

PSYCHOLOGY INTERNSHIP HANDBOOK
VA LONG BEACH HEALTHCARE SYSTEM
LONG BEACH, CALIFORNIA

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Dear Intern Applicant,

Thank you for viewing information about our psychology internship program. We at VA Long Beach are very proud of our training program. We believe that we have an excellent teaching staff and offer training opportunities in a variety of interesting areas. Because we have an unusually broad array of health psychology offerings, we are able to offer extensive training in areas often not included in generalist internships (e.g., HIV, chronic pain management, spinal cord injury, neuropsychology, geropsychology, and consultation in primary care). At the same time, we offer solid training in more traditional psychiatric areas. If you are looking for a combination of training experiences with the opportunity to partially specialize, please consider us.

I invite you to review carefully the information contained in this manual. We feel that it is important for you to learn as much as you can about the internship sites to which you are applying. Although you may want to immediately turn to the list of training rotations that we offer, please keep in mind that our interns do five rotations in areas that are primarily of their own choosing. Our program is especially known for its flexibility and diversity of potential training rotations.

We realize that this is probably a very busy time of year for you as you gather information about various internship sites, complete application forms, secure letters of recommendation, and arrange for interviews, all in addition to your regular responsibilities. But should you have any questions about our program after you read through this training manual, please don't hesitate to contact me. We look forward to receiving your application materials.

Respectfully,

A handwritten signature in black ink that reads "Kenneth D. Cole Ph.D." The signature is written in a cursive, flowing style.

*Kenneth D. Cole, Ph.D.
Director, Psychology Training*

Information about VA Long Beach and the City of Long Beach

The VA Long Beach Healthcare System (VALBHS) includes the main medical center complex in Long Beach, as well as four community-based healthcare clinics located in West Long Beach (Cabrillo Villages), Whittier, and Orange County (Anaheim and Santa Ana). The VALBHS is a part of the Veteran's Integrated Service Network (VISN) 22, which also includes the San Diego VA, Loma Linda VA, and the new Greater Los Angeles Healthcare System consisting of the West Los Angeles VA, Sepulveda VA, the Los Angeles Ambulatory Care Center, and outlying clinics. The medical center complex is located adjacent to [California State University at Long Beach](#), and is approximately 30 miles south of [UCLA](#) and 20 miles north of the [University of California at Irvine](#) (UCI). Our medical center is also only minutes away from the beach.

While the medical center now operates fewer inpatient beds than in decades past (327 approved operating beds currently) and offers a comprehensive array of medical, surgical, rehabilitation, geriatric, and psychiatric services, we are markedly increasing the number of outpatient encounters. In Fiscal Year 2003, we had 445,045 total visits with over 40,000 different veterans in our medical center and four outlying clinics. Our healthcare system is a major teaching facility affiliated with the University of California Irvine College of Medicine. Residency training programs are available in 31 specialty and subspecialty areas. Training is also provided in dentistry and several allied health disciplines besides psychology including pharmacy, social work, nursing, and rehabilitation therapies.

The [City of Long Beach](#) is located along the California coast in southern Los Angeles County, next to the border of Orange County. The city is named for its miles of sandy beaches. With its ethnically diverse population of almost a half million people, Long Beach is the fifth largest city in California but originally became popular as a seaside resort in the late 19th century. Today its harbor is the home of the famous luxury liner the [Queen Mary](#) and the Port of Long Beach, which is the busiest closed container-shipping center in the United States. In the greater Long Beach area, a large number of recreational, entertainments, cultural, sporting facilities are available.

THE PSYCHOLOGY TRAINING PROGRAM

Established in 1947, the Psychology Training Program has always been considered a significant component of mental health services in the VALBHS. Although the program has provided training to all levels of psychology graduate students and postgraduates, the primary emphasis is now on the predoctoral internship program. Since 1980, we have trained 199 predoctoral interns (165 Ph.D. Clinical, 26 Ph.D. Counseling, and 8 PsyDs.) representing 71 graduate programs from around the country. The internship program was initially granted full accreditation by the American Psychological Association in February 1980 and full five-year re-accreditations have been granted after then. The next planned APA site visit will be during the first quarter of 2005. The [APA Committee on Accreditation](#) is located in the Office of Program Consultation and Accreditation, American Psychological Association, 750 First Street NE, Washington, D. C. 20002-4242. Their telephone number is (202) 336-5979.

Program Philosophy and Emphases

The primary goal of the VA Long Beach Internship Program is to train pre-doctoral interns to provide a variety of psychological services within a general healthcare facility. Although our psychology staff provides a number of very specialized services, we believe that training in clinical and counseling psychology at the predoctoral level should be broadly based rather than narrowly specialized. Given the fact that we are a VA healthcare facility, it should be understood that the generalist training which we provide takes place within the constraints of our institution. Naturally, along with all VAs, we serve primarily adult veterans and some active military service people, the majority of who are male but where a higher percentage of younger veterans and active duty service people are women. Furthermore, because we are a general medical and surgical facility rather than a neuropsychiatric facility, many of the training opportunities that we provide have a behavioral medicine or health psychology focus. Due to changes in nationwide patterns of health care delivery, over the past several years this healthcare facility has undergone a general shift from inpatient to outpatient treatment. This applies to both mental health and medical/surgical settings.

We individualize our internship program to meet the needs of each intern. Although we accept both clinical and counseling students into our program, it should be noted that all of our current doctoral staff are clinical psychologists. However, no differentiation is made between clinical and counseling interns with respect to the content of their clinical training experiences. The program follows a traditional one-to-one apprenticeship model in which the intern works along side her or his supervisor. At the beginning of the internship year, interns have the opportunity to meet with all the staff psychologists to learn what training experiences each rotation offers. After consulting with the training director and his assistant, interns select those training experiences that best meet their individual training needs and interests. Supervision on any particular rotation is provided by the staff psychologist assigned to that clinical setting. The degree of responsibility given the intern and the amount of structure provided depends on his or her level of prior experience. The program also includes many educational opportunities such as lectures, seminars, and case conferences. Presently, we have six full-time funded internship positions. The class of 2004-05 began on August 23, 2004 and will complete their internship on August 19, 2005, and the class of 2005-06 will begin on August 22, 2005 and finish on August 18, 2006. The current VA *per annum* compensation for Psychology Interns is \$18,750, and now interns have the opportunity to enroll in health and life insurance programs with VA for the year that they are here. To ensure these benefits, interns are brought on with a "not to exceed 3 years" designation, but it should be clear that all VA internships are designated as 52-week 2080-hour training experiences and not less or more than that.

Admission Policies and Application Procedures

Criteria for acceptance into the program

According to VA policy, training can be given only to students who are U.S. citizens and are enrolled in APA-accredited doctoral programs in clinical or counseling psychology. In addition, we require that a prospective intern's university advisor or director of training verify that he or she approves and recommends that the student receive an internship at this facility as verified on the APPIC "Academic Program's Verification of Internship Eligibility and Readiness" form. Only full-time, yearlong internships are available.

Application process

To apply, applicants must send us the following:

1. The APPIC Application for Psychology Internship ([AAPI](#))
2. A copy of your curriculum vitae,
3. A transcript of your **graduate** courses,
4. Three letters of recommendation from individuals who are acquainted with your academic performance and/or training experience. Letters and transcripts may be sent by separate cover, or be included with your other application materials.

