OIF/OND) Program includes a multidisciplinary team (Psychology, Psychiatry, Social Work Case managers, Nursing Case Managers, Speech-Language Pathology, Neurology) devoted to comprehensive care of Veterans returning from ongoing conflicts in Iraq and Afghanistan with physical, cognitive, and/or mental-health related concerns. Psychology faculty focus on delivering empirically supported assessment and treatments for common post-deployment concerns such as PTSD, depression, and other anxiety disorders in individual and group modalities. Interns will have the opportunity to obtain specialty training and practice in empirically-supported PTSD treatments (i.e., Cognitive Processing Therapy and Prolonged Exposure). OEF/OIF Veterans typically exhibit complex presentations including multiple diagnoses (e.g., PTSD with comorbid depression and SUD), and treatment often includes accommodation for medical comorbidities and cognitive sequela associated with Traumatic Brain Injury (TBI). Some examples of additional potential training opportunities include full-model Dialectical Behavioral Therapy (DBT) for individuals with complex presentations including emotion regulation deficits and related sequelae; Acceptance and Commitment Therapy for Depression (ACT); Unified Protocol for Emotional Disorders; Cognitive Behavioral Therapy for Insomnia (CBT-I); or Cognitive-Behavioral Couples Therapy (CBCT) for PTSD or general couples therapy, such as Integrative Behavioral Couples Therapy (IBCT). Should Interns elect to engage in DBT training, they will be fully-integrated into the DBT team, engaging in DBT consultation, providing individual DBT therapy, and co-facilitating DBT Skills groups.
The Palliative Care and Consult-Liaison Services rotation provides training in working with Veterans with complex medical and mental health presentations. The activities of this rotation occur in two different, but related settings: the outpatient Palliative Psychology Service, and the inpatient Psychiatry Consult-Liaison Service. The Palliative Care Service serves Veterans and families managing life-limiting and terminal illness. The patient population is diverse with respect to disease states, sociocultural backgrounds, mental health issues, and life experiences. Palliative Care is integrated into services throughout the hospital (e.g., medical units, hematology/oncology clinics) with outpatient services offered through face-to-face, video, and telephone services. Common conditions include metastatic cancer, advanced heart failure, chronic lung diseases, end-stage liver and kidney disease, dementia and progressive neurological diseases. The goal of palliative care is to achieve the best possible quality of life for patients and their families through alleviating physical and psycho-social-spiritual suffering, enhancing quality of life, effectively managing symptoms, and offering comprehensive, interdisciplinary support to the patient and family throughout the course of illness regardless of stage of disease. Services are provided by an interdisciplinary team composed of members from medicine, social work, psychology, and chaplaincy. The intern will be integrated into the Palliative Care Consult interdisciplinary team. Psychological services commonly offered include cognitive and mood assessments and psychotherapeutic interventions (CBT, ACT, pain and sleep treatment, motivational interviewing, life review, psychoeducation, dignity/meaning-centered psychotherapies) to individuals, couples, and families to address grief, losses (e.g., role), and end-of-life issues. Interns on this rotation will also have the experience of working 4-8 hours/week with the inpatient Psychiatric Consult-Liaison Service, providing brief psychotherapy and psychological assessment to Veterans with acute mental health presentations (e.g. depression, acute trauma symptoms, substance use, and SMI) alongside complex medical conditions (e.g. recent surgeries, strokes, infections, amputations, etc.). As part of the consult-liaison team, interns will also be able to participate in psychiatry rounds, case conferences, and educational experiences with a team of psychiatrists, psychiatric physician assistants, and medical residents.
The goal at the end of this training experience is to develop advanced skills related to treatment planning, delivery of evidence-based treatments in areas of interest, monitoring progress through measurement-based care, and working collaboratively with professionals. The Raleigh II Substance Use Disorders (SUD) clinic and Intensive Outpatient Program (IOP) provides services to a diverse population of Veterans diagnosed with SUD in the greater Raleigh area. The Raleigh II SUD team is a multidisciplinary team comprised of members from psychology, psychiatry, social work, and nursing. The team strives to deliver compassionate, patient-centered evaluation and treatment for Veterans with difficulties with substance use and commonly co-occurring difficulties (e.g., PTSD, depression, relationship conflict, emotion dysregulation). Interns will serve as active members of the multidisciplinary team and have the opportunity to participate in weekly team meetings as well as consult with team members about shared cases.

The Raleigh II SUD clinic rotation provides unique and highly-relevant training opportunities in assessing and treating SUD and co-occurring difficulties utilizing evidence-based treatments including CBT for Substance Use Disorders, Motivational Enhancement Therapy, Mindfulness Based Relapse Prevention, Behavioral Activation, Contingency Management, Concurrent Treatment of PTSD and Substance Use Disorders using Prolonged Exposure, Cognitive Processing Therapy, Prolonged Exposure, Dialectical Behavior Therapy, Unified Protocol, and CBT for Depression. Interns in the Raleigh II SUD clinic will gain experience treating co-occurring disorders through co-leading groups and carrying an individual therapy caseload. Interns will also have the opportunity to gain experience with screening and intake assessments, as well as completing comprehensive psychosocial assessments for Veterans with co-occurring disorders. In addition to the generalized outpatient SUD program (GOP), the Raleigh II co-occurring disorders rotation offers training opportunities in the Intensive Outpatient Program (IOP), including providing treatment via tele-mental health.

