Doctoral Internship Training in Health Service Psychology
Children's Healthcare of Atlanta at Emory University Department of Pediatrics
Program Brochure 2024-2025
(Revised July 2023)

APA-ACCREDITED*

*Questions regarding the program's accreditation status should be directed to:

The Commission on Accreditation
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OVERVIEW

Children's Healthcare of Atlanta is Georgia's leading pediatric healthcare provider with three hospitals and multiple neighborhood locations. For more than 100 years, our purpose has been the same: making kids better today and healthier tomorrow.

Children's Healthcare of Atlanta offers you the chance to build a stellar career with unmatched opportunities for collaboration among some of the best clinical and academic centers in the nation. We work with the following neighboring institutions to develop cutting-edge treatments and technologies to answer the most perplexing childhood medical questions:

- **Centers for Disease Control and Prevention (CDC)**
- **Emory University School of Medicine**
- **Georgia Institute of Technology**
- **Morehouse School of Medicine**

Children's Healthcare of Atlanta Doctoral Internship in Health Service Psychology at Emory University School of Medicine, Department of Pediatrics offers a tailored curriculum providing didactic and clinical training designed to meet the skill level and learning objectives of each intern. The internship offers the opportunity to match in one of six tracks to provide interns to gain a significant level of clinical expertise in a particular area. Although the tracks emphasize distinct areas of practice, all tracks endeavor to (A) train providers with the core skills required to provide clinical assessment and treatment services, to children and families, (B) create a learning environment where people effect treatment, research, and teaching characterized by respect, openness, and compassion toward others, and (C) foster skills, values, and awareness that promote the application of research science to innovate clinical practice within a pediatric medical clinic.

Guiding Principles

The Children's Healthcare of Atlanta Doctoral Internship in Health Service Psychology at Emory University School of Medicine, Department of Pediatrics aims to transform the field pediatric psychology and developmental disabilities through state-of-the-art, evidenced based assessment, intervention, training and research. In doing so, we are:

- Oriented to children
- propelled by our people
- driven by science in every domain
- inspired by innovation and creativity
- connected by dialogue
- guided by compassion for our stakeholders and each other
- empowered by responsibility with our resources.

Diversity as a Core Component

We believe that for our training program to be excellent, we must be attentive to individual and cultural diversity, and to this end, we value, appreciate, encourage and support a working culture that includes diversity. We value competence and commitment to show cultural sensitivity when interacting with peers, colleagues, supervisors, supervisees, and patients, and we strive to incorporate multicultural considerations in all of our scholarly, clinical, and training endeavors. The internship follows the policies of Emory University, the laws of the state of Georgia and the United States, and strives to meet the standards for diversity set by APA.

Program Aims

The overarching aim of our internship is to prepare students to function as psychologists in a variety of settings, including as members of interdisciplinary teams providing health related services to children and their families. Interns completing our internship are well qualified to enter clinical, medical, or academic settings. Together, distinct training tracks maintain the following aims for all interns:

- To train providers with the core skills required to provide clinical services, while prioritizing the needs and interests of children and families.
- To create a learning environment where people affect treatment, research, and teaching while engaged in dialogue that is characterized by respect, openness and compassion.
- To foster skills, values and awareness that promote the use of science in making contributions to the field through scholarly and teaching pursuits that are innovative, excellent and take into account responsible use of resources.

Training Philosophy

The Doctoral Internship provides training within a scientist practitioner model centered on the idea that principles and procedures of science for studying biological, psychological and social elements of the person form the basis not only for effective research, but also for ethical clinical services. Accordingly, the Internship utilizes data-based diagnostic and treatment procedures that are consistent with basic principles of learning and developmental psychopathology as embodied in the research literature, emphasizing special expertise in cognitive behavioral therapy, applied behavior analysis, child development, developmental disabilities, and/or diagnostic assessment.

TRAINING AIMS

As one of the key programs that support the teaching mission of Children's Healthcare of Atlanta, the Internship holds a general aim of training future providers who will continue to live out the Guiding Principles listed above, which shape all activities at the Center. In this context, the Internship pursues the following three general aims, which align the values of the Children's with competencies that are fundamental to practice in the area of health services psychology.

