

SUBSTANCE ABUSE TREATMENT PROGRAM

Rotation Coordinator: GLENN TREZZA, PH.D.
Psychology Service (116B)
VA Boston Healthcare System
150 South Huntington Avenue
Boston, MA 02130

Telephone: (857) 364-4690
Email: glenn.trezza@va.gov

Training Location:
Jamaica Plain Campus

Number of Interns: 1

~ OVERVIEW ~

The Substance Abuse Treatment Program (SATP) on the Jamaica Plain campus of the VA Boston Healthcare System offers a combination of experiences in both residential and outpatient treatment settings for veterans with substance use disorders and a wide range of co-occurring psychiatric conditions including posttraumatic stress disorder (PTSD), mood and anxiety disorders, and personality disorders. The primary goal of this rotation is to provide interns with a comprehensive training experience in evidence-based approaches to assessment and treatment for veterans with substance use disorders and common co-morbid conditions. Offering ongoing care across a spectrum of treatment settings is a key component of our mission in the SATP and in our training of interns.

Who Do We Serve? The Jamaica Plain campus of the VA Boston Healthcare system is located in an urban setting, and serves a very diverse patient population. The veterans in our programs have a range of substance use problems (including but not limited to cocaine, opiates, alcohol, and designer drugs), other behavioral problems (such as tobacco use disorders and gambling), co-occurring psychiatric conditions (such as PTSD or depression), and significant social problems such as homelessness and unemployment. They range in age from early 20s to 80s. They present with an intersection of diversity characteristics in terms of veteran status, cultural background, sexual orientation, gender identity, religious/spiritual backgrounds, and socio-economic status. Their histories often include childhood as well as military traumas associated with substance use.

Who Are We? The SATP employs diverse staff (in terms of age, sexual orientation, and cultural background). The staff includes a multidisciplinary team from psychology, psychiatry, social work, and nursing. The intern is part of the treatment team in both the residential and outpatient programs while on the rotation.

~ LEARNING OBJECTIVES !

The learning objectives of the Substance Abuse Treatment Program:

1. Learn how to assess substance use and co-occurring conditions and develop a comprehensive treatment plan to address multiple concerns.
 2. Learn how to assess veterans at various stages of readiness to change and in treatment, and make decisions about appropriate levels of care.
 3. Learn how to conduct evidence-based group therapy for substance use disorders.
 4. Learn how to conduct evidence-based individual psychotherapy for veterans with common co-occurring problems including PTSD, anxiety, mood disorders, personality disorders, or grief.
 5. Learn how to work as part of a multidisciplinary team.
 6. Learn how to include diversity issues in developing treatment plans for veterans.
 7. Learn how to conduct research and program evaluation that reflects the current issues confronting veterans with substance use disorders.
 8. Learn to supervise clinical trainees by providing individual case consultation to psychology practicum students under the direction of a licensed psychologist.
- **Length of Rotation:** The opportunities described above are available for interns working in the 8-month (Match) or four-month SATP rotation. Eight-month interns will be exposed to a wider array of individual cases, many of which are appropriate for long-term intervention on an outpatient basis, and will have more opportunities for program development. \

Our rotation is ideal for interns who want to develop a career in the addiction field that may include clinical program management, program evaluation/research, and/or clinical supervision of trainees. Many of our former trainees have gone on to careers in the VA and tenure-track academic positions.

~ CLINICAL EXPERIENCE ~

Our training program at JP campus's SATP offers immersion in two (largely overlapping) treatment teams (residential and outpatient) that function within an academically-oriented training environment.