To be considered, all application materials for the 2005-06 internship year need to arrive by Wednesday December 1, 2004 at the very latest. Again, letters of recommendation and transcripts can come separately but definitely by that date. They should be addressed to:

Kenneth D. Cole, Ph.D.
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VA Long Beach Healthcare System
5901 E. 7th Street
Long Beach, CA 90822

Phone: (562) 826-5604
Fax: (562) 826-5679

Applicant Interviews

All personal interviews are done individually and by invitation only. Candidates will be informed by December 11th as to whether or not they have been invited for a personal interview. We regard interviews as a two-way process: a chance for us to meet and learn more about you and an opportunity for you to meet us and get a better understanding of our program. In addition to meeting with a pair of interviewers for an hour and a short time with the training director, interviewees will have the opportunity to meet with one of our current interns. The total interview process should take about 2 to 3 hours. For those who are invited for an interview and are unable to visit our program in person, we will be happy

to conduct an interview and answer your questions by telephone. A personal interview is not required for selection. We will continue to fully adhere to the selection process guidelines established by the [Association of Psychology Postdoctoral and Internship Centers \(APPIC\)](#). This means in part that no person at this training facility will solicit, accept, or use any ranking-related information from any intern candidate.

Match Process

We will follow the [match policies](#) established by APPIC. Our program uses one match number for all six positions. The only information that we may communicate to applicants prior to the February deadline is whether they are still under consideration for admission. Additional information regarding the match is available through the [National Matching Services](#).

**Long Beach VA Match Number
1291**

Organizational Structure

The VA Long Beach Healthcare System is organized administratively into several broad, interdisciplinary health care groups. These include Medicine, Surgery, Comprehensive Rehabilitation and Geriatrics-Extended Care, Spinal Cord Injury/Dysfunction, and Mental Health. All staff psychologists are members of the Mental Health Care Group. The Chief of the Mental Health Care Group is psychiatrist Lawrence Albers, M.D. Our Chief Psychologist is Richard W. Hanson, Ph.D., who until 1999 served as Psychology Training Director for about 20 years. Reda R. Scott, Ph.D., is the Assistant Chief Psychologist. Our Director of Training is Kenneth D. Cole, Ph.D., and our Assistant Training Director is Leigh Messinides, Ph.D.

Each intern has five primary supervisors throughout the year who are responsible for their specific rotation's training experience. The supervisor assists in selecting patients, in making assessment referrals, etc. Supervisors are expected to have regularly scheduled supervisory sessions with interns under their responsibility. At a minimum, there are two hours per week devoted to supervision from each supervisor. So with two concurrent rotations interns can expect at least four hours of total supervision per week.

A Psychology Department education meeting with our staff psychologists and interns takes place once a month. These meetings are chaired by the Chief Psychologist and are chiefly dedicated to an educational topic of interest to the presenter. The staff presents at half of them and interns at the other half for a total of 12 meetings a year. Facilitated by the Internship Training Director and Assistant Training Director, another bimonthly meeting for only the staff to discuss supervision issues, policy issues pertaining to the training program, and to review the progress of our interns and practicum students. A general staff meeting for all 15 psychologists, our psychometrician, our Vocational Rehab counselor, and our new Program Support Assistant meets once a month as well. The internship class selects a

“Chief Intern” at the beginning of the training year. She or he is expected to attend this meeting to keep the internship class abreast of issues in our professional group and in the healthcare facility in general. Other responsibilities of the Chief Intern include coordinating the interns’ schedules for meeting intern candidates in January, serving as a general liaison between the internship class and the Assistant and Training Director, and coordinating educational events with our Chief Resident in Psychiatry.

General Policies and Procedures

A general orientation occurs the first week of the training year. The purpose is to familiarize interns with the organizational structure and the physical layout of the healthcare facility, our 15 Staff Psychologists and the types of clinical services they provide, potential training opportunities and assignments, and the policies and procedures followed by the VA Long Beach Healthcare System, the Mental Health Care Group, and the Psychology Training Program, and finally to select their five rotations for the year.

Specific Training Goals and Evaluation Process

Before and during orientation week, interns' prior training experiences are reviewed. This is done to identify areas of strengths and weaknesses in order to facilitate the development of a training program that best meets the specific training needs of each intern. In keeping with our generalist philosophy, interns are encouraged to address those areas in which they have had very limited experience (e.g., working with certain populations such as the severely mentally ill or substance abusers, particular assessment approaches such as use of neuropsychological instruments or personality testing, and exposure to various theoretical orientations such as psychodynamic or cognitive-behavioral). It is expected that upon completion of the program all interns will demonstrate competence in the following six general domains:

- A. Clinical Procedures and Principles
- B. Assessment
- C. Treatment Planning
- D. Interventions
- E. Consultation and Liaison
- F. Professional Ethics

At the beginning of the training year, each intern receives a Psychology Intern Manual that specifies the required competency elements within each domain, along with examples of the expected levels of performance for an intern. At the end of each training rotation, the intern is rated on all competency elements that apply to that rotation. Items in the Clinical Procedures and Principles, Consultation and Liaison, and the Professional Ethics sections are simply rated as “Fully Successful” or “Needs Improvement,” while the elements in the sections on Assessment, Treatment Planning, and Interventions have three rating levels based on descriptive anchors. Level 1 stands for “Needs Constant Supervision /Requires

Basic Training." Level 2 denotes someone who "Needs Frequent Supervision and Has Little Practical Experience." Level 3 refers to "Level for a Typical Intern upon Graduating from Our Program/Basic Knowledge and Expertise." While some interns may be functioning at a higher level than Level 3 especially towards the end of their internship year, we have designated Level 3 as the criteria-based acceptable level of functioning for all psychology interns. Level 3 thus represents the attainment of performance that we expect of an intern exiting our training program. This refers to both basic clinical skills and appropriate use of supervision for a psychology student nearing the end of graduate training. In addition to these formal competency ratings, a narrative summary of the intern's performance over the evaluation period offers more personalized and specific information about the intern's progress, performance, and clinical strengths and any areas that may be useful for additional professional growth.

Training Schedule and Rotations

During orientation week, interns meet with the Assistant and Training Directors to plan their training schedule for the entire year. Five half time (i.e., about 16-18 hours per week) rotations are selected. Two rotations are of 6-months' duration and three rotations are of 4-months' duration as indicated in the diagram below:

6 Month Rotation		6 Month Rotation	
4 Month Rotation	4 Month Rotation	4 Month Rotation	

Interns are given considerable latitude in their choice of specific rotations, providing sufficient attention is given to any training deficiencies and clinical coverage issues. Interns typically get their top four rotations, and then they will select one 4-month rotation among a group of rotations that still need intern coverage. Interns are expected to develop a well-balanced rotation schedule rather than one that is narrowly focused.

Weekly Intern Seminar

Intern seminar meets Wednesday afternoons from 2:30 to 4:30. Seminar is comprised of topics ranging from issues of diversity in our patients and staff, new developments in chronic pain management, behavioral health consultation, traditional psychological testing, neuropsychology, psychopharmacology, and various professional development issues (e.g., legal and ethical issues, the 10-hour human sexuality state licensure, employment alternatives, and job seeking strategies). Staff members give presentations ranging from a single hour to two-hour sessions spanning four or five intern seminars. As mentioned, in addition to our intern seminars, interns make presentations at our monthly Psychology Department education meetings, are involved in Mental Health Care Journal Club, and can attend and even present at Mental Health Group Grand Rounds.

DESCRIPTION OF CLINICAL TRAINING OPPORTUNITIES

Below is a list of all our 13 current rotations that are available for psychology interns at VA Long Beach Healthcare System. This section is included only as a general guide rather than a complete and final description of all available training opportunities. In all cases a specific program for an intern must involve the approval of the Director and Assistant Director of Training.