A. **To train providers with the core skills required to provide clinical services, while prioritizing the needs and interests of children and families.** The following goals and competencies are aligned with this aim:

1. INDIVIDUAL AND CULTURAL DIVERSITY: Interns will demonstrate an intermediate to advanced level of professional psychology skills, abilities, proficiencies, and knowledge related to individual and cultural diversity (ICD) as they pertain to all areas of professional practice.

Objective 1(A) Interns will demonstrate through discussion and/or action, an awareness of elements of diversity in their own lives and how these elements may affect their professional thinking and behavior.

Objective 1(B) Interns will show an understanding of the implications of ICD for professional activities in assessment, treatment, research, consultation, and training/supervision, including detecting areas of knowledge about ICD which warrant additional study, training and/or consultation.

Objective 1(C) Interns will consistently show sensitivity and adaptability in responding to ICD and to apply them to core areas of practice.

2. ASSESSMENT: Interns will demonstrate an intermediate to advanced level of professional psychology skills, abilities, proficiencies, and knowledge required competently to conduct psychological assessment.

Objective 2(A) Interns will be able to select appropriate standardized and/or clinical measures to use in addressing the referral question and be able to administer and score these tools with fidelity.

Objective 2(B) Interns will independently conduct effective initial clinical interviews

Objective 2(C) Interns will be able to describe assessment instruments/methods (including strengths and limitations) and how they may be used.

Objective 2(D) Interns will demonstrate awareness of issues of human development and diversity in using assessment or diagnostic information for case conceptualization and treatment planning.

Objective 2(E) Interns will demonstrate proficiency in writing assessment reports that integrate findings in a way that is accurate and is clear to professionals and consumers.

Objective 2(F) Interns will demonstrate proficiency in providing the results of the assessment in oral feedback to caregivers in a way that is accurate and is clear.

3. INTERVENTION: Interns will demonstrate an intermediate to advanced level of professional psychology skills, abilities, proficiencies, and knowledge required to implement effective interventions (including empirically supported treatments).

Objective 3(A) Interns will independently develop case conceptualizations and treatment planning that includes consideration of developmental, individual and cultural differences.

Objective 3(B) Interns will independently create treatment goals, select appropriate treatment options, and incorporate ongoing assessment results into treatment planning as needed.

Objective 3(C) Interns will demonstrate advanced clinical skills and the ability to flexibly utilize them, even in difficult clinical situations.

Objective 3(D) Interns will demonstrate proficiency in understanding standard treatment protocols and in independently administering them with high fidelity.

Objective 3(E) Interns will demonstrate the ability to generalize skills (e.g., teaching, assessment, behavior management) across clients, settings, and scenarios when appropriate.

Objective 3(F) Interns will demonstrate the ability to apply scientific methodology to evaluate treatment progress.

4. CONSULTATION and INTERPROFESSIONAL/INTERDISCIPLINARY SKILLS: Interns will demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, competencies, and/or knowledge related to consultation and interprofessional/interdisciplinary skills.

Objective 4(A) Interns will demonstrate an understanding of the fundamental skills and roles involved in consultation.

Objective 4(B) Interns will be able to select appropriate and contextually sensitive assessment/data gathering that answer consultation question.

Objective 4(C) Interns will propose an appropriate plan of action in response to a consultative referral question.

Objective 4(D) Interns will demonstrate proficiency in identifying, analyzing and responding to key ethical issues unique to consultative relationships.

Objective 4(E) Interns will be able to describe how other professions can make positive contributions to clinical care of shared patients, including demonstrating awareness of multiple and differing worldviews, roles, professional standards, and contributions across contexts and systems (e.g., theoretical differences, training experiences, purpose of practice).

Objective 4(F) Interns will participate and initiate interdisciplinary collaboration/consultation directed toward shared goals.

B. To create a learning environment where people effect treatment, research, and teaching while engaged in dialogue that is characterized by respect, openness and compassion. The following goals and competencies are aligned with this aim:

5. PROFESSIONALISM: Interns will demonstrate an intermediate to advanced level of skills, abilities, proficiencies, and knowledge necessary to be competent with regard to professionalism in values, attitudes and behaviors.

Objective 5(A) Interns will monitor and resolve situations that require integrity, honesty, personal responsibility, and accountability.

Objective 5(B) Interns will demonstrate professional deportment: self-presentation, dress, behavior, communication in professional situations.

Objective 5(C) Interns will demonstrate the ability to understand the concern for the welfare of others which is at the core the profession of psychology, to assimilate this concern with the core values of the workplace, and to translate it in their work as health service providers.