This rotation allows for a breadth of experiences, while honing skills unique to working with Veterans who have been diagnosed with SUD and co-occurring difficulties. Weekly supervision meetings allow time for discussions about relevant treatments, case conceptualization, consultation with interdisciplinary treatment teams, diversity-related considerations, and refining psychotherapy skills.
The Trauma Recovery Program (TRP) is a specialty clinic comprised of a multi-disciplinary team including Psychiatry, Psychology, Social Work, Chaplain Services, Peer Support, and Nursing that provides comprehensive outpatient services to Veterans of all genders and service eras presenting with trauma-related symptoms and impairment. Interns will have the opportunity to gain specialized training and practice in the delivery of evidence-based treatments for PTSD, including individual Prolonged Exposure (PE) therapy and Cognitive Processing Therapy. In addition, other empirically supported treatments are utilized in the clinic, including: Written Exposure Therapy (WET), Present Centered Therapy (PCT), Skills Training in Affective and Interpersonal Regulation (STAIR) and Dialectical Behavior Therapy (DBT) skills for emotion dysregulation, Cognitive Behavioral Therapy for Insomnia (CBT-I), Exposure, Relaxation and Rescripting Therapy (ERRT) and Imagery Rehearsal Therapy (IRT) for trauma-related nightmares, Cognitive Behavioral Conjoint Couples Therapy for PTSD (CBCT-PTSD), integrated Cognitive Behavioral Therapy (CBT) for chronic pain and PTSD, and Acceptance and Commitment Therapy (ACT) for experiential avoidance. Interns will also be trained in completing PTSD evaluation and treatment planning sessions, including the opportunity to learn the Clinician Administered PTSD-Scale for DSM-5 (CAPS-5). The TRP serves veterans with a wide range of presenting traumas, including combat, sexual assault (military or non-military), physical assault, and other military or non-military traumas. All service eras are served by the TRP therefore interns may have an opportunity to gain specialty experience with populations of interest (e.g., geriatric Veterans with comorbid medical and cognitive concerns, younger Veterans presenting with comorbid Traumatic Brain Injury). A large proportion of the Veterans treated in the TRP are from low socioeconomic backgrounds and/or racial/ethnic minority groups. The TRP team is dedicated to incorporating diversity training into clinical work and trainee development. The doctoral level staff members are actively involved in clinical research activities and are recognized by the Department of Veterans Affairs as providers of PE and CPT. Two of the rotation supervisors are trainers/consultants in Evidence Based Therapies for PTSD (i.e., PE and CPT).
As a member of the Women's Health - Mental Health (WH-MH) BHIP team, the intern provides mental health services to women veterans, with an emphasis on increasing competence in the assessment and treatment of complex presentations. The women veterans served in our clinic represent a wide range of cultural and individual diversity; sensitivity to diversity is of utmost importance in working with women veterans. Our population includes women of varying ages from all eras, representing a variety of racial/ethnic and religious backgrounds. Interns will have the opportunity to work with veterans who identify as gender and/or sexual minorities. Typical referrals in the WH-MH are women with chronic and comorbid mental health conditions resulting from multiple and repeated traumatic exposures that have not responded to earlier trials of intervention. Often referrals require a multidisciplinary, multi-phasic approach to treatment. The intern will develop an understanding of the impact of military sexual trauma and other traumatic life experiences, including childhood abuse, domestic violence, and combat, on women veterans’ psychosocial functioning.

Interns may choose a more generalist training plan (supervised by Dr. Osborne) or a training plan with a focus on trauma treatment and Dialectical Behavior Therapy (DBT; supervised by Dr. Caron). Interns will have the opportunity to assess and treat a variety of comorbid psychiatric disorders including PTSD, anxiety disorders (e.g., Panic, OCD), depression, substance abuse, eating disorders, and Borderline Personality Disorder. Depending on training goals, interns will be exposed to various modalities of treatment including evidence-based treatment for PTSD (e.g., Cognitive Processing Therapy and Prolonged Exposure), Skills Training for Affective and Interpersonal Regulation/Narrative Therapy, Acceptance and Commitment Therapy, and DBT. Depending on training goals, interns may participate in DBT group only or full-model DBT. As part of the full-model program, interns will provide individual DBT and phone coaching, will co-facilitate the DBT Skills Group and attend weekly DBT peer consultation team meetings. In addition to direct clinical care, the intern will function as part of our interdisciplinary mental health team (comprised of psychology, social work, psychiatry, chaplaincy, and more) and will consult and collaborate with medical providers in the broader Women's Health Clinic, of which the WH-MH is a part.
DIDACTIC TRAINING

The Durham VAMC Psychology Training Program includes weekly didactic seminar series taught by both staff psychologists and contributing faculty. Didactic trainings are designed to foster profession-wide competencies and also account for intern preferences and training goals. Each intern is assigned to one of our six didactic workgroup committees and to provide input regarding special interests of the intern cohort that may be incorporated into the curriculum.

Assessment & Intervention Series

This is a year-long weekly series that covers evidence-based assessment and intervention, with clinical case presentations to foster effective translation of science to practice. Case conceptualization, the importance of ongoing outcome evaluation, and increasingly independent clinical decision-making are emphasized. Trainees and faculty discuss a variety of clinical issues including, but not limited to, assessment and therapeutic procedures, complex cases, and discussion and feedback about using evidence-based psychotherapies with diverse populations, etc. Assessment topics covered include: objective personality, behavioral medicine, forensic, capacity evaluations, brief symptom-focused screening, risk/safety evaluations, neuropsychological, disorder-specific assessments (PTSD, SUD, and MST/MMST). Intervention topics covered include anger management, marital/couples therapy, motivational interviewing, CBT (for chronic pain, insomnia, anxiety, depression), DBT, ACT, mindfulness-based interventions, social skills training, exposure and response prevention, recovery-oriented psychotherapies, positive psychology interventions, end-of-life interventions, palliative psychology psychotherapies, and disease/illness coping interventions. In addition, the series emphasizes training in how to maintain fidelity of practice, while tailoring practices according to individual and cultural identity and physical or cognitive factors.

Diversity Series

The goal of this series is to foster increased awareness and understanding of one’s own individual/cultural identities and biases to improve the ability to work effectively with individuals from a wide array of backgrounds and cultures. The series focuses on recognizing issues of individual and cultural diversity, acknowledging these issues in a professional context, coping with personal biases and stereotypes, and effective practice with culturally diverse populations. Based on theoretical and empirical literature, the series is also taught from an experiential perspective, and interns may be involved in role plays, case discussions, and other activities that promote self-reflection and interactive learning. Topics covered include culturally responsive supervision, religion and spirituality, sexuality, gender and gender identity, discrimination and prejudice, power and privilege, micro-aggressions, disability status, military culture, identity across the lifespan.

“The clinical case series and research seminars provided great opportunities to present on work that was personally and professionally meaningful. I also appreciated the collegiality and support received from such presentations by my intern class and the training program.”

-2014-2015 Intern
Ethics Series
While attention to professional ethics is woven into all aspects of training, this series is dedicated to improving the intern’s ability to identify ethical dilemmas, recognize biases, and engage in decision-making practices in accordance with relevant laws and regulations guiding professional practices. Interns will receive training in how to effectively identify and reconcile situations in which conflict may arise between local, state, or federal guidelines. Broad content areas (e.g., APA Code of Conduct, VA rules of behavior) will be covered, and additional topics include record keeping, billing and coding, clinical practice and confidentiality, malpractice and liability insurance, maintaining boundaries, dual relationships, ethical issues in clinical supervision, and expert testimony. These seminars are offered in a variety of formats, including case discussions, multimedia presentations (e.g., videos of court testimony), and debates of ethical issues. Interns are encouraged to present ethical concerns arising in their training experiences.

Professional Development Series
Internship offers a unique opportunity for trainees to receive targeted and ongoing professional development mentorship. Mentoring in professional and career development is a core component of our program, as noted elsewhere in this brochure. This seminar series compliments other professional development initiatives ongoing in the program, and provides an opportunity for trainees to learn from a rotating group of accomplished professionals in, or affiliated with, our training program. This didactic series prioritizes topics according to temporal relationship to the trainee’s stage of development. For example, early in the year, topics will be emphasized that support the intern’s goal of obtaining postdoctoral fellowships and early career employment after internship (e.g., strategies for searching for positions, networking, CV preparation, applications, interviewing). Interns will have opportunities to learn from educational material presented, as well as benefit from targeted review of their materials (e.g., applications, CV, etc.) during seminars. As the year progresses, trainee needs shift, and the series will focus on broader professional development goals including, but not limited to, include licensure (state and national, including anticipated changes in EPPP process), board certification, negotiating skills, self-care and preventing burnout over the career, interprofessionalism, and differential career paths.
Research/Scholarly Inquiry Series

Being an active consumer of and/or participant in research is essential to one’s ability to function effectively and ethically as a scientist-practitioner, as research informs all aspects of functioning as a professional psychologist. Interns are expected to think critically about relevant literature, and application of empirical knowledge, across training activities. Formal training emphasizes self-direction in seeking guidance in and applying relevant research findings to practice. The seminar series supplements formal training, and includes the following topics: decolonizing and socially responsive methodologies and program evaluation, VA and external funding mechanisms, grant preparation, single case design, and professional presentation preparation (e.g., job talk, grand rounds). As previously mentioned, interns also have 4 hours of protected research time, and have access to a research mentor throughout the training year.