- **Residential Treatment:** The Substance Abuse Residential Rehabilitation Treatment Program (SARRTP) offers six weeks of treatment for up to 20 male veterans at a time. Working in the residential program, interns have the opportunity to strengthen their skills in assessment, group and individual therapy, and consultation.
 - **Group Therapy:** Interns on this rotation may conduct up to five therapy groups per week in the residential setting, serving as a co-leader either with other staff or postdoctoral fellows. Relapse Prevention, which serves as the cornerstone of SARRTP treatment, meets three times per week. Other groups that have been run by the SATP intern are Seeking Safety group and Dialectical Behavior Therapy skills. Interns have an opportunity to develop new group materials if they have a special interest and incorporate this into the programming.
 - **Individual Therapy:** The intern conducts individual therapy with veterans who may be treated in the SARRTP or through the outpatient clinics. Individual therapy may focus on the treatment of co-occurring conditions such as PTSD, depression, or personality features. Other areas of concern may include grief, sexual orientation or gender identity questions, sexual problems, medical concerns, relationship problems, or managing life stressors. Empirically-Based Psychotherapies that are delivered in individual psychotherapy by the intern often include Motivational Interviewing, Motivational Enhancement Therapy, Cognitive Processing Therapy, Dialectical Behavior Therapy, Acceptance and Commitment Therapy, and Interpersonal Therapy.
 - **Consultation:** The intern is an integral member of the SARRTP consultation team, which manages referrals to the program. This training component offers the opportunity to interact with inpatient psychiatry, medicine, or other substance abuse treatment programs at VA Boston as well as the legal system. Interns complete comprehensive screening assessments for admission to the program, and provide treatment recommendations based on these assessments, feedback to veterans and referring clinicians, and to the SARRTP team.
- **Staff Meetings:** The intern is considered an integral part of the residential team and attends the SARRTP staff meeting, treatment planning meetings with veterans and other team members, and the Consultation and Admissions Team meeting. Interns have opportunities to present their work with veterans on a regular basis at the team meetings.

- **Outpatient Treatment:** The outpatient Alcohol and Drug Treatment Program (ADTP) provides individual and group therapy for female and male veterans who are motivated to work on making changes in their substance use. The intern spends approximately 20% of their time working in the ADTP.
 - **Intakes, Assessments, and Staff Meetings:** The intern will have the opportunity to conduct diagnostic testing and comprehensive biopsychosocial assessments with veterans in outpatient care. Interns also attend a weekly outpatient staff meeting, in which they present their cases and participate in case consultation. Interns also have an opportunity to complete several psychological assessment batteries while on the rotation, often to clarify co-morbid diagnoses. Interns receive training in risk assessment and mental status evaluations. They also learn to evaluate signs and symptoms of substance use intoxication, withdrawal, and overdose.
 - **Individual Therapy:** Interns will follow 4-5 individual therapy cases at any one time during the rotation (a combination of outpatient and residential cases). Cases may include Veterans who are in various stages of motivation to change, and with a variety of co-morbidities. In the ADTP setting, interns have the opportunity to learn both moderation and abstinence-based models of treatment.

~ INSTRUCTION ~

Interns attend monthly didactic seminars with the staff and the program's other trainees. Topics of the seminars vary from year to year, and have included presentations about empirically supported treatments for PTSD in veterans with substance use issues; medications used to treat craving and psychiatric conditions in substance use patients; lethality assessment and suicide prevention; diversity among substance-using veterans; neuropsychological correlates of substance use; designer drugs, DBT for substance use; hoarding; and managing medical issues in the context of substance use.

Interns may also engage in supervised reading of book chapters, journal articles, and other monographs to add to their knowledge base and conceptual abilities in working with our patient population. These readings may be recommended in individual supervision or when attending the optional monthly Addictions Journal Club. Interns also have the opportunity to develop their own teaching skills, by presenting alone and/or co-presenting with staff and with other senior trainees in SATP Didactics and/or in Internship Didactics.

~ SUPERVISION ~

Supervision for both group therapy and individual therapy is provided by licensed staff psychologists (please see “Supervision Team” section below for more information regarding rotation supervisors). In addition, interns receive supervision / oversight from co-leaders, and in Consultation/Admission team meetings, staff meetings, and treatment team meetings

- **“Supervision of Supervision”:** A unique opportunity offered by this rotation is its “supervision of supervision” component. Interns will provide clinical case consultation /”supervision” to a practicum level psychology trainee on up to four individual therapy cases, under the supervision of a licensed psychologist. On a weekly basis, the intern meets with a licensed psychologist to receive supervision about their work as “supervisors” to the practicum students.

- **The Supervision Team:** Interns receive at least four hours of individual and group supervision per week. Current supervisors in the JP SATP include:
 - Monica Roy, Ph.D. - Program Manager of SAR RTP and ADTP
 - Marika B. Solhan, Ph.D. - Program Manager of the Women's Transitional Residence Program
 - Glenn R. Trezza, Ph.D. - Consultation and Admissions Coordinator - SAR RTP
 - Maureen C. "Molly" Below, Ph.D. - Staff Psychologist - ADTP
 - Deborah J. Brief, Ph.D. - Director of Residential and Rehabilitation Services at VA Boston

Drs. Trezza, Roy, Solhan, and Below are all internship alumnae of VA Boston, and Drs. Roy, Solhan, and Below are also graduates of the program's Substance Abuse Fellowship Program.

