

BEHAVIORAL MEDICINE

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Training Locations:
Primarily Jamaica Plain with some subspecialty clinics
located at Brockton and West Roxbury

Number of Interns: 2

~ Overview ~

The primary objective of the Behavioral Medicine Program is to provide interns with broad exposure to different medical populations, a variety of evidence-based behavioral medicine interventions, and different interdisciplinary teams. Interns will develop an appreciation for the complex interrelationship between behavior and health, gain a clear understanding of the role that psychologists can play in enhancing health outcomes and quality of life, and learn to work effectively with professionals from other disciplines.

The Behavioral Medicine Program at VABHS is a member program of the Council of Clinical Health Psychology Training Programs (CCHPTP); trainees who complete an 8-month rotation within our program will have the necessary scientific and clinical skills to function as a clinical health psychologist.

Interns with a primary focus in Behavioral Medicine (those who complete an eight-month rotation) will have the opportunity to obtain significant breadth and depth of training by taking part in many or most of the clinical activities offered by this program. The comprehensive training can also include opportunities to provide supervision to practicum students and participate in program development and research activities. Interns completing this rotation will achieve mastery in their ability to promote healthy behaviors, assist patients in adjusting to their medical condition(s) and treatment(s), and teach effective coping skills. The eight-month Behavioral Medicine rotation provides excellent preparation for those interns seeking a career in behavioral medicine. Interns

with a secondary focus in Behavioral Medicine (those who complete a 4-month rotation) will also obtain significant experience with medical and health-related issues.

Health concerns are salient in all patient populations. Consequently, understanding the critical link between health-related behaviors and psychosocial issues will enable interns to conceptualize cases, implement interventions, and design research protocols using a multifaceted approach that incorporates these principles.

~ Training Objectives ~

The activities of the Behavioral Medicine interns are much the same as that of a staff psychologist. The training objectives include developing competency in:

- Conducting psychological assessments reports for different medical populations including evaluations for pre-surgical and pre-treatment candidates, chronic pain, sexual dysfunction, and intake and triage.
- Developing strong case conceptualization skills for a broad range of patients, including those with complex presentations, to inform treatment planning.
- Conducting individual, couples, and group psychotherapy with a wide range of populations including those with medical conditions and those seeking healthy lifestyle assistance. The intern will learn to develop and carry out evidence-based behavioral medicine treatment plans.
- Providing consultation and liaison to multidisciplinary treatment teams throughout the healthcare system and developing expertise and confidence in presenting cases at team meetings and collaborating with other disciplines.
- Demonstrating professional development and growth, including understanding and appreciating ethical, legal, and cultural issues related to both clinical and scientific activities, particularly as they relate to patients with chronic medical conditions (i.e., ethical issues related to compliance, appreciating the unique needs of patients with medical illness).
- Conducting various aspects of behavioral medicine research through involvement in an array of clinical research programs. Interns who are interested in more intensive training can become involved in ongoing research projects or initiate their own.

~ Clinical Experience ~

The Behavioral Medicine Program provides a broad range of services to medical populations throughout the VA Boston Healthcare System. In addition to participating in the specific groups and programs delineated below, interns also work with individual patients on a broad range of behavioral medicine issues. Treatment is typically geared toward helping patients cope effectively with major medical illnesses and invasive treatments, promoting healthy lifestyles, encouraging treatment compliance, and

enhancing overall quality of life. Much of the treatment provided on Behavioral Medicine is short-term, cognitive-behavioral, and problem-focused, although there is also the opportunity to do longer-term treatment. Following is an overview of clinical programs:

- **End Stage Renal Disease Program:** This program offers opportunities for interns to evaluate and provide follow-up treatment for patients on hemodialysis. The interns work closely with a multidisciplinary renal team to provide comprehensive services. On the dialysis unit, the interns become familiar with the range of problems this population confronts. The interns' primary role is to facilitate the patients' adjustment to dialysis and to consult with the multidisciplinary treatment team. Issues in this population include compliance to medical recommendations, needle phobias, anxiety reactions, death and dying, coping with chronic illness, quality of life, family issues, and affective disorders.
 - Supervisor: Deanna Mori, Ph.D.