1. Chronic Pain Management Program
2. Day Treatment Center
3. Geropsychology
4. Infectious Disease Clinic, Oncology, Hospice, & Nephrology Consultation
5. Primary Care Consultation/Liaison Program
6. Neuropsychology and Rehabilitation Medicine
7. Outpatient Mental Health
8. PTSD and Anger Management Programs
9. Smoking Cessation Program
10. Spinal Cord Injury/Dysfunction (SCI)
11. Substance Abuse Treatment Clinic (SATC)
12. Traditional Psychological Assessment and Psychotherapy
13. Women's Health Clinic

Chronic Pain Management Program

Supervisor: Richard W. Hanson, Ph.D., Program Director

Program: This program is aimed at individuals suffering from chronic pain syndromes who have not responded well to conventional medical and surgical approaches. The emphasis is on supplementing medical treatment (e.g., pain medication) with self-management techniques (e.g., cognitive and behavioral coping strategies). We offer an intensive, structured, multidisciplinary program that is affiliated with the Comprehensive Rehabilitation Medicine Health Care Group. The intensive program, directed by Dr. Hanson, lasts five weeks and meets on Monday, Wednesday, and Friday from 9:30am to 3:00pm. The program is largely psychoeducational and utilizes a group treatment format. Participants attend physical therapy, kinesiotherapy, and two psychological groups each day that the program meets. Physical therapy focuses primarily on increasing joint flexibility, whereas kinesiotherapy focuses on muscle toning and increasing aerobic fitness. Vocational rehabilitation and counseling services are offered as well. For those who are unable to attend the intensive program, we offer a Psychology pain management group that meets each Tuesday at 3:00 p.m. Finally, a monthly follow-up/support group, which meets the first Thursday of every month at 1:00 p.m., is offered to those who have completed either of the first two tracks. Some individual psychology pain management training is offered on a limited basis.

Emphasis is placed on conceptualizing chronic pain from a broad biopsychosocial

perspective rather than a narrow biomedical one. That is, the focus is on the pain sufferer in his or her social context rather than on specific medical diagnostic conditions. Psychological treatment modalities include various cognitive-behavioral pain/stress management techniques such as goal setting, constructive problem solving, relaxation training, and self-hypnosis, identifying and modifying distorted/irrational beliefs (Cognitive Therapy), and learning to modulate daily physical activities. The treatment approach was previously described in Drs. Hanson and Gerber's (1990) book, *Coping with chronic pain: A guide to patient self-management*, published by the [Guilford Press](#). All program participants are given a *Pain Management Handbook* written by Dr. Hanson, which covers the various topics discussed in the Psychology pain groups.

Program participants are evaluated using self-report questionnaires prior to entering the Program, upon completion of the program, and at follow-up. Dr. Hanson and interns also participate in a new multidisciplinary back pain consultation clinic on Thursday mornings.

Psychology Training Provided: Psychology interns and trainees participate in all phases of the Pain Program including psychological evaluations of patients who are referred to the program and leading psychology group sessions. Full assessment report write-ups and group progress notes are required. There are also some opportunities for individual work. Interns have an opportunity to observe the physical rehabilitation treatment modalities, as well as gain some experience with program management. A weekly pain management seminar is offered by Dr. Hanson to all interns and pre-interns who are interested. In addition to reviewing psychological treatment approaches, the seminar covers biomedical aspects of pain including neuropsychological pain mechanisms, medications, and other biomedical treatment approaches. A number of specific pain conditions are reviewed as well, including low back pain, osteoarthritis, rheumatoid arthritis, myofascial pain syndrome, fibromyalgia, tension and migraine headache, cancer pain, and various neuropathic pain conditions.

Day Treatment Center

Supervisor: Richard C. Tingey, Ph.D.

Program: The Day Treatment Center (DTC) is an outpatient, biopsychosocial treatment and rehabilitation program. It blends psychotherapy, psychoeducation, and psychiatric therapies with practical rehabilitation. As part of this healthcare facility's mental health services, we provide continuity of care between the inpatient units/acute care and other less intensive outpatient programs. We generally treat the severe and chronically mentally ill clients with schizophrenia, schizoaffective, severe depression, bipolar, and severe personality disorders. The programming is designed for clients who have a reasonable expectation for improvement or a need to maintain their functional level to prevent relapse/hospitalization. We also provide blended treatment through our Addictions Track for clients who have a drug or alcohol problem. Generally, the treatment provided in DTC focuses on two areas: symptoms and adaptive functioning. We try to decrease symptoms to increase functioning, and increase functioning to motivate clients to better manage their symptoms. The overall goal is to help them function as well as possible in their community. We have an excellent interprofessional team (psychologist, psychiatrists, nurses, RT, and OT) who provides treatment and enjoys working with interns.

Psychology Training Provided: Interns can leave DTC having done almost everything that the regular staff does (not including the medical interventions). They do intake assessments, provide individual and group psychotherapy, case coordination, crisis intervention, psychological evaluations, discharge plans, and present in interdisciplinary rounds. They can choose to emphasize one or two areas or opt to sample it all. They may be fairly independent and lead groups on their own, or team up with other staff members. These experiences are spread through the rotation to give the intern time to adjust and to reflect. The staff members are quite flexible and are very skilled at providing the type of training the intern seeks.

Geropsychology

Supervisor: Reda R. Scott, Ph.D.

Program: Geropsychology services primarily involve three areas: 1) the Nursing Home Care Unit which is a 180-bed skilled nursing facility, 2) a Geriatric Evaluation and Management Unit, and 3) a Geropsychology Outpatient Dementia Clinic which meets weekly to assess community-dwelling, elderly veterans who are experiencing cognitive changes. In addition, the healthcare facility opened a Geropsychiatry Inpatient Unit, which is aimed primarily at patients with dementia who are seriously disturbed and/or present behavioral management problems.

A special emphasis of Geropsychology is placed on the neuropsychological assessment of

older adults. Typical referral questions include dementia vs. depression, complicated bereavement, and difficulty coping with chronic illness. Psychology actively participates in interdisciplinary team planning in order to set objective measurable treatment goals.

Psychology Training Provided: Interns will have the opportunity to work with older individuals on issues related to chronic (sometimes terminal) illness and the physical, social, and psychological changes associated with aging, illness, and physical disability. There are opportunities for marital and family interventions. Interns will have the opportunity to gain knowledge and specialized skills in neuropsychological assessment of the older adult and will learn how to communicate their results to an interdisciplinary healthcare team. Particular emphasis is given to diagnosing the various dementias and discriminating them from reversible disorders (e.g., delirium, depression). Interns will also learn a variety of therapeutic approaches for use with the elderly. Interns are encouraged to pursue, suggest, and implement innovative approaches to working with elderly patients. Research interests that are consistent with clinical activities are strongly encouraged.

Infectious Disease Clinic, Oncology, Hospice, & Nephrology Consultation

Supervisor: Adrienne House, Ph.D.

Infectious Disease Program: The Infectious Disease program provides evaluation and treatment for veterans diagnosed with infectious diseases. Approximately 200 patients are enrolled in the outpatient ID Clinic, and the vast majority are being treated for HIV disease. The primary care model is utilized for the provision of psychological services to the veterans with HIV/AIDS and mental health services are closely integrated into the provision of their overall medical care.

The psychologist provides coverage twice weekly for the ID Clinic and sees patients outside of clinic for crisis intervention, individual, couples and family psychotherapy. The psychologist also works closely with the clinic physicians and other allied health team members, providing consultation on a variety of issues, including recommendations regarding patients' potential for adherence to complex treatment regimens and developing strategies to increase adherence. The psychologist also provides follow up to HIV+ veterans receiving inpatient medical or convalescent care.

All new patients receive initial psychological screening and are then evaluated on an ongoing basis for assessment of adherence to treatment regimen and adequacy of coping; early assessment of and intervention for potential problem areas, with the goals of preventing or reducing problems, and early identification and treatment of problems that might interfere with the ability of the patient to adhere to complex and strict medication regimens, e.g., depression, substance abuse and dependence, and other psychosocial stressors. Issues addressed include developing effective strategies for attaining and maintaining physical and psychological health, assessment and treatment of depression,

anxiety, alcohol and other substance abuse and dependence, negotiating safer sex, and maintaining adherence to strict antiretroviral treatment regimens. The veteran is encouraged and supported in becoming an active and knowledgeable participant in his or her medical care.

Hematology/Oncology Service: As part of the interprofessional team, the psychologist provides consultation services to veterans receiving inpatient and outpatient treatment for cancer. Consultation requests are received from general medical wards, general surgery clinics, ENT clinic, inpatient and outpatient hem/onc, and radiation therapy. The psychologist also attends weekly ENT tumor boards.