Supervision and Consultation Series

Regardless of one’s chosen career path, the ability to function as a skillful consultant is critical to professional success. Consultation involves awareness of one’s role in the context of the larger interdisciplinary environment, knowledge of the relevant literature, intentional collaboration and interdependent problem-solving, sharing of expertise in solving specific problems in various areas of professional functioning, and effective communication with professionals from various disciplines and backgrounds. Opportunities to develop as an effective consultant are incorporated throughout the training program, and may include representing psychology as a member of an interdisciplinary team, contributing to important treatment planning and care coordination decisions, and program development activities. This didactic series is intended to augment these training opportunities, and topics may include navigating complex team dynamics or systems issues, patient advocacy, and effective conflict negotiation.

Grand Rounds and Other Opportunities

Grand Rounds

The Department of Psychiatry and Behavioral Sciences at Duke University Medical Center sponsors Grand Rounds on a weekly basis. Guest speakers include both psychologists and psychiatrists, most with national reputations in their area of expertise. There are also other Grand Rounds (e.g., Durham VAHCS/Duke Collaborative Interprofessional Grand Rounds), or rotation-specific opportunities for interprofessional team meetings that include didactic learning opportunities. While interns are not required to attend Grand Rounds, attendance provides exposure to a broad base of knowledge from preeminent scholars. In addition, collaborations between the Durham VAHCS and Duke psychology internship programs permit occasional workshops or

“One thing I really appreciated about the internship was the thoughtful way that supervisors talked about evidence-based practice--it was clearly a strong value to work from an evidence base and use EBP’s, and at the same time thinking theoretically and contextually (not just "using the cookbook") was encouraged. I learned so much about the mechanisms of change as a result! “

-2012-2013 Intern
specific didactic offerings that involve interns from both programs. Performance Evaluation and Program Feedback.

**Risk Assessment and Management Workshop**
All trainees are required to participate in a half-day workshop led by Drs. Sara Boeding, Kelly Caron, and Courtney Dutton-Cox on the topics of risk assessment and intervention. This workshop is both didactic and experiential and largely focuses on the topic of suicide risk, but also includes coverage of various sources of risk including homicide and domestic violence.

**Advanced Evidence-Based Psychotherapy Didactics**
All trainees have the option of participating in a three-day Cognitive Processing Therapy (CPT) training led by Drs. Carolina Clancy and Sara Tiegreen and in a four-day Prolonged Exposure Therapy (PE) training, led by Drs. Kate Berlin and Kelly Caron. The trainings typically take place every year in August or September. These are two evidence-based psychotherapies that have been recognized by the VA as “gold standard” treatments for posttraumatic stress disorder. These trainings are part of the larger VHA initiative to disseminate evidence-based psychotherapies. The Durham VAMC has both a national PE dissemination trainer and a consultant, as well as two regional-level CPT dissemination trainers on staff who are responsible for conducting the trainings. After completing these in-person trainings, trainees have the option of receiving a record of completion in at least one of the evidence-based practices and participate in trainings and consultation calls as required. The consultation period may include 6 months of consultation as well as tape review. These workshops and related consultation are optional.
FACILITY & TRAINING RESOURCES

Many resources are available as a part of the training programs. We enjoy a highly committed and accomplished psychology faculty, other program faculty (e.g., psychiatry, nursing), and Mental and Behavioral Health Service Line leaders who are actively involved in our training programs. In addition to the general training venues, trainees are involved throughout the hospital in various programs such as Primary Care, Infectious Disease, Hematology-Oncology, Gerontology, etc. These training opportunities provide a rich environment for interprofessional training, consultation, and leadership. Trainees can expect to have office space assigned during their training tenure. Networked desktop or laptop computers, equipped with the current VA-adopted version of MS Office Professional, are provided to support patient care, word processing, and internet access for literature and other search services. Testing materials and reference resources are provided for trainees’ use. Our excellent Medical Center Library has a wide array of materials including professional journals and books. In addition, trainees have access to a full range of library resources at the Duke University School of Medicine and a variety of other online library resources.

STIPEND & BENEFITS

Interns receive a competitive stipend paid in 26 bi-weekly installments. VA internship stipends are locally adjusted to reflect different relative costs in different geographical areas, currently $27,327 annually. VA interns receive the 11 annual federal holidays and accrue sick leave (4 hours) and annual leave (4 hours) each 2-week pay period. Trainees may also be granted authorized absence (pre-authorization required) for relevant training and educational activities (e.g., dissertation defense, travel to conferences and workshops, graduation ceremony). VA Interns are also eligible for health (including dental and vision) and life insurance, and health benefits are available to dependents and married spouses of trainees, including legally married same-sex spouses. Unmarried partners of either sex are not eligible for health benefits, even those in legal civil unions or domestic partnerships. Insurance programs can be selected from a wide array of options. Additional information about VA stipends and benefits is available on the VA Psychology Training website.

REQUIREMENTS FOR COMPLETION

Interns are provided with performance criteria for each rotation and an evaluation form that reflects the expectations regarding professional competencies an intern should be attaining. In addition to completion of the 2080-hour training experience, interns must achieve competency ratings equivalent to “Intermediate to Advanced” in all competency areas of the rotations completed, although higher (e.g., “Advanced”) level ratings are typical of Durham interns.

In addition to developing professional health service competencies, maintaining good standing within the program also necessitates certain levels of professional behavior. Veterans and staff
shall be treated with dignity and respect. The APA ethical guidelines and HIPAA regulations will be strictly adhered to, especially in matters of confidentiality of information, non-exploitation of patients and avoiding conflicts of interests. Additionally, interns are responsible for conforming to all other Medical Center and Office of Personnel Management regulations concerning conduct and behavior.

ADMINISTRATIVE POLICIES & PROCEDURES

Due process and grievance procedures are available upon request from Dr. Jessica Fulton, Director of Psychology Internship Training (Jessica.Fulton@va.gov).

Self Disclosure: Consistent with the APA Code of Ethics (2010), see 7.04 below, our Durham VA Medical Center Psychology Training Program does not require interns to disclose personal information in the context of their training, unless the supervisor feels that such personal information is needed in order to evaluate or obtain assistance for a trainee whose personal problems are preventing them from performing professional activities competently or whose problems are posing a threat to the trainee or others.