Objective 5(D) Interns will demonstrate self-awareness and self-direction, related to professional behaviors, and to seek related supervision as appropriate.

Objective 5(E) Interns will be able to articulate a coherent professional identity that is consistent with the broader profession of psychology and takes into account pertinent current events in the field.

Objective 5(F) Interns will demonstrate awareness of their own bounds of competence and actively seek guidance, coaching, and/or feedback from their supervisor.

Objective 5(G) Interns will be prepared for supervision and demonstrate reflection on their own practices within supervision.

Objective 5(H) Interns will self-monitor issues related to self-care and promptly intervene when disruptions occur.

6. COMMUNICATION & INTERPERSONAL SKILLS: Interns will demonstrate an intermediate to advanced level of skills, abilities, proficiencies, and knowledge necessary to demonstrate competent communication and interpersonal skills.

Objective 6(A) Interns will demonstrate the ability to establish and maintain good rapport with clients, patients, supervisors, trainees, and other stakeholders.

Objective 6(B) Interns will be able to demonstrate clarity, accuracy, professional vocabulary and usage, and parsimony in oral and written communications.

Objective 6(C) Interns will demonstrate self-awareness and self-modification related to non-verbal communications, including appropriate management of their own affect.

Objective 6(D) Interns will demonstrate strategies to recognize, articulate, and resolve interpersonal differences or conflicts.

7. ETHICAL AND LEGAL STANDARDS: Interns will demonstrate an intermediate to advanced level of professional psychology skills, abilities, proficiencies, competencies, and knowledge related to ethical and legal standards.

Objective 7(A) Interns will demonstrate the ability to describe and apply general ethical principles, and to recognize possible breaches of the APA code of conduct.
Objective 7(B) Interns will be able to articulate and discuss the potentially competing interests among the general ethical principles, and to delineate a model by which ethical decisions may be achieved.
Objective 7(C) Interns will be able to describe hypothetical inconsistencies between ethical principles and guidelines versus laws or administrative policies that also guide professional behavior; as well as delineate possible processes by which ethical decisions and actions may be achieved in this context.
Objective 7(D) Interns will demonstrate proficiency in identifying, analyzing, and responding to key ethical issues related to professional practice: research, individual and cultural differences, clinical care (assessment, intervention, consultation), and supervision.

C. **To foster skills, values and awareness that promote the use of science in making contributions to the field through scholarly and teaching pursuits that are innovative, excellent and take into account responsible use of resources.** The following goals and competencies are aligned with this aim:

8. RESEARCH & SCHOLARLY ACTIVITIES: Interns will demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, and knowledge necessary to generate and translate research.
Objective 8(A) Interns will demonstrate advanced knowledge of scientific foundations of psychology, including core science (i.e., biological, environmental, cognitive, and affective), human development, and empirically-supported assessment and intervention for individuals with developmental disabilities.
Objective 8(B) Interns will demonstrate an advanced understanding of and appreciation for research methodology, data collection and analysis.
Objective 8(C) Interns will independently consume and discuss scientific literature in applying these findings to their own clinical practice and/or research.
Objective 8(D) Interns will demonstrate independence in scholarly endeavors. Examples may include: independently develops research questions/studies, queries existing data bases, or presents professional advances in publication or at conferences.
Objective 8(E) Interns will demonstrate the ability to understand and communicate scholarly findings to others (e.g., supervisors, supervisees, other researchers/practitioners, caregivers).

9. SUPERVISION: Interns will demonstrate an intermediate to advanced level of professional psychological skills, abilities, proficiencies, and/or knowledge required to provide competent supervision.
Objective 9(A) Interns will be able to describe the ethical, legal, and contextual responsibilities and priorities in relationships between supervisors and supervisees.

Objective 9(B) Interns will be fluent in describing the primary model(s) that guide their provision of supervision.
Objective 9(C) Interns will demonstrate awareness of the impact of personal perceptions and styles on their relationships with supervisees and of those of supervisees' on their relationship with clients.
Objective 9(D) Interns will demonstrate proficiency in assessing, guiding and correcting the work of individuals under their supervision, including appropriate responses to potentially problematic supervision situations.