The psychologist assists veterans and families in coping with the many issues surrounding dealing with life-threatening and chronic illnesses, including changes in body image; pain management; end of life decision-making; coming to terms with loss of function; adjusting to disfiguring surgery; the side effects of chemotherapy and radiation; and improving communication with the medical team. In providing psychological assessment and interventions, the psychologist works with many different problems and concerns, including depression and assessment of suicide risk, anxiety, alcoholism and substance abuse, noncompliance to medical regimens, marital and family issues, and other mental health issues. The psychologist explores with the patient and family salient existential questions and appropriate feelings associated with serious illness and dying.

Hospice: The psychologist works with an interprofessional team to provide services to terminally ill veterans and their families through the inpatient hospice program, which is located in our nursing home care unit. The psychologist addresses the psychological aspects relevant to the end of life, including differentiating between distress caused by normal grieving and that associated with psychiatric disorders, assisting the veteran in coming to terms with and finding meaning and peace in his/her experience, facing their fears, and doing the emotional work of saying good-bye. The psychologist also works with the veteran's family and friends and there is the opportunity to do bereavement work after the veteran's death.

End-of-life psychological services are also provided to patients and families through the weekly Palliative Care Clinic. This is an interprofessional clinic designed to address the total care of cancer patients whose disease is not responsive to standard therapy or who are not candidates for aggressive therapy. The treatment goal is management of symptoms and comfort care and addresses the emotional, psychological, and social problems faced by patients in addition to their physical problems.

Nephrology Service: Psychology occasionally provides consultation services to patients on hemodialysis and peritoneal dialysis. Issues addressed include mood and anxiety disorders, coming to terms with major lifestyle changes, compliance with complex and often difficult dietary and medical regimens, quality of life issues, and the effect of end-stage renal disease on family and other relationships. The psychologist also provides

psychological evaluations to evaluate veterans being considered for kidney transplant.

Psychology Training Provided: Interns gain experience with a wide variety of psychological problems associated with chronic and/or life-threatening illness and terminal illness. Exposure to both inpatient and outpatients is provided. An intern has the opportunity to gain familiarity with a variety of both short- and long-term treatment approaches. The intern will learn multiple assessment techniques, formulation of appropriate recommendations and referrals, methods for communicating the results and recommendations to the treatment team, and varied psychotherapeutic interventions. Common therapeutic issues include depression, grief, anger, compliance with medication, substance abuse, interpersonal conflicts, existential issues associated with serious and terminal illness, and suicidality. Interns also get experience being a member of a variety of interprofessional teams.

Primary Care Consultation/Liaison Program

Supervisor: Martin I. Kenigsberg, Ph.D., FAACP, A.B.P.P.

Program: This rotation provides psychological consultation for medical patients in primary care outpatient clinics. Consults for psychological consultation include both assessment and treatment requests, and may come from physicians, nurse practitioners, and physicians' assistants. A wide range of psychological and behavioral issues is encountered, including behavioral medicine issues, preoperative psychological evaluation, underlying psychopathology, depression and suicidal risk, anxiety, evaluation for organ transplantation, non-compliance with medical treatment, substance abuse, marital and family problems, and adjustment to chronic and/or life-threatening disease, etc. In some cases the consultant performs a triage function, while in others the consultant may provide direct psychological treatment to the patient. In addition to the general consultant role, closer liaison services are provided to Cardiology. There are weekly interdisciplinary cardiac rehab team meetings in which patients in need of psychological services are identified and psychological evaluations are shared with other team members. There is also an opportunity to work one half day a week in a community based outpatient clinic with a general medical population.

The Primary Care Medical Education (Prime) Program is aimed at providing training of medical residents, nurse practitioner students, pharmacy residents, and psychology interns in the provision of interprofessional, primary medical care services. This interdisciplinary training activity takes place primarily within the context of our Primary Care Clinic. This is an outpatient clinic where patients are assigned to a primary care (generalist) physician or "physician extender" (nurse practitioner or physician assistant). Psychology Interns in primary care are able to provide interprofessional consultation, assessment, treatment, and referral services.

Psychology Training Provided: Interns gain exposure to a broad range of psychological

and behavioral problems that interface with physical disease and disability as well as medical/surgical treatment. Assessment of these problems may draw from diverse sources of information including review of patient records, direct behavioral assessment, clinical interview, information from medical staff or family members, and the use of selected psychological tests. Learning to communicate assessment information effectively and make recommendations to referral sources is emphasized. Experience with a wide range of psychological treatment approaches can be obtained. Crisis intervention, individual, and family psychotherapy, and behavioral medicine interventions are all available.

Neuropsychology and Rehabilitation Medicine

Supervisor: Jeffrey S. Webster, Ph.D.

Program: This program provides clinical neuropsychological consultation to the entire healthcare facility, including Neurology and Rehabilitation Medicine. Such consultation usually consists of the assessment of neuropsychological and psychological functioning using a broad range of quantitative and qualitative approaches. In addition, the intern provides general psychological consultation services to Rehabilitation Medicine including facilitating adjustment in the brain-injured individual and his/her family. Interns also attend seminars on neuropsychology, neuropathology, and rehabilitative medicine.

Psychology Training Provided: The intern can expect to be exposed to a wide variety of strategies for neuropsychological assessment including process approaches and structured batteries. By the time the intern has completed the rotation, she or he can also expect to learn how to plan a testing battery based on the patient's likely neuropathology and history. Information obtained from the assessment is used to answer diverse referral requests, e.g., identifying the presence, localization, and nature of brain lesions or dysfunction; establishing baseline functioning; and identifying the pattern of neuropsychological and personality strengths and weaknesses. This information is used to aid in establishing diagnosis, treatment and rehabilitation planning, and prognosis. Interns may also get the opportunity to conduct cognitive retraining with a few brain-injured patients. Dr. Webster encourages rehabilitation-related research as well. He is seeking funding for post-doctoral fellows for retraining of patients with unilateral neglect. Recent publication results from his rotation include: Webster, et al (1995) Rightward orienting bias, wheelchair maneuvering, and fall risk, *Archives of Physical Medicine & Rehabilitation*; Webster et al, (1997) Assessment of patients with unilateral neglect. In A.M. Horton, D. Wedding, & J.S. Webster (Eds.), *The Neuropsychological Handbook: Volume 1, 2nd Edition* (pp. 469-502). New York: Springer.

Outpatient Mental Health

Supervisor: Leigh Messinides, Ph.D.

Program: General mental health services are provided by an interdisciplinary staff. Each patient is assigned to a case manager who is available for crisis intervention and liaison to other services. Depending on needs the patient may be assigned to a psychiatrist, social worker or a member of the psychology staff. A clinical pharmacist is available within the clinic for patient education and staff consultation. Psychology provides individual assessment and diagnostic intakes as well as individual, couples, family, and group psychotherapy. Patients who are in need of acute intensive psychiatric are treated in the short-term inpatient psychiatric unit and followed by the same mental health providers assigned to them during the outpatient treatment. Cases may also come from the walk-in clinic (PETS clinic) for more immediate assignment of patients in crisis.

Psychology Training Provided: Interns are expected to develop a caseload of patients referred by the walk-in clinic or the mental health clinic staff. Psychological services include individual assessment and diagnostic testing, individual psychotherapy, couples/family therapy, and group therapy. Should the need for hospitalization occur, the intern and other staff members follow their patient during the inpatient phase and the discharge planning process. The most frequent psychotherapy referrals are for mood disorders, panic disorder, social anxiety, and PTSD, but a whole range of presenting problems can be encountered such as eating disorders, delusional disorders, and compulsive or self-destructive behaviors. There is also the opportunity to co-lead a cognitive-behavioral group for managing depression and anxiety symptoms. If an intern wishes to develop a time-limited treatment group in a particular area of interest, support for this can be provided. The intern is encouraged to consult and collaborate with the other disciplines providing care and to coordinate psychological care with the biological, social services, and case management interventions offered.