7.04 Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

Our privacy policy is clear: we will collect no personal information about you when you visit our website.

“I expected internship to be a grinding, stressful year, but it has been the opposite! I have had time and space to grow as a clinician while also nurturing outside interests and relationships.”

-2017-2018 Intern
TRAINING STAFF

Leadership

Jessica J. Fulton, PhD, Director of DVAMC Psychology Internship Training, (she/her/hers), University of Southern Mississippi, 2012. Dr. Fulton is a staff psychologist in the Community Living Center at the Durham VAMC. She also holds an appointment as Assistant Professor, Department of Psychiatry and Behavioral Sciences, Division of Behavioral Medicine, at Duke University Medical Center and is a Senior Fellow at the Duke Center for the Study of Aging and Human Development. She is also the Co-Chair of the Durham VA HCS’s Antiracism and Black Equity Advisory Board to the Executive Leadership Team. Special Interests include antiracism and racial equity, health services research, patient advocacy, and chronic and life-limiting illness. Email: Jessica.Fulton@va.gov

Core Faculty

Kate Berlin, PhD, ABPP (she/her/hers), Vanderbilt University, 2008. Dr. Berlin is a DVAHCS staff psychologist within the Trauma Recovery Program and Substance Abuse Outpatient Clinic. Special interests include PTSD/substance abuse comorbidity and learning and practice of Prolonged Exposure Therapy. She is a trainer and consultant for the Prolonged Exposure arm of the VA EBP dissemination program. Email: Kate.Berlin@va.gov

Sara Boeding, PhD (she/her/hers), University of North Carolina at Chapel Hill, 2013. Dr. Boeding is the Assistant Division Chief of Specialty Outpatient Mental Health and a DVAHCS staff Psychologist within the OEF/OIF/OND clinic. Special Interests include evidence based psychotherapies for PTSD, Cognitive Behavioral Couples Therapy, and Dialectical Behavioral Therapy. Email: Sara.Boeding@va.gov

Kelly Caron, PhD (she/her/hers), Florida State University, 2011. Dr. Caron is a staff psychologist in and Clinic Director of the DVAMC Women’s Health - Mental Health Clinic and the Chair of the Durham VAHCS Interdisciplinary Transgender Care Team. Special interests include evidence based psychotherapies for PTSD, complex trauma presentations, Dialectical Behavior Therapy, and LGBTQIA-affirming healthcare. She is a trained Prolonged Exposure consultant. Email: Kelly.Caron@va.gov

Carolina P. Clancy, PhD, ABPP, (she/her/hers), University of North Carolina at Greensboro, 2003. Dr. Clancy is Training Director of the DVAMC Psychology Fellowship Program and a staff psychologist within the DVAMC Trauma Recovery Porgram, and serves as the local Evidence Based Psychotherapy Coordinator. She also holds an appointment as Research Associate in the Department of Psychiatry and Behavioral Sciences at Duke University Medical Center. Special interests include assessment and treatment of PTSD, and evidence based treatment. Email: Carolina.Clancy@va.gov
Natasha DePesa, PhD, (she/her/hers), University of Central Florida, 2017. Dr. DePesa is a staff psychologist in the DVAHCS Health Psychology Clinic and serves as the local mental health champion within the VA’s Epilepsy Center of Excellence. Special interests include health psychology/behavioral medicine, chronic pain and illness, behavioral sleep medicine, program development, and stepped care approaches in mental and behavioral health. Email: Natasha.DePesa@va.gov

Courtney Dutton, PhD, (she/her/hers), University of Arkansas, 2017. Dr. Dutton is a psychologist within the OEF/OIF/OND clinic. Special interests include the assessment and treatment of posttraumatic stress, anxiety disorders, substance use, comorbid PTSD/SUD, MI, transdiagnostic treatments, couple therapy, Dialectical Behavioral Therapy, and program development and evaluation. Email: Courtney.Dutton-Cox@va.gov

Jenna Ellison, PhD, (she/her/hers), Southern Methodist University, 2018. Dr. Ellison is a staff psychologist in PCMHI. Special interests include brief assessment and intervention, health psychology/behavioral medicine, weight management, behavioral sleep medicine, chronic pain, and program development. Email: Jenna.Ellison@va.gov

Jay Gregg, PhD, (he/him/his), West Virginia University, 2014. Dr. Gregg is a staff psychologist in the Durham VAMC Trauma Recovery Program and the OEF/OIF/OND Clinic. He serves as a coordinator for the Geriatric Scholars Program—Psychology Track, a national VA post-licensure training program. Dr. Gregg also holds an appointment of Assistant Professor in the Department of Medicine—Geriatrics Division at Duke University Medical Center. Special interests include assessment and treatment of posttraumatic stress, depression, hopelessness, and suicidality across the life-span, clinical geropsychology, and contextual behavioral science. Email: Jeffrey.Gregg2@va.gov

R. Brandon Irvin, PhD, (he/him/his) University of North Carolina at Chapel Hill, 2012. Dr. Irvin is a staff psychologist for the DVAMC Psychiatric Acute Rehabilitation Center (PARC), and serves as Clinical Director of the Mental Health Access Center. Special interests include psychosocial rehabilitation & recovery, acute mental health, positive psychology, assessment, general mental health, and brief psychotherapy. Email: Robert.Irvin@va.gov

Charles Jardin, PhD, MDiv, (he/him/his), University of Houston, 2018. Dr. Jardin is a staff psychologist in the DVMAC Hillandale 2 Substance Use Disorders Clinic. He completed the PSR Psychology Fellowship from 2018-2019. He has Provider Status for CPT and Social Skills Training, and will be completing EBP training for MI/MET and CBT-SUD during the 2020-2021 year. His interests include co-occurring disorders; spirituality and mental health; and psychosocial rehabilitation and recovery in the context of SUD treatment. Email: Charles.Jardin@va.gov

Jessica Kinsaul, PhD, (she/her/hers), Louisiana State University, 2015. Dr. Kinsaul is a staff psychologist in the Durham VAMC General Mental Health Clinic. Special interests include
women’s health, eating disorders, military sexual trauma, posttraumatic stress, and Dialectical Behavioral Therapy. Email: Jessica.Kinsaul@va.gov

**Saule Kulubekova, PhD, ABPP-CN, (she/her/hers)**, Emory University, 2012. Dr. Kulubekova is a board-certified clinical neuropsychologist and a staff psychologist within the DVAHCS Neuropsychology Clinic. Special interests include memory disorders, geriatric neuropsychology, health psychology, and behavior therapy approaches. Email: Saule.Kulubekova@va.gov

**Ilana B. Lane, PhD, (she/her/hers)**, Duke University, 2016. Dr. Lane is a staff psychologist for the Psychosocial Rehabilitation and Recovery Center (PRRC) and Mental Health Intensive Case Management (MHICM) program, as well as the lead for the Early Psychosis Intervention Coordination (EPIC) program at DVAHCS. She completed both her internship and her postdoctoral fellowship (PSR) at DVAHCS. Special interests include psychosocial rehabilitation and recovery for serious mental illness, evidence-based treatment approaches for early psychosis, intensive community-based treatment for serious mental illness, and clinical supervision/professional development. Email: Ilana.Lane@va.gov