CURRICULUM AND TRACKS

The Internship's philosophy of education holds that one best learns by studying and doing. Based on each intern's level of professional development, training proceeds in a progressive manner. Interns initially observe clinical cases with comment from the licensed psychologist supervisor, read select articles/chapters, and receive other forms of instruction to familiarize the intern with the particular issues involved with patients/families. The interns rapidly proceed to conducting sessions independently with frequent supervision and feedback, and they then progresses to become more independent while increasing the number and types of cases with more complexity. Through the year, interns obtain over 500 hours of patient contact—more than the national standard. Licensed psychologist supervisors arrange multiple opportunities for interns to acquire skills by providing clinical services and conducting research. There are also opportunities for clinical education by professionals from other disciplines, including occupational therapists, physicians, and nurse practitioners (developmental-behavioral pediatrics, psychiatry), professional counselors, social workers, and speech pathologists. Learning is further supported by a didactic curriculum that was developed by Internship faculty to address core competence areas of professional psychology in health service settings and to provide advanced knowledge about pediatric conditions.

PRIMARY METHOD OF INSTRUCTION: SUPERVISED CLINICAL EXPERIENCES

The overarching goal of our internship program is to prepare students to function as psychologists in a variety of settings, including as members of interdisciplinary teams providing health related services to children and their families. Training occurs through supervised experiences in outpatient and day treatment programs. Interns completing our internship are well qualified to enter clinical, medical, or academic settings.

Supervision of interns. At least one licensed psychologist is responsible for providing close supervision of the intern's performance on each clinical case. Interns consult daily with a faculty case manager to review case responsibilities, selection and implementation of measurement and treatment procedures, data interpretation, and treatment planning. In addition, there are opportunities for direct observations with feedback both in vivo and by video recording, as well as co-therapy with faculty members. Throughout the Children's Healthcare of Atlanta there are rooms equipped with two-way mirrors and/or video recording equipment that feed live or recorded video to any computer in the building—including in faculty offices. The program strictly adheres to the APA guidelines of two hours of individual and two hours of additional (group or individual) supervision per week, with at least 80% coming from a licensed psychologist. Face-to-face supervision is the primary supervisory modality utilized in the internship training program. Telesupervision is available as a component of the internship training program to ensure that interns have access to optimal supervisory expertise and oversight for clinical training activities when in-person supervision is

deemed impractical, generally due to geographic constraints, or unsafe due to health considerations. Additional information is available in the programs telesupervision policy. A secondary licensed supervisor (e.g., psychiatrist, social worker, counsel, marriage and family therapist) or postdoctoral psychology resident may provide up to 20% of interns' supervision. Interns also have a chance to with collaborate and learn from other professional providers.

CLINICAL TRACKS

NEURODEVELOPMENTAL ASSESSMENT AND EARLY INTERVENTION TRACK (2-3 positions)

Interns in this track split their time between two year-long major rotations with the **Clinical Assessment and Diagnostics (CAD) Department** and **Project ImPACT Early Intervention (EI) Clinic** at the Marcus Autism Center, with options for minor rotations in other CHOA clinics. These major rotations offer a shared focus on early identification of and supports for neurodevelopmental disorders as well as family engagement and empowerment. Families served represent diverse ethnocultural, racial, linguistic, and socioeconomic backgrounds, and most families qualify for state or federal Medicaid. An example of how interns may split their time each week is: 1 day in the EI Clinic, 2 days in CAD, as well as time committed to a minor rotation and administrative commitments, follow-up client care, and training commitments like didactics.

CAD emphasizes flexible, empirically supported approaches to clinical assessment with an emphasis on family-centered care. Within half- and full-day diagnostic assessments, interns support individuals ranging from infancy to late adolescence with a range of neurodevelopmental disorders, all with a presenting diagnostic question of autism. Although we serve a full age range of clients from 12 months to 18 years, most children seen are ages 5 and under. Children are commonly assessed for autism spectrum disorder as well as common differential diagnoses such as intellectual disability, language disorders, anxiety disorders, and ADHD. Assessments are designed to identify cognitive and developmental strengths and areas of challenge, assess adaptive functioning, provide diagnostic clarification, and aid families in identifying and accessing community-based supports. There are opportunities to join psychologists for evaluations across various research studies as well.