The trainee would also have the opportunity to work at the Santa Ana Community Outpatient Clinic, which would provide a primary care experience. This is voluntary based on interest and scheduling (Fridays only).

PTSD and Anger Management Programs

Supervisor: Susan H. Houston, Ph.D., A.B.P.P.

PTSD and Anger Management Programs: PTSD programs at the Long Beach VA Healthcare System include group and individual therapy. The Combat Stress Group, in existence since 1985, is a group for combat veterans of any era who are experiencing PTSD symptoms as a result of their combat exposure. This group combines psychoeducational and cognitive-behavioral treatment techniques with sharing of combat-related and current issues by participants). A new group, called "Transitions," helps veterans from Afghanistan or the current conflict in Iraq readjust to civilian life and reintegrate into family, social and school or work settings. Individual therapy is also provided for veterans with PTSD issues who are not candidates for group treatment for

whatever reason. The Anger Management program is a 16-week, 32-session group intended to assist veterans who have difficulty controlling their anger and expressing it appropriately. The group may include veterans who have been referred from various sources, including the courts, as well as those who join the group because of their own desire for assistance in this area. Additionally, a new group for perpetrators of domestic violence is planned for fall or winter 2004. Dr. Houston also leads or co-leads several other groups, including a Seniors Group once a week for older veterans experiencing depression, anxiety, or adjustment disorders, and PTSD and Anger Management groups at the residential substance abuse treatment program (VVRC), located about 6 miles west of our VA Long Beach facility.

Psychology Training Provided: Interns who select this rotation work closely with Dr. Houston as part of the PTSD/Anger Management team. They have opportunities to gain experience in interviewing skills, diagnosis and both individual and group treatment in the PTSD and Anger Management programs. Interns co-lead groups and lead sessions of Anger Management themselves, as well as seeing veterans with PTSD, anger issues or related problems for short-term individual therapy.

Smoking Cessation / Weight Control Program

Supervisor: Barry Rabin, Ph.D.

Program: The Smoking Cessation / Weight Control Program provides outpatients and selected inpatients, along with their significant others, behavioral and medical interventions to help them reduce their risk factors from smoking and/or overweight. Psychologists work closely with other health professionals (e.g., pharmacists, nutritionists, physical therapists) in balancing the psychological and medical interventions. Therapeutic approaches provide a combination of a structured psychoeducational model, cognitive behavior therapy (CBT), and a supportive group process. Individual therapy is provided as needed for emotional problems. Psychologists are involved in initial evaluation, therapeutic intervention and long-term follow-up. Consultation with referring clinics (Primary Care, Pulmonary, Cardiology, Vascular, etc.) is an integral part of the program.

Psychology Training Provided: Interns are encouraged to participate in the many levels of this program. The intern first sharpens his/her diagnostic skills in determining the readiness of the patient to change aspects of his/her life style. Evaluation of smoking/eating history, medical and psychological risk indicators, emotional state, relationships, and environmental interactions are essential in planning for successful intervention. We encourage active leadership in organizing and conducting a combined structured and open-ended group process. The intern will sharpen his or her group presentation skills including multimedia use of videos, handouts, and power-point slides. Group facilitation skills are also encouraged to identify problem areas and encourage adoption of positive attitudes and behaviors. Integrating community programs and selected websites into the patient's efforts

will provide a broader level of experience. Participation in follow-up efforts after patients complete the program completes the intern's involvement.

Spinal Cord Injury/Dysfunction (SCI)

Supervisors: Karen I. Hall, Ph.D., David N. Kerner, Ph.D., Linda R. Mona, Ph.D.

Program: The Spinal Cord Injury/Dysfunction (SCI) Health Care Group is considered to be the largest SCI center in the United States. It is a thriving program, with some of the greatest resources in the entire hospital. Patients in this setting represent a broad spectrum of SCI, from the newly injured individual facing a catastrophic life change, to the individual who was injured many years ago who is now coping with decreased functional ability as a result of the aging process. Five staff psychologists, along with interns and pre-interns, provide mental health and behavioral health services to veterans with SCI on an inpatient and outpatient basis.

SCI can result from traumatic injury (such as gunshot wound or motor vehicle accident), or from a variety of non-traumatic causes (such as multiple sclerosis). Persons with SCI are classified as either tetraplegic or paraplegic. The tetraplegic (quadriplegic) individual has experienced a traumatic injury or impairment in one or more cervical segments of his or her spinal cord resulting in sensory and motor loss in the arms, hands, as well as in all areas below the damaged level. Paraplegics have damaged or diseased spinal cords in the thoracic, lumbar, or sacral segments, causing loss of sensory and motor function (paralysis) at the point of injury and below.

SCI rehabilitation and treatment demands a broad interdisciplinary approach both for acute rehabilitation and for ongoing care. The psychologists and interns work within closely-knit teams that include physicians, pharmacists, social workers, rehabilitation therapists, case managers, dietitians, respiratory therapists, psychiatrists, and especially the nursing staffs of the three SCI units. Psychology staff assess each patient and provide interventions addressing a wide variety of adjustment, mental health, and health behavior concerns. Frequently seen problems include adjustment to disability, depression and anxiety, pain, and compliance/adherence concerns. Intervention approaches include individual counseling, education, and psychotherapy, sex therapy, relaxation training, pain management, social skills training, patient education, couples therapy, and psychosocial support for the injured person's family and other social support systems. In addition, close consultation with the SCI team forms a central part of the psychologist's role.

Psychology Training Provided: Interns obtain experience in observing, evaluating, and facilitating the adjustment of individuals following a disabling injury. The intern learns to promote coping strategies and assist reintegration into meaningful life activities and roles. Interns gain valuable experience working within interdisciplinary medical teams and also within a consultation-liaison framework. It is expected that the intern will

fulfill the behavioral health needs of the unit through assessment, consultation, treatment, and the use of appropriate referrals. Longer-term outpatient work is also available, as are opportunities for staff in-service training. The concepts and strategies learned are not unique to SCI, but can be generalized to other medical populations. It is not expected or necessary for trainees to have specific interest in spinal cord injury per se. Because so many job openings for psychologists now require some background working with physicians and medical teams, this rotation is especially useful for interns seeking to enhance their marketability in that area.

Substance Abuse Treatment Clinic (SATC)

Supervisor: Henry C. Benedict, Ph.D.

Program: The program is open-ended with daily admissions and discharges. Treatment is a daily round of structured activities, including group therapy, individual counseling, rap sessions, films, patient-staff meetings, patient government meetings, relaxation sessions, rehabilitation therapies, and evening AA/CA meetings. Family members and friends are invited to attend films, lectures, and discussion groups. A full interprofessional staff is involved in the program, which follows a medical/social model.

Psychology Training Provided: Interns can expect to participate in all aspects and activities of the program. Examples include acting as co-therapist in groups of 10-15 patients, counseling individual cases, doing intake interviews with and without the use of psychological testing, and participating in one and three week treatment plan updates. The training experience should provide the intern with an understanding of the dynamics of substance abuse in the dually diagnosed and dually addicted patient, and the techniques involved in their treatment.

Traditional Psychological Assessment and Psychotherapy

Supervisor: Kenneth D. Cole, Ph.D.

While still covering patients for one physician in Spinal Cord Injury, as Training Director I decided to carve out a new rotation that features traditional psychological assessment together with supervision in psychotherapy. Psychological testing will be primarily with the MMPI-2, the MCMI-III, and the newer Personality Assessment Inventory ([PAI](#)) by Leslie Morey, Ph.D. of Texas A&M. These measures will sometimes be augmented by paper-and-pencil inventories as well. If you need experience with projective testing, that could be incorporated into a battery with ad hoc supervision from one of three other faculty.