~ RESEARCH ~

All of the psychologists affiliated with this rotation have strong research backgrounds and an ongoing interest and involvement in empirical research focused on individuals with substance use disorders. Interns are encouraged to integrate current research literature and knowledge into their clinical work, while also continuing to contribute to the empirical study of substance use and related clinical issues and treatments. While on the rotation, interns have an opportunity to assist with grant submissions, research a topic of interest, write a review article for publication, and/or complete program evaluation and performance improvement research in the SATP. Interns who have remained at our site for postdoctoral fellowship have been able to develop longer-term data projects that require more than four to eight months to complete.

Rotation supervisors have research interests in the following areas: treatments for substance use disorders and co-occurring PTSD and substance use disorders; application of unique technologies to deliver evidence-based treatment to veterans; facilitation of entry into treatment after detoxification; personality variables including impulsivity, as they relate to substance use disorders and PTSD; issues of diversity and inclusion; cohort-specific issues in substance using veteran populations; and risk reduction for individuals living with HIV.

- **Examples of Current Research Opportunities:** Interns on the rotation have the opportunity to get involved in a number of scholarly and research opportunities. Drs. Roy, Brief and Solhan are part of an ongoing research team that has developed a web-based intervention and mobile application for Veterans with problem drinking and PTSD symptoms. Research related to this has included data analysis from a randomized trial as well as working on developing new versions of the intervention and a mobile application. Dr. Solhan, who works with our women veterans in our TRUST House program for women with PTSD and substance use concerns, and who has extensive training in Dialectical Behavior Therapy, has existing outcome data related to effective management of borderline and PTSD symptoms in the context of ongoing sobriety in women. Dr. Solhan also contributes to research through the National Center for PTSD related to impulsivity in veterans with PTSD. Dr. Brief and Dr. Below are involved with a multi-site randomized controlled trial examining an intervention designed to boost treatment follow-through after detoxification.
- **Program Development and Evaluation:** Interns on the rotation have the opportunity to be involved in the development of materials for our psychoeducational groups, to contribute to the creation of new treatment groups and evaluate their impact, and get involved in ongoing evaluation activities of our treatment programming.

Selected recent publications from our staff:

Brief, D.J., Rubin, A., Keane, T.M., Enggasser, J.L., Roy, M., Helmuth, E., Hermos, J., Lachowicz, M., Rybin, D., & Rosenbloom, D. (2013). Web Intervention for OEF/OIF Veterans with Problem Drinking and PTSD Symptoms: A Randomized Clinical Trial. *Journal of Consulting and Clinical Psychology*, 81, 890-900.

Timko, C., Below, M.C., Schultz, N. R., Brief, D., & Cucciare, M. A. (2015). Patient and Program Factors that Bridge the Detoxification-Treatment Gap: A Structured Evidence Review. *Journal of Substance Abuse Treatment*, 52, 31-39.

- Moltisanti, Allison J., Below, Maureen C., Brandon, Karen O., & Goldman, Mark S. (2013). The Effects of Alcohol Expectancy Priming on Group Formation. *Experimental and Clinical Psychopharmacology*, 21(6), 450-456.
- Delaney, E.M., Walton, H.M., Trezza, G. R., Henley, K.M., Vielhauer, M. J., Morgan, E., Meyer, P., & Keane, T. M. (2012). Community advisory boards in HIV Research: Current scientific status and future directions. *Journal of Acquired Immune Deficiency Syndromes*, 59, 78-81.
- Skidmore, W.C. & Roy. M. (2011). Practical considerations for addressing substance use disorders in Veterans and Service Members. *Social Work in Healthcare*, 50, 85-107.
- Roy, M., & Skidmore, W. C. (2012). Assessment and treatment of substance use disorders and related problems in veterans and service members. In J. Beder (Ed.), *Advances in Social Work Practice with the Military*; 215-236. New York: Routledge.
- Roy, M. (2012). Healthcare for Women Military Veterans. In T.W. Miller (Ed.), *The Praeger Handbook of Veterans' Health*; 313-342; Santa Barbara, CA: ABC-CLIO, LLC.
- Jahng, S., Solhan, M. B., Tomko, R. L., Wood, P. K., Piasecki, T. M., & Trull, T. J. (2011). Affect and alcohol use: An ecological momentary assessment study of outpatients with borderline personality disorder. *Journal of Abnormal Psychology*, 120, 572-584.
- Brief, D., Rubin, A., Enggasser, J., Roy, M. & Keane, T. (2011). Web-based intervention for returning veterans with symptoms of posttraumatic stress disorder and risky alcohol use. *Journal of Contemporary Psychotherapy*, 41, 237-246.