**Craig D. Libman, PhD, (he/him/his)**, University of Akron, 2018. Dr. Libman is a staff psychologist for the DVAHCS VAHCS Palliative Care and Consult-Liaison Services. Special interests include palliative care/end-of-life, clinical geropsychology, multicultural approaches to treatment and training, late-life depression/anxiety/PTSD, coping with life-limiting illness and chronic pain, and caregiver support. Email: Craig.Libman2@va.gov

**J. Murray McNiel, PhD, (he/him/his)** University of North Carolina at Chapel Hill, 2007. Dr. McNiel is a staff psychologist within the DVAMC Substance Use Disorders (SUD) Clinic. He serves as Smoking Cessation Lead Clinician, Co-Director of the PSR Interprofessional Fellowship, and Consultant for the EBP roll-out of CBT-SUD. Dr. McNiel holds an appointment as Assistant Professor, Addictions Division, Department of Psychiatry and Behavioral Sciences, Duke University School of Medicine. Special interests include substance use disorder treatment and tobacco cessation. Email: Jesse.McNiel@va.gov

**Lotus M. Meshreki, PhD, (she/her/hers)**, University of Rhode Island, 2007. Dr. Meshreki is a staff psychologist within the DVAMC OEF/OIF/OND Clinic. Special interests include evidence-based treatments for PTSD, ACT, and CBT-I. Email: Lotus.Meshreki@va.gov

**Lauren K. Osborne, PhD, (she/her/hers)**, University of Southern Mississippi, 2016. Dr. Osborne is a staff psychologist in Women’s Health-Mental Health. Special interests include mindfulness meditation, Acceptance and Commitment Therapy (ACT), working with PTSD and group psychotherapy. Email: Lauren.Osborne@va.gov

**Brad Rappaport, Psy.D., (he/him/his)**, Yeshiva University, 2004. Dr. Rappaport is a staff psychologist at the Raleigh II Community-Based Outpatient Clinic. Special interests include
mindfulness meditation, Acceptance and Commitment Therapy (ACT), working with PTSD and moral injury, and psychodynamic psychotherapy. Email: Brad.Rappaport@va.gov

Rachel L. Rodriguez, PhD, MPH, ABPP-Gero, (she/her/hers), University of Alabama, 2006. Dr. Rodriguez is a board-certified Clinical Geropsychologist for the DVAMC Home Based Primary Care Program. She is also the co-program manager of the Geriatric Scholars Program-Psychology Expansion, which is a VA funded multi-modal, interactive, and national workforce educational program. Special clinical and research interests include factors contributing to successful aging, coping with chronic illness, dementia, palliative care/end-of-life, public health and aging, and Geropsychology training and supervision. Email: Rachel.Rodriguez2@va.gov

Stephanie Salcedo Rossitch, PhD, (she/her/hers), University of North Carolina at Chapel Hill, 2020. Dr. Salcedo Rossitch is a staff psychologist at the Raleigh II Community-Based Outpatient Clinic (virtual BHIP team). Special interests include the assessment and treatment of mood disorders, posttraumatic stress, health services research, cultural adaptations, Prolonged Exposure, and Dialectical Behavioral Therapy. Email: Stephanie.Rossitch@va.gov

Rachel Ruffin, PhD, (she/her/hers), University of Miami, 2011. Dr. Ruffin is a staff psychologist in and Director of the Trauma Recovery Program. Special interests include evidence-based treatments for PTSD, Cognitive Behavioral Conjoint Therapy for PTSD, comorbid PTSD and chronic illness, and behavioral medicine/chronic pain. Email: Rachel.Ruffin@va.gov

Brea Salib, PhD, (she/her/hers), University of North Carolina at Chapel Hill, 2008. Dr. Salib is a staff psychologist for the DVAMC Home-Based Primary Care program (Clayton team). Special interests include geropsychology, non-pharmacological approaches to managing challenging dementia-related behaviors (STAR-VA program), cognitive assessment, capacity, and end-of-life issues. Email: Brea.Salib@va.gov

Annie Steel, PhD (she/her/hers), University of Nebraska-Lincoln, 2018. Dr. Steel is a staff psychologist within the DVAMC Trauma Recovery Program. Special interests include the assessment and treatment of posttraumatic stress, Dialectical Behavior Therapy, and measurement based care. Email: Annie.Steel@va.gov

David Strasshofer, PhD, (he/him/his), University of Missouri-St. Louis, 2019. Dr. Strasshofer is a staff psychologist at the Raleigh II Community-Based Outpatient Clinic. Special interests include the assessment and treatment of posttraumatic stress, chronic pain, insomnia, and professional development/supervision. Email: David.Strasshofer@va.gov

Joshua A. Tiegren, PhD, (he/him/his), University of Tulsa, 2009. Dr. Tiegren is a staff psychologist within the DVAMC Outpatient Mental Health Clinic. Special interests include psychological assessment, serious mental illness, and psychiatric rehabilitation and recovery. Email: Joshua.Tiegren@va.gov
Karen Tucker, PhD, (she/her/hers), Louisiana State University, 2002. Dr. Tucker is a staff psychologist providing services in the DVAMC OEF/OIF/OND Neuropsychology Clinic, and Neuropsychology Clinic (general). Special interests include cognitive decline associated with traumatic brain injury or degenerative disorders. Email: Karen.Tucker2@va.gov

Jeffrey D. White, PhD, (he/him/his), University of South Carolina, 2003. Dr. White is a staff psychologist within the DVAMC Outpatient Mental Health Clinic and Raleigh Community Based Outpatient Clinic. Special interests include emotion-focused therapy, group therapy, couples therapy, anger management, professional development/supervision. Email: Jeffrey.White1@va.gov

Jennifer Yi, PhD, (she/her/hers), University of North Carolina at Chapel Hill, 2020. Dr. Yi is a staff psychologist within the Raleigh II Substance Use Disorder Clinic and Intensive Outpatient Program. Special interests include assessment and treatment of substance use and co-occurring disorders such as PTSD, moral injury, program development and evaluation, and multicultural considerations in training and clinical care. Email: Jennifer.Yi@va.gov

Adjunct Faculty

Jean C. Beckham, PhD, (she/her/hers), Florida State University, 1988. Dr. Beckham is a VA Senior Research Career Scientist, and also serves as a consulting psychologist to the Trauma Recovery Program. She is Professor of Psychiatry and Behavioral Sciences (Behavioral Medicine), Duke University Medical Center (DUMC), and serves as Chair of the DUMC Division of Behavioral Medicine. Special interests include behavioral assessment and treatment of PTSD, clinical research in PTSD, and behavioral medicine. Email: Jean.Beckham@va.gov