- **Transplant Program:** Interns have the opportunity to evaluate patients who are being considered for organ transplantation. The purpose of these evaluations is to determine the candidates' psychological readiness for transplantation, and the evaluation consists of a chart review, psychometric testing, and a structured interview. The types of transplantation that patients may be considered for include: kidney, liver, heart, lung, and bone marrow. Living donors are also evaluated in this program.
 - Supervisor: Deanna Mori, Ph.D.

- **Psychology Pain Management Clinic:** This program provides Veterans who experience chronic pain with group and individual cognitive behavioral therapy for pain. Interns will be actively involved in conducting comprehensive pain assessments in an interdisciplinary pain clinic setting and providing short-term, individually-based cognitive-behavioral treatments for chronic pain management.
 - Supervisor: Diana Higgins, Ph.D.

- **Smoking Cessation Program:** Interns in this clinic gain experience working as part of a multidisciplinary team, co-leading smoking cessation groups with other psychology staff and with pharmacy staff. The clinic offers support, motivational interviewing, and cognitive-behavioral strategies for people at all stages of quitting. Interns learn a wide range of empirically supported intervention techniques for helping people quit smoking, overcome ambivalence about quitting, and maintain their quit status
 - Supervisor: Sarah Bankoff Leone, Ph.D.

- **Cognitive-Behavioral Pain Management Group:** Using a standardized, manual-based format, interns conduct a ten-week skills focused group for patients with chronic pain that has not been alleviated by medical or surgical means. Interns learn the skills of group facilitation in a cognitive-behavioral context, a greater appreciation of the psychological aspects of chronic pain, and proficiency in the provision of several pain management techniques.
 - Supervisor: Stephen R. Lancey, Ph.D.

- **MOVE! Weight Management Program:** The MOVE! Weight Management Program offers a 16-week group co-led by Behavioral Medicine and Nutrition providers. Group members receive education on healthy eating and lifestyle change and learn strategies that support weight loss and healthy living more generally. Groups are open to overweight and obese veterans. Interns in this program will gain experience working in an interdisciplinary setting and conducting cognitive-behavioral interventions to facilitate weight loss and health promotion.
 - Supervisor: Sarah Bankoff Leone, Ph.D.

- **Sexual Health Clinic:** The Sexual Health Clinic is an outpatient sexual dysfunction assessment and treatment program for male and female veterans. The clinic provides comprehensive differential diagnostic workups and problem-focused sex therapy for veterans and their significant others. Interns have the opportunity to learn and develop expertise in the following areas: differential diagnostic interviewing, assessment and treatment of sexual dysfunction, and understanding the role of psychological factors in sexual dysfunctions of various etiologies.
 - Supervisor: Amy K. Silberbogen, Ph.D.

- **Behavioral Sleep Medicine Program:** This program provides services for individuals who are struggling with insomnia and other sleep difficulties. Different treatment options are available, including a bi-weekly educational group that provides information about the causes of insomnia, good sleep habits, and how behavior, cognitions, and emotions affect sleep. More intensive treatment is available for patients who can benefit from more individualized care. Interns will learn how to conduct a focused sleep assessment interview, facilitate a sleep education group, and provide cognitive behavioral therapy for insomnia (CBT-I) through their work in this program.
 - Supervisor: Deanna Mori, Ph.D.

- **Cardiac Rehabilitation Program:** The Cardiac Rehabilitation Program provides services to patients who need physical, psychological, social, and nutritional rehabilitation due to disabilities resulting from MI, angina, coronary artery bypass graft, or congestive heart failure. The goal of this interdisciplinary program is to improve the patients' daily functioning through exercise, educational and behavioral interventions. Interns participate in two different cardiac rehabilitation groups. One is a structured, five week psychoeducational group that is conducted as part of an intensive interdisciplinary outpatient rehabilitation program. The other group is an ongoing support group where extensive patient education is offered through a multidisciplinary lecture series. This is a truly unique group in that it has been offered continuously for over 30 years. Through both group programs, interns apply cognitive behavioral intervention techniques to implement change and enhance lifestyle habits that include promoting physical activity, following a healthy diet, effectively managing stress, and reducing unhealthy behaviors.
 - Supervisors: Stephen R. Lancey, Ph.D. and Deanna Mori, Ph.D.