The psychotherapy component features an integration of traditional cognitive-behavioral interventions into more psychodynamic and humanistic models of personality development across the life span. The specific approach will be determined by the presentation of the patient together with the length of the planned treatment. My more recent interests include applying Acceptance and Commitment Therapy ([ACT](#)) articulated by Steve Hayes et al (1999) both to traditionally presenting psychological problems as well as special patient problems encountered in a medical setting. The balance of testing versus psychotherapy can vary based on the individual needs of each trainee. Also, there may be opportunities for an intern taking this in the fall to “minor” in the area of program administration.

PSYCHOLOGY TRAINING PROVIDED: My goal in developing this rotation is ultimately to provide a more sophisticated approach to standard psychological testing and to introduce new measures as they are developed. This could either be a trainee’s first experience with these instruments or more of a refinement in selecting appropriate measures and presenting the findings in a tightly organized and well-written report. I would like the psychotherapy section to be an opportunity for an intern to examine different theoretical orientations in conceptualizing cases and choosing an approach and style of treatment that fits her or his personality and worldview as well as the needs of the particular patient.

Women's Health Clinic, Psychology

Supervisor: Lori S. Katz, Ph.D.

Program: The Women's Health Clinic has been established to meet the growing demand for gender specific services to women veterans. The Women's Health Clinic is a separate, full-service clinic providing gynecological and primary medical care to women veterans. The mental health portion includes treatment in the following areas: health psychology (including a weight loss group, general psychology (including a stress management group, and individual treatment for depression, anxiety, and other psychological problems), and sexual trauma (including those suffering from Posttraumatic Stress Disorder).

The mental health portion is also active in providing education to staff and patients about women's health. We give lectures and poster presentations throughout the healthcare facility and provide support and information at annual events such as Domestic Violence Awareness and Women Veteran's Recognition Days.

Psychology Training Provided: On this rotation, interns see women patients with a variety of problem issues. Depending on the case, interns may engage in crisis intervention, short-term problem focused psychotherapy, or longer-term cognitive-behavioral or psychodynamic psychotherapy. Interns also help co-lead two women's groups (weight loss and stress management). The Weight Loss group is a structured interdisciplinary program. The Stress Management group is open-ended and covers issues such as building self-esteem, developing positive relationships, stress management, and assertiveness training. Interns receive training in psychotherapy, both short-term and long-term, and group psychotherapy. Emphasis will be on theoretical and practical aspects of psychotherapy.

PSYCHOLOGY STAFF QUALIFICATIONS AND INTERESTS

BENEDICT, Henry C.

Present VA Position: Staff Psychologist, Substance Abuse Treatment Section

Area of Specialization: Clinical Psychology

Degree: Ph.D., Washington University, 1967

VA Hire: 1967

E-mail address: henry.benedict@med.va.gov

Licensure: California, 1969

Theoretical Orientation: Eclectic

Areas of Clinical Specialization: Psychodiagnostic evaluations; Chemical dependence including alcoholism, dual addiction and dual diagnosis; Individual and group psychotherapy

Publications: Cognitive dissonance, clinical exchange, dual diagnosis

Research Interests: Substance abuse, Posttraumatic Stress Disorder

Academic Appointments: Fuller Graduate School of Psychology

Professional Activities Outside VA: Continuous part-time teaching appointments

Professional Organizations: American Psychological Association

Intern Training Rotation: Substance Abuse Residential Rehabilitation Treatment Program

Teaching/Training Interests: All aspects of clinical psychology, therapy, diagnosis, etc.

COLE, Kenneth D.

Present VA Position: Psychology Training Director; Staff Psychologist, Behavioral Health Section

Area of specialization: Clinical Psychology, Adult Development and Aging

Degree: Ph.D., University of Southern California, 1981.

VA hire: 1984

E-mail address: kenneth.cole@med.va.gov

Licensure: California, 1983

Theoretical orientation: Application of recent psychoanalytic, object-relations, and humanistic perspectives to underpin basic cognitive-behavioral techniques

Areas of clinical specialization: Consultation-Liaison to spinal cord injury, life span development, health psychology, training contemporary psychologists

Publications: Interprofessional models of team care; Evaluation of health care teams in training settings; depression in the elderly and in nursing home settings

Research interests: Health promotion and prevention in the elderly, aging with a spinal cord injury

Academic appointments: Clinical Associate Professor, University of Southern

California (USC); Fuller Graduate School of Psychology

Professional activities outside VA: Consultation with interprofessional healthcare programs and teams

Professional organizations: American Psychological Association (Division 20)

Intern training rotation: Specialized Psychotherapy and Assessment

Teaching/training interests: Adult development and aging; applying an integrated psychodynamic/cognitive behavioral model to treatment of couples.

HALL, Karen I.

Current VA Position: Staff Psychologist, Behavioral Health Section (Spinal Cord Impairment Unit), General Mental Health/Psychiatry Section

Areas of Specialization: Clinical Psychology

Degree: Ph.D., California School of Professional Psychology, San Diego, 1997

VA hire: 2003

E-mail address: karen.hall5@med.va.gov

Licensure: California, 1999

Theoretical orientation: Cognitive-Behavioral

Areas of clinical Specialization: Chemical dependency, Individual and group psychotherapy, Disaster mental health, Anxiety Disorders, Combat psychology and Grief work

Research Interests: Brief treatment, Posttraumatic Stress Disorder, Grief work with male populations

Professional organizations: [American Psychological Association](#), [San Diego Psychological Association](#)

Intern Training Rotation: Mental Health Teams

Teaching/training interests: Chemical dependency, Individual and group psychotherapy, Grief work with male populations, psychological assessment and diagnosis and disaster mental health

HANSON, Richard W.

Present VA Positions: Chief Psychologist; Chief, Behavioral Health Section, Mental Health Care Group; Director, Chronic Pain Management Program

Area of specialization: Clinical Psychology

Degree: Ph.D., University of Arizona, 1972

VA hire: 1973

E-mail address: richard.hanson@med.va.gov

Licensure: California, 1978

Theoretical orientation: Cognitive-Behavioral

Areas of clinical specialization: Behavioral medicine, chronic pain and stress management

Publications: Chronic pain management, compliance, rehabilitation psychology;

Chronic Pain Management Handbook (used in the Long Beach VA Pain Management Program)

Research interests: Behavioral medicine, chronic pain

Academic appointments: Department of Psychology, University of California, Los Angeles; Department of Psychology University of Southern California; Fuller Graduate School of Psychology

Professional activities outside VA: Oral Commissioner for the California Board of Psychology

Professional organizations: [American Psychological Association](#), [California Psychological Association](#), [Society of Behavioral Medicine](#), [American Pain Society](#), [International Association for the Study of Pain](#), Association of VA Psychology Leaders

Intern training rotation: Chronic Pain Management Program

Teaching/training interests: Health psychology, behavioral medicine, chronic pain, and stress management, psychoactive substance use and abuse, spiritual issues in psychotherapy

HOUSE, Adrienne I.

Present VA Position: Staff Psychologist, Behavioral Health Section

Area of Specialization: Clinical Psychology

Degree: Ph.D., Washington University in St. Louis, 1985

VA hire: 1992

E-mail Address: adrienne.house@med.va.gov

Licensure: California, 1989

Theoretical Orientation: Cognitive-behavioral, humanistic

Areas of clinical specialization, special interests, and links to resources and information:

- Health psychology, coping with HIV disease, cancer and other chronic illnesses:
- [HIV InSite](#): "Comprehensive, up-to-date information on HIV/AIDS treatment, prevention and policy from the University of California San Francisco."
 - [AIDS HIV AEGIS](#): According to them, "The largest HIV/AIDS web site in the world, updated hourly."
 - [Being Alive Los Angeles](#) is an organization formed by and for people with HIV/AIDS and this site has much information on LA area support groups, resources, events, other HIV-related links, and more. The [Being Alive Newsletter](#) features articles on the latest treatments and issues important to the community. People with HIV/AIDS who cannot afford the cost can request a free monthly subscription.
 - [Project Inform](#)'s website has a wealth of information to help you keep up on the rapid developments in treatments for HIV/AIDS. They offer an

introductory packet for people newly diagnosed with HIV, fact sheets on

disease and treatment issues and newsletters.