Shannon M. Blakey, PhD (she/her/hers), University of North Carolina at Chapel Hill, 2019. Dr. Blakey is a third-year VA Advanced Fellow in Mental Illness Research and Treatment at the Durham VA Health Care System and VA Mid-Atlantic MIRECC. Special interests include PTSD, depression, substance use, and clinical anxiety. She is also committed to supporting professional development related to VA career paths and early career research/leadership advancement. Email: Shannon.Blakey@va.gov

Patrick S. Calhoun, PhD, (he/him/his), Vanderbilt University, 1998. Dr. Calhoun is part of the VISN 6 MIRECC Health Services Research Core. He is an Professor of Psychiatry and Behavioral Sciences (Behavioral Medicine), Duke University Medical Center. Special interests include PTSD and psychological assessment. Email: Patrick.Calhoun2@va.gov

Michael P. Griffin, PhD, ABPP-Forensic, (he/him/his), University of Alabama, 2007. Dr. Griffin is a staff psychologist conducting comprehensive psychological assessments in Compensation and Pension, General Mental Health, and the Health Psychology Clinic. He also holds an appointment as Clinical Assistant Professor, Department of Psychology and Neuroscience,
UNC – Chapel Hill. Special interests include psychological assessment and forensic psychology (Criminal / Civil). Email: Michael.Griffin5@va.gov

Nathan A. Kimbrel, PhD, (he/him/his), University of North Carolina at Greensboro, 2009. Dr. Kimbrel is a staff psychologist at the DVAMC, Co-Director of the Clinical Core within the VISN 6 Mid-Atlantic MIRECC, and an Associate Professor in the Department of Psychiatry and Behavioral Sciences at DUMC. Special interests include the etiology, assessment, and treatment of suicidal and nonsuicidal self-injury, PTSD, depression, and substance use in Veterans, including genetic and epigenetic contributions. Dr. Kimbrel has an active research program and is currently funded by VA CSR&D, VA HSR&D, and VA RR&D. Email: Nathan.Kimbrel@va.gov

Dina Kinner, PhD, (she/her/hers), Temple University, 2014. Dr. Kinner is a staff psychologist within the DVAMC Women’s Health - Mental Health Clinic and Mental Health Access Center. Special interests include anxiety and trauma-related disorders, military sexual trauma, complex PTSD, social anxiety, evidence based treatment, CBT, and DBT. Email: Dina.Kinner@va.gov

Stacey H. Kovac, PhD, (she/her/hers), University of Southern Mississippi, 2001. Dr. Kovac is Mental Health Lead Clinician of the DVAMC Compensation and Pension Program. She also holds an appointment as Assistant Professor in the Department of Psychiatry and Behavioral Sciences, Duke University Medical Center. Special interests include psychological assessment and behavioral medicine. Email: Stacey.Kovac@va.gov

Raha Forooz Sabet, PhD, (she/her/ella), University of Miami, 2019. Dr. Sabet is a staff psychologist within Primary Care Mental Health Integration at the main hospital. She is also co-chair of the Belonging, Representation, Equity, Accountability, and Learning Initiative within the Psychology Service as well as a member of the Antiracism and Black Equity Advisory Board. Special interests include DEI efforts, behavioral sleep medicine, and mindfulness. Email: Raha.Sabet@va.gov

Katherine Ramos, PhD, (she/her/hers), University of Houston, 2015. Dr. Ramos is an Assistant Professor with the Department of Psychiatry and Behavioral Sciences at Duke University School of Medicine, a member of the Duke Cancer Institute, and a Senior Fellow with Duke’s Center for Aging. She is also an affiliate with the Geriatric, Research, Education and Clinical Center (GRECC) and an investigator with the Center of Innovation to Accelerate Discovery and Practice Change (ADAPT) both based in the Durham VAHCS. Her clinical and research interests are focused in the domains of disseminating as well as implementing mental health service delivery and psychosocial interventions for geriatric, palliative and hospice care populations. Dr. Ramos integrates social justice and multicultural principles to refine and adapt evidence-based treatments while maintaining treatment fidelity to serve the unique needs of the patient population she serves. Email: Katherine.Ramos@duke.edu
Sara B. Tiegreen, PhD, (she/her/hers), University of Tulsa, 2009. Dr. Tiegreen is the Assistant Outpatient Division Chief of General Mental Health (including general mental health sections in both Durham and Raleigh locations). She also serves as the Psychotherapy Academic Detailing Program Coordinator with the National EBP Program/Office of Mental Health and Suicide Prevention through the VISN 6 MIRECC. Her clinical time is devoted to the Raleigh II Community Based Outpatient Clinic (CBOC). Special interests include implementation science and translating evidence-based treatments to traditional clinic settings to best fit all patient and clinician styles. Dr. Tiegreen enjoys clinical work with trauma outcomes, including PTSD and emotion dysregulation sequelae, and serves as a trainer/consultant for Cognitive Processing Therapy (CPT). Email: Sara.Tiegreen@va.gov

“The supervisors involved in the Durham VA training program are some of the most knowledgeable, warm, and caring psychologists I have ever worked with. They went above and beyond to ensure that my training goals were met and encouraged me to try things I had not even considered, which resulted in a more well-rounded training experience.”

-2020-2021 Intern
Pictured Left to Right (Top Row): Melanie Roys’ partner, Melanie Roys, Katherine Kelton, Jamie Smith’s partner, Kritzia Merced-Morales. (Bottom Row). Sam Peter (with Bear), Sam Peter’s partner, and Jamie Smith.

GRADUATES: FIRST POSITIONS POST-INTERNSHIP

Class of 2021
Postdoctoral Fellow, VA Quality Scholars Advanced Fellowship, Durham VAMC
Postdoctoral Fellow, MIRECC, Durham VAMC
Postdoctoral Fellow, GRECC, South Texas Veterans Health Care System
Postdoctoral Fellow, MIRECC, Hunter Holmes McGuire VA Medical Center
Postdoctoral Fellow, Trauma Track, Minneapolis VAMC
Postdoctoral Fellow, Trauma Recovery Program, Durham VAMC
Postdoctoral Fellow, Women’s Health – Mental Health, Durham VAMC
Independent Psychologist, Currently Seeking Employment

“The Durham VA internship program was a corrective experience from graduate school. The psychology staff clearly are dedicated to training and their patients.”

-2020-2021 Intern

Class of 2020
Postdoctoral Fellow, MIRECC, VA Connecticut Healthcare System and Yale University
Postdoctoral Fellow, Generalist Psychology Fellowship with Female Veteran’s Emphasis Area, Atlanta VAMC
Postdoctoral Fellow, Geropsychology, Durham VAMC
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, PCMHI, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC

“This is the best internship in the country. The staff is brilliant and the culture is warm/supportive. The top notch training and care for trainees is unmatched.”