Assessment teams often consist of one psychologist working alongside an intern or postdoctoral fellow, with opportunities to consult with related professionals. Located alongside our clinic are psychiatrists, nurse practitioners, speech language pathologists, and social workers. Interns may also join psychologists conducting multidisciplinary evaluations with developmental behavioral pediatricians and neurologists. Interns will have the opportunity to participate in assessments that include interpreters and, for interested trainees proficient in Spanish, bilingual assessments, interventions, and supervision is available.

EI uses an outpatient parent coaching model to support families of autistic toddlers or those with social communication delays. EI centers on the evidence-based Project ImPACT curriculum while also supporting families in navigating barriers to care. The program emphasizes family engagement by coaching families on how to implement developmental and behavioral teaching strategies across daily routines and then creating plans for weekly practice. Children seen range from 12 to 40 months and demonstrate varying degrees of social and communication delays (e.g., skills ranging from limited vocal and gestural communication to speaking in short sentences with challenges engaging with others). Presenting concerns include autism but also language disorders, genetic disorders, cerebral palsy, and factors associated with preterm birth.

With respect to **intern supervision** across the EI and CAD major rotations, all psychologists are a part of the same team, with many working in both CAD and EI. Supervisors have broad training in clinical psychology with experience working with pediatric populations with and without autism. Supervisors generally ascribe to a cognitive behavioral theoretical orientation. CAD and EI supervisors place high value on training and enjoy working closely with trainees from varied backgrounds.

BEHAVIORAL MENTAL HEALTH TRACK (2 positions)

The **Behavioral and Mental Health Track** in a part of Children's Healthcare of Atlanta seeks to ensure patients receive access to behavioral and mental health services that will improve their quality of life and ability to thrive. Interns spend time in the **Outpatient Clinic** as well as the **Integrated Primary Care Clinic** at Hughes Spalding.

The **BMH Outpatient Clinic** serves a *general* pediatric population referred from internal Children's specialty medical clinics and aims to increase the continuity of care available to Children's patients to include behavioral and mental health care. The outpatient clinic serves children with a broad range of concerns associated with anxiety, mood disorders, somatic symptoms, medical adherence concerns, and behavioral problems. Many patients have comorbid medical conditions and are referred from endocrinology, oncology, neurology, transplant, and orthopedics. A multi-disciplinary team of psychologists, social workers, nurse practitioners, and physicians provide both assessment and treatment services for children. Treatment modalities include individual therapy, group therapy, and parent training. Evidence based practices such as cognitive behavioral therapy, acceptance and commitment therapy, parent-child interaction therapy, and trauma-focused cognitive behavioral therapy are used. Medication management is provided as needed for patients. Faculty have interests in treating trauma, mood disorders, anxiety, chronic pain, and developmental disabilities. Interns will participate in monthly multidisciplinary case consultations and staff meetings.

Children's **Integrated Care Team** provides behavioral health in primary care and provides consultative and intervention services in the pediatric primary care practice at Hughes-Spalding. The practice serves a high proportion of children ensured by

Medicaid and is comprised of a team of pediatricians, psychologists, nurses, behavioral and mental health therapists (LCSWs and LPCs), and a medical social worker. Interns can expect to provide behavioral mental health consultations. In addition, interns will conduct autism assessments for young children.

The Children's Behavioral and Mental Health Outpatient Clinic and Integrated Care Clinic are relatively new, opening in 2021. This allows a unique opportunity for interns to gain experience in program development from both clinical and operational standpoints.

Interns will split their time between the Behavioral Mental Health Outpatient Clinic (Chantilly/Zalik location) and Integrated Primary Care at Hughes Spalding.

PEDIATRIC FEEDING PROGRAM TRACK (3 positions)

The **Pediatric Feeding Track** offers an intern the opportunity to work with children ages 9 months to 21 years who do not consume enough volume or variety of food to maintain adequate growth or nutrition. Children with this level of feeding disorder fall under the broader psychiatric diagnosis of Avoidant-Restrictive Food Intake Disorder (ARFID). ARFID in pediatric populations often co-occurs with complex medical and/or developmental conditions (e.g., pre-maturity, gastrointestinal, cardiac, food allergy, autism); therefore, this rotation offers interns a breadth of training opportunities with a diverse range of patients. Our model of care involves multidisciplinary assessment and treatment and throughout the training year interns gain experience working with a team that includes physicians, nurse practitioners, dietitians, speech-language pathologists, an occupational therapist, and a social worker.