- For a collection of great articles on mental health issues and HIV/AIDS, check out [Depression, Anxiety and Mental Health](#) presented by [The Body: An AIDS and HIV Information Resource](#).
- Steve Dunn has prepared [Cancer Guide](#), a good starting point for people who have questions about cancer and want to learn what questions to ask, and the pros and cons of researching your cancer
- For lots of other cancer-related resources, click onto an excellent website [Disease Specific Community Resources \(including cancer\)](#).
- [Renalnet Information Clearinghouse](#) has many links to sites for patients with end-stage renal disease and nephrology professionals

Death, dying and grief:

- The National Public Radio website companion to its yearlong series [The End of Life: Exploring Death in America](#), provides a wealth of resources and information, including transcripts of the shows, readings and a bibliography.
- [Before I Die: Medical Care and Personal Choices](#), shown on PBS in 4/97, features a panel of experts in hospice and palliative care, bioethics, cancer care and pastoral care engaging in a discussion of the issues faced by professionals, patients, and families when making medical treatment decisions at the end of life.
- [Growth House: Guide to Death, Dying Bereavement and End of Life Resources](#), "The Internet's leading community for end of life care," is absolutely fantastic and has a wealth of information.
- [Hard Choices for Loving People](#), an excellent resource regarding end of life decisions for both professionals and patients and their families.
- [End of Life/Palliative Care Resource Center](#): "This site is intended to support individuals involved in the design, implementation, and/or evaluation of EOL/Palliative education for medical students, residents, practicing physicians, and other health care professionals."
- Check out the article [Grief and the Mindfulness Approach](#) by Malcolm Huxter.

Integration of Buddhist philosophy and psychotherapy:

- [As Zen Replaces the Id](#) contains explanations of Zen, Zen psychology, related psychology and medical abstracts, relaxation techniques and a discussion of east-west issues in psychology.
- [Groundwater: The Journal of Buddhism and Psychotherapy](#)
- [Buddhist Psychology: Classical Texts in Contemporary Perspectives](#): from a 5-day residential course on Buddhist psychology co-sponsored by the Barre Center for Buddhist Studies and the Cambridge Institute of Meditation and Psychotherapy

Using mindfulness meditation and other meditative techniques in psychotherapy:

- [Insight Meditation Online](#) is a series of teachings on the techniques of

- mindfulness meditation.
- [The Center for Mindfulness in Medicine, Healthcare and Society](#); at U. Mass Medical School on using mindfulness meditation to help people cope with a wide range of serious and life-threatening diseases, chronic pain and stress-related problems.
 - BuddhaZine's [Psychotherapy, Meditation & Spirituality](#) has several useful articles and essays, including [Buddhist Meditation and Depth Psychology](#).
 - Join in an on-line discussion of [Meditation in Psychotherapy](#), with James Spira. Also check out other interesting discussions on [Behavior OnLine](#)'s website.
 - [The Meditation Archive](#) has an extensive collection of guides to meditations on a range of subjects--it's a magnificent resource offered by [INTERLUDE: An Internet Retreat](#).

Academic Appointments: Fuller Graduate School of Psychology

Professional Organizations: [Society of Behavioral Medicine](#)

Intern Training Rotation: Infectious Disease Clinic, Oncology, Hospice & Nephrology Consultation

Teaching/Training Interests: Psychological adjustment to chronic and life threatening illness, psychological work with the terminally ill, Buddhism and its application to psychology

HOUSTON, Susan H.

Present VA Positions: Staff Psychologist; Director, PTSD Programs

Area of Specialization: Clinical Psychology

Degrees: Ph.D., in Linguistics, Indiana University, 1966; Ph.D. in Clinical Psychology, University of Houston, 1978

Diplomate Status: A.B.P.P. (Awarded 1988)

VA hire: 1978

E-mail Address: susan.houston@med.va.gov

Licensure: California, 1982

Theoretical Orientation: Object Relations and Cognitive

Areas of Clinical Specialization: Posttraumatic Stress Disorder, diagnostic evaluation, psychotherapy of psychoses and personality disorders

Publications: Linguistics, psycholinguistics, experimental psychology

Research Interests: Posttraumatic Stress Disorder, Obsessive-Compulsive Disorder, Attention Deficit Disorder

Professional Organizations: American Psychological Association, Academy of Clinical Psychology

Intern Training Rotation: Psychiatric Evaluation and Treatment Services (PETS), PTSD Program, and Anger Management

Teaching/training interests: Psychological assessment and diagnosis,

individual and group psychotherapy

KATZ, Lori S.

Current VA Position: Staff Psychologist, Women's Health Clinic

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of Massachusetts, 1992

VA hire: 1992

E-mail address: lori.katz@med.va.gov

Licensure: Arizona (1993), California (1996)

Theoretical Orientation: Cognitive-Behavioral, Cognitive-Experiential

Areas of Clinical Specialization: Individual, couples, and group psychotherapy; sexual trauma; Posttraumatic Stress Disorder

Publications: Health psychology, psychotherapy

Research Interests: Psychotherapy, Posttraumatic Stress Disorder

Academic Appointments: Fuller Graduate School of Psychology, Department of Psychiatry U.C. Irvine (UCI) School of Medicine

Professional Organizations: American Psychological Association

Intern Training Rotation: Women's Health Clinic

Teaching/Training Interests: Individual, couples, and group psychotherapy; Theoretical and practical aspects of psychotherapy

KENIGSBERG, Martin I.

Current VA Position: Staff Psychologist, Behavioral Health Section

Area of Specialization: Clinical Psychology

Degree: Ph.D., Pennsylvania State University, 1978

Post-doctoral Training: Stanford University Medical Center, 1980

Diplomate/fellow Status: FAACP, A.B.P.P.

VA Hire: 1980

E-mail Address: martin.kenigsberg@med.va.gov

Licensure: California, 1979

Theoretical Orientation: Cognitive-behavioral, family systems

Areas of Clinical Specialization: Clinical and health psychology, consultation-liaison psychology

Publications: Preventive medicine, behavioral self-management, smoking cessation, pharmacological studies

Professional Activities Outside VA: Examiner, American Board of Professional Psychology; Oral Commissioner for California Board of Psychology; Trustee, and Past President, National Organization of VA Psychologists; Board of Directors, Academy of Clinical Psychology

Professional Organizations: American Psychological Association, American Board of Professional Psychology, Academy of Clinical Psychology, National Organization of VA Psychologists

Intern Training Rotation: Medical and Surgical Consultation/Liaison Services and Prime Program

Teaching/Training Interests: Health psychology/behavioral medicine, cardiac rehabilitation, psychotherapy, psychological assessment, consultation-liaison

KERNER, David N.

Current VA Position: Staff Psychologist, Behavioral Health Section (Spinal Cord Impairment Unit)

Area of Specialization: Clinical Psychology

Degree: Ph.D., Joint Doctoral Program, University of California, San Diego/San Diego State University, 1998

VA hire: 2001

E-mail address: david.kerner2@med.va.gov

Licensure: Illinois (2000)

Theoretical orientation: Cognitive-Behavioral

Areas of clinical Specialization: Medical psychology, rehabilitation psychology, chronic pain management

Publications: Outcome methodology, health psychology

Professional organizations: American Psychological Association, Society of Behavioral Medicine

Intern Training Rotation: Spinal Cord Impairment Health Care Group

Teaching/training interests: Medical/health psychology, rehabilitation psychology, physiological psychology, pain management.

MESSINIDES, Leigh R.