-2019-2020 Intern
Class of 2019
Postdoctoral Fellow, PTSD Fellowship, VA Puget Sound Healthcare System (Seattle)
Postdoctoral Fellow, Joint Fellowship at VA Palo Alto War Related Illness and Injury Center (WRIIC) and Stanford University Department of Psychiatry and Behavioral Sciences
Postdoctoral Fellow, Forensic Psychology, Private Practice
Postdoctoral Fellow, Duke University, Division of Translational Neuroscience
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Research Psychologist, VISN 6 MIRECC, Durham VAMC
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC

Class of 2018
Postdoctoral Fellow, Department of Psychology, Temple University
Postdoctoral Fellow, VA Mid-Atlantic Mental Illness Research, Education and Clinical Center, Durham VAMC/Duke University
Postdoctoral Fellow, Traumatic Stress Center, Summa Health
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, Center for Integrated Healthcare, Western NYHCS at Buffalo
Postdoctoral Fellow, Department of Psychiatry, University of Michigan – Ann Arbor
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC

Class of 2017
Postdoctoral Fellow, Interprofessional Care Program, Brown University/Providence VAMC
Postdoctoral Fellow, Returning Veterans Clinic, Brown University/Providence VAMC
Postdoctoral Fellow, LGBT Mental Health, VA San Diego Healthcare System/UCSD
Postdoctoral Fellow, Health Services Research & Development, Yale University/West Haven VA
Postdoctoral Fellow, Clinical Health Psychology, West Haven VA
Postdoctoral Fellow, Severe Mental Illness and Substance Use Disorders, Salisbury VAMC
Postdoctoral Fellow, Department of Psychology and Neuroscience, Duke University
Staff Psychologist, Outpatient Mental Health, VA Nebraska-Western Iowa Healthcare System

Class of 2016
Postdoctoral Fellow, Substance Abuse, VA San Diego/University of California-San Diego
Postdoctoral Fellow, Health Psychology, Henry Ford Health System
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, Behavioral Medicine, Duke University Medical Center
Postdoctoral Fellow, Trauma and PTSD, Edward Hines, Jr. VA Hospital
Postdoctoral Fellow, Clinical Psychology, Ann Arbor VA/University of Michigan
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Class of 2015
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Psychosocial Rehabilitation, Durham VAMC
Postdoctoral Fellow, GRECC Advanced Geriatric Research, Durham VAMC
Postdoctoral Fellow, VA Boston Healthcare System
Postdoctoral Fellow, PTSD research, Duke University
Postdoctoral Fellow, Integrative Medicine, Duke University
Postdoctoral Fellow, Brown University/Providence VAMC
Postdoctoral Fellow, PCMI, VA Salt Lake City HCS

Class of 2014
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, MIRT/MIRECC (research), Durham VAMC
Postdoctoral Fellow, VA Boston Healthcare System
Postdoctoral Fellow, Suicide risk (research), Catholic University
Postdoctoral Fellow, PTSD research, Duke University
Postdoctoral Fellow, Psychosocial Rehabilitation, VA San Diego Healthcare System

Class of 2013
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, Trauma Recovery, Durham VAMC
Postdoctoral Fellow, MIRT/MIRECC (research), Durham VAMC
Postdoctoral Fellow, Neuropsychology, Salisbury VAMC
Postdoctoral Fellow, Serious Mental Illness, Stanford University

Class of 2012
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, MIRT/MIRECC (research), Durham VAMC
Postdoctoral Fellow, Wake Forest University School of Medicine
Postdoctoral Fellow, Substance Use, Tucson VAMC
Postdoctoral Fellow, Clinical Psychology, Brown University
Postdoctoral Fellow, Oliver-Pyatt Center, Eating Disorders Treatment Center

Class of 2011
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, PTSD, Salem VAMC
Postdoctoral Fellow, CBT, Cognitive Behavioral Institute of Albuquerque
Postdoctoral Fellow, CBT, Beck Institute of Cognitive Behavior Therapy
Assistant Professor, Psychology, Elon University
Class of 2010
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, PSR, Palo Alto VAMC
Postdoctoral Fellow, Duke University Medical Center
Postdoctoral Fellow, MIRECC, Durham VAMC
Postdoctoral Fellow, Private Practice
Psychologist, Psychiatric Hospital, North Dakota

Class of 2009
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, MIRECC, Durham VAMC
Research Associate, MIRECC, Durham VAMC

Class of 2008
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, PTSD, Durham VAMC
Postdoctoral Fellow, Palliative Care, VA Palo Alto Health Care System
Global Project Director, Quintiles Transnational Corporation

2019-2020 Interns Alex McConnell, Robert Graziano, Jennifer Yi, Stephanie Salcedo Rossitch, and Carolyn Brennan getting some much needed love from the Mental and Behavioral Health Service Line therapy dog, Riley, during fellowship application and interview season.
LOCAL INFORMATION

Location: The Durham VA Medical Center is located in the heart of the Bull City (Durham, NC) and sits adjacent to the Duke University Medical Center and Duke University campuses. Durham is a richly diverse city, home to a greater makeup of ethnic minority groups than any of the five largest cities in North Carolina. Durham is also home to a large and thriving LGBTQ community, and was named the Most Tolerant City in the US in 2012 by The Daily Beast. The Triangle region, comprised of Durham, Raleigh, and Chapel Hill, is situated halfway between the Blue Ridge Mountains and the beautiful beaches of North Carolina’s Outer Banks. Travel to the region is facilitated by a number of major highways, bus and rail lines (Durham Station), and international airports (RDU, CLT, PTI) allowing for easy access to and from other metropolitan areas or international destinations. Cultural, historical, educational, and natural amenities abound, and Durham has gained notoriety as a one of the best places to live, work, and play. Durham offers the sophistication of an urban setting, while retaining its small town charm and history. It is full of funky cafés, rich music history, and local artisans and restauranteurs. Many of the local restaurants and shops in Durham offer Living Wages to their employees and value sustainability. There is also a strong community-focused orientation. For example, Ninth Street Bakery has been providing free meals to those facing food insecurity since the pandemic began. You will also find that the shops around here support each other—“buy local” is definitely something this community values!

Why you’ll love Durham: The secret is out! Durham was rated:
- #1 Best Place to Live in North Carolina by US News and World Report in 2021
- #1 Metro with the Lowest Jobs-Housing Imbalance by the Manhattan Institute in 2021
- #2 Best Places to Live in the US by US News and World Report in 2021
- 7th Best-Run City in America by WalletHub in 2021
- 8th Top City where Black Americans fare best economically by Smart Asset in 2021
- 11th Best City to launch your career in 2021 by LinkedIn

More broadly, in 2021, North Carolina has been rated the #1 State in the US for number of teacherse nationally board certified, #3 Best State for Higher Education, #3 Best State to Drive, #6 State where Millennials are moving, and #10 Best State for LGBTQ Job Seekers.