- **Transgender Program:** Interns have the opportunity to conduct pre-treatment evaluations for transgender veterans who are seeking cross-sex hormone treatment or gender reassignment surgery. Responsibilities include: conducting standardized interviews to assess eligibility and readiness for treatment, preparing detailed reports, providing behavioral recommendations for enhancing readiness for treatment. There are also opportunities to attend interdisciplinary transgender team meetings.
 - Supervisor: Deanna Mori, Ph.D.

- **Healthy Lifestyle Groups:** The Behavioral Medicine Program conducts three different groups that are designed to promote healthy lifestyles. These groups focus on adaptive coping and are particularly important for individuals with major medical issues. The following groups are conducted regularly:
 - **Stress Management Group:** A twelve-week group for individuals interested in stress management skills. Patients learn cognitive-behavioral stress management and relaxation techniques.
 - **Healthy Thinking Group:** A ten-week group for medical patients who also have symptoms of depression. Patients learn cognitive-behavioral strategies to address their negative thoughts and learn ways to cope more effectively with their medical illness.
 - **Medical Issues Group:** An ongoing group for individuals who are coping with the stress of having major medical issues. This is an educational/ support group that focuses on helping people find adaptive ways to cope with

their medical condition and treatments. A sampling of topics includes, “Learning to Communicate Effectively with Your Health Care Professional,” “Coping with Difficult Medical Treatments,” and “Dealing with Loss.”

~ Instruction ~

Behavioral Medicine has a weekly team meeting where didactics are presented, clinical case presentations are made, and research and other current issues in behavioral medicine are discussed. In addition, there is a Behavioral Medicine Seminar Series that is offered to all interns throughout the consortium as a part of the weekly didactic series for interns. Topic areas that have been presented on in the past include: weight related disorders, pain disorders, sexual disorders, death and dying, CBT for insomnia, telehealth interventions, cardiac rehabilitation, AIDS, smoking cessation, etc.

~ Supervision ~

A staff psychologist serves as the primary advisor and training supervisor, with other supervisors being drawn from among staff psychologists and consultants to the program. As a result, interns are offered the opportunity to work closely with professionals in their particular areas of expertise. Interns receive both individual and group supervision in which clinical, career development and research issues are addressed.

~ Research ~

Several of the programs in Behavioral Medicine are part of a clinical research protocol, and all interns will have exposure to working in programs that follow a scientist/practitioner model. Currently and recently funded projects include: Tai Chi Mind-Body Exercise for Posttraumatic Stress Disorder in Military Populations, Telehealth Intervention to Promote Exercise for Diabetes, Promoting Physical Activity in Overweight and Obese Veterans, Improving Diabetic Treatment Adherence: A Telehealth Intervention, and Treatment of Posttraumatic Headache. In addition, there are several other ongoing research projects in various stages of development. Interns who are interested have the opportunity to work collaboratively with staff from these projects. There is also a biweekly research meeting in which various topics are covered, and trainees and staff present on ongoing research projects.

Selected recent publications from our staff:

Driscoll M.A., Higgins, D.M., Seng, E.K., Goulet, J.L., Heapy, A.A., Kerns, R.D., Brandt, C.A., Haskell, S.G. (In Press). Trauma, Social Support, Family Conflict and Chronic Pain in Recent Service Veterans: Does Gender Matter? Pain Medicine.

Goulet, J.L., Kerns, R.D., Bair, M., Becker, W.C., Brennan, P., Burgess, D., Carroll, C.M., Dobscha, S., Driscoll, M.A., Fenton, B.T., Fraenkel, L., Haskell, S.G., Heapy, A.A., Higgins, D.M., Hoff, R.A., Hwang, U., Justice, A.C., Piette, J.D., Sinnott, P.L., Wandner, L., Womack, J.A., Brandt, C.A. (In Press). The musculoskeletal diagnosis cohort: Examining pain and pain care among veterans, *Pain*.

Masheb, R.M., Lutes, L.D., Kim, H.M., Holleman, R.G., Goodrich, D.E., Janney, C.A., Kirsh, S., Higgins, D.M., Richardson, C.R., Damschroder, L.A. (In Press). Weight loss outcomes in patients with pain, *Obesity*.

Bankoff, S. M., Marks, A. K., Swenson, L. P., & Pantalone, D. W. (2016). Examining associations of sexual attraction and attitudes on women's disordered eating behavior. *Journal of Clinical Psychology, 72*(4), 350-364).