Current VA Position: Assistant Psychology Training Director; Staff Psychologist, Mental Health Teams

Area of Specialization: Clinical Psychology

Degree: Ph.D., University of California, Los Angeles, 1992

VA Hire: 1992

E-mail Address: leigh.messinides@med.va.gov

Licensure: California (1993)

Theoretical Orientation: Integrative (cognitive-behavioral, psychodynamic, systems)

Areas of Clinical Specialization: Health psychology, geriatrics, adults abused as children, caregiver issues, constructivism in psychotherapy (examination of meaning and narrative)

Research Interests: Treatment outcome, chronic pain

Professional Organizations: American Psychological Association

Intern Training Rotation: Mental Health Teams

Teaching/Training Interests: Psychologists as members of interdisciplinary teams, geropsychology, male survivors of child sexual abuse

MONA, Linda R.

Current VA Position: Staff Psychologist, Behavioral Health Section (Spinal Cord Impairment Unit)

Area of Specialization: Clinical Psychology

Degree: Ph.D., Georgia State University, 1998

VA hire: 2002

E-mail address: linda.mona@med.va.gov

Licensure: California (2000)

Theoretical Orientation: Interpersonal

Areas of clinical specialization: Rehabilitation psychology, couples therapy, sex therapy

Publications: Sexuality and Disability, PTSD and SCI, Disability Policy

Professional Organizations: American Psychological Association, Society for Disability Studies, Society for the Scientific Study of Sexuality, American Association of Sex Educators, Counselors, and Therapists

Intern Training Rotation: Spinal Cord Impairment Health Care Group

Teaching/Training interests: Psychology of disability, rehabilitation psychology, sexual expression and sex therapy, diversity issues and cross-cultural psychology

RABIN, Barry J.

Present VA Position: Staff Psychologist; Behavioral Health Section
Area of Specialization: Clinical Psychology
Degree: Ph.D., University of Louisville, 1971
VA Hire: 1971
E-mail address: barry.rabin@med.va.gov
Licensure: California, 1972
Certification: Certified Sex Therapist and Sex Educator, American Association of Sex Educators, Counselors & Therapists
Theoretical Orientation: Cognitive-behavioral
Areas of Clinical Specialization: Medical psychology, smoking cessation, sexual dysfunction, professional-patient relationships
Publications: Adjustment to disability, sexual adjustment in disability, psychosocial aspects of patient care
Academic appointment: Associate Professor, California State University at Long Beach
Professional activities outside VA: Part-time teaching
Professional organizations: American Psychological Association, California State Psychological Association, American Association of Sex Educators, Counselors and Therapists
Teaching interests: Psychological aspects of physical illness and disability, sexual adjustment, professional-patient relationships, pain management, and smoking cessation.

SCOTT, Reda R.

Present VA Positions: Staff Geropsychologist, Assistant Chief Psychologist
Area of Specialization: Clinical Psychology
Degree: Ph.D., University of Arizona, 1982.
VA Hire: 1981
E-mail address: reda.scott@med.va.gov
Licensure: Mississippi (1983), California (1990)
Theoretical Orientation: Cognitive-behavioral
Areas of Clinical Specialization: Geropsychology, neuropsychology, behavioral medicine
Publications: Neuropsychological assessment and rehabilitation, addictive behaviors, behavioral medicine
Research Interests: Depression/anxiety among the elderly, neuropsychological assessment of the elderly, coping techniques for adjustment to chronic disease
Professional Organizations: [American Psychological Association](#) (Divisions 20, 38, and 40)
Intern Training Rotation: Geropsychological Services
Teaching Interests: Geropsychology, health psychology/behavioral medicine, and neuropsychology

TINGEY, Richard C.

Present VA Position: Chief, Day Treatment Center

Area of Specialization: Clinical Psychology

Degree: Ph.D., Brigham Young University, 1989

VA Hire: 1995

E-mail address: richard.tingey@med.va.gov

Licensure: California, 1991

Theoretical Orientation: Psychodynamic, object relations

Areas of Clinical Specialization: Severe chronic mental illness, addictive disorders

Publications: Psychotherapy outcome, outcome methodology

Research Interests: Therapy outcome, brief treatment, treatment efficacy, substance abuse

Academic Appointments: College of Medicine & Allied Health, Charles R. Drew University; Fuller Graduate School of Psychology

Professional Activities Outside VA: Part-time teaching, private practice

Professional Organizations: American Psychological Association, California Psychological Association

Intern Training Rotation: Day Treatment Center

Teaching Interests: Group psychotherapy, SA treatment, day hospital programs

WEBSTER, Jeffrey S.

Present VA Positions: Staff Neuropsychologist; Director, Neuropsychology Research Lab

Area of Specialization: Clinical Neuropsychology

Degree: Ph.D., University of Georgia, 1980

VA Hire: 1984

E-mail address: jeffrey.webster@med.va.gov

Licensure: Mississippi (1981), California (1993)

Theoretical Orientation: Cognitive-Behavioral

Areas of Clinical Specialization: Neuropsychological assessment and rehabilitation of brain-injured patients, behavioral medicine, gerontology

Publications: Neuropsychological assessment, assessment and treatment of unilateral neglect, cognitive retraining following head injury, psychophysiology, stress management, biofeedback, assertion training, and behavioral approaches to physical rehabilitation

Research interests: Neuropsychological assessment and rehabilitation

Academic appointment: Department of Physical Medicine & Rehabilitation, UC Irvine Medical School

Professional organizations: American Psychological Association, and International Neuropsychological Society

Intern Training Rotation: Neuropsychology and Rehabilitation Medicine

Teaching & interests: Neuropsychological assessment, behavioral approaches to physical rehabilitation, computer applications in cognitive rehabilitation, and health psychology

DIRECTIONS TO THE VA LONG BEACH HEALTHCARE CENTER AND PSYCHOLOGY DEPARTMENT

The [VA Long Beach Healthcare Center](#) is located on the corner of Bellflower Boulevard and Seventh Street in Long Beach. It is adjacent to California State University at Long Beach, and is just northeast of where Pacific Coast Highway intersects with Bellflower Blvd. and Seventh Street. The address is 5901 E. Seventh Street. For more information on orienting yourself to the Long Beach area, please check the [Long Beach VA Website](#).

Freeway access from the North is the San Diego Freeway (405). Take the Bellflower Blvd. exit going South (toward the ocean). On Bellflower Blvd., after passing shopping areas and crossing Atherton Street, you will come upon CSU Long Beach on the left. Immediately after the University are the VA grounds, also on the left. Since you cannot make a legal left turn on Sam Johnson Road, you must go further to Palm Road where there is a left turn lane enabling you to enter the VA grounds through Gate 3.

Freeway access from the South is on the San Diego Freeway (405), from the East on the Garden Grove Freeway (22) that merges into the San Diego Freeway, and from the North on the San Gabriel Freeway (605). From each of these freeways, take the Seventh Street (22 West) exit (only goes in one direction). On Seventh Street, after passing CSU Long Beach on the right, you will come upon the VA, which is also on the right. Directions are easier if we say to pass the VA and make a right on Bellflower Boulevard. Take the second hospital entrance (Sam Johnson Road) and proceed straight (east) and park on the left hand side after you reach an intersection with Canob Road. Turn left and park to the right.

If you have a good map you can also take Bellflower Boulevard South off of the 405 Freeway.

Finding the Training Director's and the Psychology Reception Area

The Psychology main offices are located on hallway "A-2" on the second floor of Building 128. Please park in a non-restricted employees' lot (we recommend the "S" parking lot on the north side of the complex). Proceed up the steps and cross the street and walk up the asphalt walkway to the right (west) of the Nursing Home Care Unit. Voluntary services with a blue awning will be on your right. Keep walking straight until you enter through the double doors, make a right and proceed down a long corridor. You'll get to an intersection, and please turn left there. Go through the sliding glass door and then make a right, following the signs for A-2. Make your second left and you'll see two elevators on the left. Take one up to the second floor, turn left, and you'll see my office A-209 on the right hand side. If I'm not available, proceed down the to the end of the hallway and check with Catherine Aragon in the Psychology office (A-200). If you need additional directions, please call (562) 826-5604.