Despite the vast growth and national praise in recent years, the Triangle has maintained an affordable cost of living, and rivals larger metropolises with its rich heritage, cultural diversity, and urban setting. The Raleigh/Durham metro area, which includes the famed Research Triangle Park, is a booming area for young professionals. The area is anchored by three major research...
universities (Duke University, University of North Carolina – Chapel Hill, North Carolina State University), and North Carolina is among the nation’s states with the most (HBCUs). The Triangle alone boasts three Historically Black Colleges and Universities (HBCUs) – North Carolina Central University, Fayetteville State University, and Shaw University! Both the state and Triangle region have scored numerous top rankings from national media outlet annual reviews. The region is also home to a multitude of performing arts venues, including Carolina Performing Arts, the Duke Energy Center for the Performing Arts, Walnut Creek Amphitheatre, the historic Carolina Theatre of Durham, and the award-winning Durham Performing Arts Center (DPAC), which offer a diverse and exciting lineup of events. Despite the vast growth and national praise in recent years, the Triangle has maintained an affordable cost of living, and rivals larger metropolises with its rich heritage, cultural diversity, and urban setting.

Durham has also received national praise for its local food scene, and was featured in the New York Time’s (NYT) 36 Hours Series. Durham has been coined The South’s Tastiest Town by Southern Living Magazine, and is home to a long and growing list of local restaurants, cafes, bakeries, and farmer’s markets. The NYT has also featured neighboring Chapel Hill, NC and Carrboro, NC in its 36 Hours series (here), highlighting the expanse of the rich local food culture scene. Best of all, with Durham’s affordable cost of living (calculator), residents can readily enjoy the local offerings.

In addition to the urban scene, the Triangle offers a rich variety of options for outdoor activities and is home to many state and regional parks (e.g., Eno River State Park, Mountains to Sea Trail, Umstead State Park). Plus, the Triangle has 27 off-leash dog parks! For the adventurous and competitive spirit, the region offers rich running (run), cycling (ride), triathlon (Tri) communities, and golfing (golf), with something for everyone (NC Sports)! The most enthusiastic spectator will also be right at home, with access to professional (NFL, NHL, NBA), minor league baseball (Durham Bulls, DBAP), and nationally renowned men’s and women’s champion collegiate teams (Duke, UNC-CH, NCSU).

“Durham is a great city to live in - all the benefits of a large city (good restaurants, accessible shopping, lots of entertainment options) without the hassles (e.g., excessive traffic)”

-2013-2014 Intern
For family adventures, you could try out something different every weekend of the year; however, it’s likely you’ll fall in love with a some places that become staples on the calendar. The Triangle area offers museums (Marbles Kids Museum in Raleigh, Museum of Life and Science in Durham, North Carolina Museum of Natural Sciences), unique classes and camps (Notasium, Ninth Street Dance, NC Kids Yoga, Camp High Hopes in Durham), as well as festivals, parades, and parks (Fuquay-Varina Splash Park, Pullen Park in Raleigh) that are fun for all ages. North Carolina Zoo in Asheboro, Hanging Rock State Park in Danbury, or Carowinds in Charlotte make great day trips! For younger children, the Triangle offers a variety of child care facilities with varying curricula and philosophies (e.g., montessori, faith-based).

Where to Live: With the college town atmosphere of Chapel Hill, the vibrant Durham neighborhoods, and the metropolitan feel of Raleigh, a wide variety of affordable housing options are readily available. Past trainees have chosen homes in cozy older neighborhoods, modern lofts in refurbished warehouses, and contemporary complexes and developments. Durham, Chapel Hill, and Raleigh are all within easy access to the Medical Center, and each city has its own unique personality and resources to consider. Rental prices generally range from $800-$1200 per month. Most will require a 6-12 month lease agreement, and for many the monthly cost will include access to on-site fitness facilities, swimming pool, recreational facilities (e.g., tennis court), gated entry, parking, and a “bark park.” Here are a few sites you may find helpful when reviewing local rental options: The Chronicle, Durham Rent, Rentals. If you prefer home ownership, you will find that the cost of real estate in the area is relatively affordable when compared to most locations across the country. There are many local real estate companies (e.g., Apple Realty, Bob Schmitz, Acorn + Oak, West & Woodall, Allenton, Red Door, Phoenix, Urban Durham Realty), and ample housing options within a short distance of the Medical Center that are accessible by car or public transportation. There are a number of well-established neighborhoods nearby, and you can search by “specific subdivision.”

- **South/Southeast**: Woodcroft, Woodlake, Hope Valley Farms, Eagles Pointe, Chancellor’s Ridge, Auburn Ridge, Audubon Park, Chadsford, Grandale Rd/Herndon Rd, Brier Creek
- **West**: American Village, Grove Park, Trinity Park
- **North**: Croasdaile Farms, Fieldstone by the Eno, Treyburn, Hillsborough, NC

<table>
<thead>
<tr>
<th>Area of City</th>
<th>Major Roads</th>
<th>Time to VA</th>
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<tbody>
<tr>
<td>Southwest</td>
<td>Garrett Rd ◊ Hope Valley ◊ University Dr ◊ Hwy 15-501 ◊ NC-147 (Durham Freeway)</td>
<td>~5-10 mins</td>
</tr>
</tbody>
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EXPLORING DURHAM / THE AREA


Performance Venues: Durham Performing Arts Center (DPAC) ♦ Progress Energy Center ♦ Memorial Auditorium (Chapel Hill) ♦ PNC Arena ♦ Walnut Creek Amphitheatre ♦ Koka Booth Amphitheatre ♦ The Carolina Theatre ♦ Cat’s Cradle ♦ Red Hat Amphitheater

Music, Festivals, & Parades: MoogFest ♦ Full Frame Documentary Festival ♦ American Dance Festival ♦ OutSouth Queer Film Festival | Carolina Theatre of Durham ♦ NC Pride Festival ♦ Art of Cool Festival ♦ Carolina Music Festivals ♦ Carrboro Music Festival Pride: Durham, NC – LGBTQ Center Durham (lgbtgcenterofdurham.org) ♦ Welcome - Out! Raleigh Pride 2022 - TBA in June 2022 (outraleighpride.org) ♦ Pride Week at Carolina - LGBTQ Center (unc.edu)

Amusement Parks: Frankie's Fun Park ♦ Carowinds ♦ Great Wolf Lodge ♦ NC State Fair


Trails / Hiking / Mountain Biking: Eno River State Park ♦ Mountains to Sea Trail ♦ Umstead State Park ♦ Little River Regional Park ♦ West Point on the
Eno  Other Trails & Areas  Other Bike Trials & Rentals  Wright Brothers National Memorial

Road Cycling: Durham Cycling Club  Durham Cycling Trails  Bike Duke  Bike Durham  Local Cycling Groups

Triathlon: Local Triathlon Clubs  Events, Clubs, Coaches

Water Activities: Haw River  Falls Lake  NC State Parks  Umstead  Eno River  Local Water Activities  Jordan Lake


Beaches/Coast: Outer Banks  Nags Head  Ocracoke  Cape Hatteras  Emerald Isle  Duck  Kill Devil Hills  Kitty Hawk  Atlantic Beach  Wrightsville Beach


Shopping: Brightleaf Square  Durham Central Park  The Streets at Soutpoint  Crabtree Valley Mall  Cameron Village  North Hills  Triangle Town Center  Tanger Outlet Mall  Smithfield Outlet Mall