Heapy, A.A., Higgins, D.M., LaChappelle, K., Kirlin, J., Goulet, J.L., Czlapinski, R., Buta, E., Krein, S., Piette, J.D., Kerns, R.D.. (2016). Cooperative pain education and self-management (COPES): Study design and protocol of a randomized non-inferiority trial of an interactive voice response-based self-management intervention for chronic low back pain; *BMC Musculoskelet Disord, 16*;17(1):85,doi: 10.1186/s12891-016-0924-z.

Higgins, D.M., Buta, E., Dorflinger, L., Masheb, R.M., Ruser, C.B., Goulet, J.L., Heapy, A.A. (2016). Prevalence and correlates of painful conditions and multi-morbidity in a national sample of overweight/obese veterans; *JRRD*;53(1):71-82.

AhnAllen, C.* & Mori, D. (2015). Improving patient education: Effective ways to develop and deliver information about health-related behaviors. *MedEdPORTAL Publications*. Retrieved from: <https://www.mededportal.org/publication/10106>

Heapy, A.A., Higgins, D.M., Cervone, D., Wandner, L., Kerns, R.D. (2015). A systematic review of technology-assisted self-management interventions for chronic pain; *Clinical Journal of Pain, 31*(6):470-92.

Johnson, E.* , Niles, B.L., & Mori, D.L. (2015). Targeted Recruitment of Adults with Type 2 Diabetes for a Physical Activity Intervention. *Diabetes Spectrum, 28*(2), 99-105. <http://dx.doi.org/10.2337/diaspect.28.2.99>

Bankoff, S. M., & Pantalone, D. W. (2014). Patterns of disordered eating behavior among women across sexual orientations: A review of the literature. *Eating Disorders, 22*(3), 261-274.

- Collins A.E.* , Niles, B. L., Mori, D.L., & Silberbogen, A.K. (2014). A Telephone-Based Intervention to Promote Diabetes Management in Veterans with Post Traumatic Stress Syndrome. *Professional Psychology: Research and Practice*.
- Higgins, D.M., Kerns, R.D., Brandt, C.A., Haskell, S.G., Bathulapalli, H., Gilliam, W., Goulet, J.L. (2014). Persistent pain and comorbidity among Operation Enduring Freedom/Operation Iraqi Freedom / Operation New Dawn veterans, *Pain Medicine*, 15(5):782-90.
- Niles, B.L., Mori, D.L., Seligowski, A.V., & Schnurr, P.P. (2014). Health consequences of military service and combat. In S. J. Cozza, M. N. Goldenberg & R. J. Ursano Eds.), *Care of military service members, veterans, and their families*. American Psychiatric Publishing: Arlington, VA.
- Pantalone, D. W., Pachankis, J. E., Rood, B. A., & Bankoff, S. M. (2014). The health and wellness of sexual and gender minorities. In R. A. R. Gurung (Ed.), *Multicultural Approaches to Health and Wellness in America*. New York, NY: Praeger.
- Silberbogen, A. K., Busby, A., & Ulloa, E.* (2014). Impact of Psychological Distress on Prostate Cancer Screening in U.S. Military Veterans. *American Journal of Men's Health*, 8, 399-408.
- Bankoff, S. M., McCullough, M. B., & Pantalone, D. W. (2013). Patient-provider relationship predicts mental and physical health indicators for HIV-positive men who have sex with men. *Journal of Health Psychology*, 18(6), 762-772.
- Bankoff, S. M., Valentine, S. E., Jackson, M. A., Schacht, R. L., & Pantalone, D. W. (2013). Compensatory weight control behavior of women in emerging adulthood: Associations between childhood abuse experiences and adult relationship avoidance. *Journal of American College Health*, 61(8), 468-475.
- Danilack, V.A., Weston, N.A., Richardson, C.R., Mori, D. L., & Moy, M. L. (2013). Reasons persons with COPD do not walk and relationship with daily step count. *Journal of Chronic Obstructive Pulmonary Disease*. Advance online publication. doi: 10.3109/15412555.2013.841670
- Niles, B. L., Vujanovic, A. A., Silberbogen, A. K., Seligowski, A. V., & Potter, C. M. (2013). Changes in mindfulness following a mindfulness telehealth intervention. *Mindfulness*, 4, 301-310. doi:10.1007/s12671-012-0130-5.