The Pediatric Feeding Track offers a scientist practitioner model of training. Our clinic integrates science and best practices by involving a data-driven decision-pathway model of care that also facilitates new discoveries through single-subject research. The model of supervision is behavioral and involves competence-based benchmarks. The supervisor provides modeling and performance feedback with heavy oversight initially and support is faded as the internship progresses.

The intern in the Pediatric Feeding Track will spend a full year training in clinical experiences that include feeding assessments, intensive day treatment, and outpatient therapy. Across these areas, interns will gain experience with treatment approaches that include applied behavior analysis, parent training, parent-child interaction therapy, and manual-based interventions. Interns will split their time between Marcus Autism Center, the Center for Advanced Pediatrics, and community outpatient settings. In addition to feeding, treatment often focuses on associated behavioral/pediatric concerns including sleep, toileting, and disruptive behavior. Professional opportunities include participating in grant funded and/or clinical research projects, presentations at regional and national conferences, and supervision of others.

SCHOOL CONSULTATION (1 position)

The Marcus Autism Center's **School Consultation Track** provides an intern opportunities to engage consultation and training with school professionals and parents to increase the behavioral functioning of children with developmental disabilities. The School Consultation Program provides consultation, direct assistance, and professional development for school systems to help them effectively serve students with educational needs and behavioral challenges—especially those diagnosed with autism and related disorders. Interns provide a variety of behavior analytic services within the school setting aimed at both increasing students' appropriate skills and decreasing aberrant behaviors that are disruptive in the classroom. In addition to school consultation, this intern provides direct service through the RUBI Parent Training Program. RUBI is an outpatient program developed and shown to decrease challenging behaviors in children with Autism Spectrum Disorder (ASD) between the ages of 3 and 10. The program involves teaching parents a number of strategies to prevent, manage, and reduce occurrences of problem behaviors of mild to moderate severity while promoting skill development. **Applicants must have a BCBA to be considered for this Track**.

In the School Consultation role, the intern will travel to schools across Georgia (mileage will be reimbursed) and provide consultation or training in a variety of settings – from Head Start classrooms to classrooms designed for transitioning to adulthood with students 18-21. The majority of our classrooms are in rural settings in low income districts where private therapy services are scarce. Therefore, high quality education using behavior analytic strategies are the only services many of our students receive. We work with teachers and administrators to build classroom structure that is understandable to students, create IEP goals that are informed from direct assessment (e.g., AFLS, ABLLS-R), train teachers to utilize behavior analytic teaching strategies to reach those IEP goals, and conduct functional behavior assessments (FBA) and behavior intervention plans (BIP). Furthermore, we have the Behavioral Consultative Assessment Support in Education Team (B-CASE Team) Project. In the B-CASE project we train school-based professionals to conduct the full range of FBAs, including experimental methods (i.e., functional analysis, structural analysis, concurrent operants assessments).

SEVERE BEHAVIOR PROGRAM TRACK (2 positions)

The **Severe Behavior Program** at the Marcus Autism Center provides a continuum of services for individuals with developmental disabilities between the ages of 2 and 21 years who display severe destructive behavior such as self-injurious behavior (SIB), aggression, property destruction, noncompliance, tantrums, elopement, pica and toileting deficits. The primary goals of the program are to: (a) serve as a model for the evaluation and treatment of destructive behavior displayed by persons with developmental disabilities, (b) foster the development of new therapeutic procedures

through systematic research on the nature and management of destructive behaviors, and (c) promote the effective application of currently available treatments through training and consultation. The goal for each child is to decrease the occurrence of his/her problem behavior and generalize gains made in treatment to the child's home environment, community, and school. Social and ecological validity of interventions is a significant area of emphasis in all Severe Behavior treatment programs. Four clinical services are available, with level of care matched to child and caregiver characteristics to provide the services warranted for each child. Interns in the full-year severe behavior program will lead at least one case at a time in our Intensive Outpatient Program, working with the most severe and complex cases of problem behavior in the region. Clients are served 5-hours a day, 5-days a week, for an average of 3 months. Individuals are referred to this program if their problem behavior is placing their family in a state of crisis (e.g., problem behavior is causing significant injuries or the family is considering residential placement for the individual) or if their problem behavior cannot safely be managed by the caregivers. Common treatment courses include detailed functional analysis, teaching of adaptive behaviors (e.g., functional communication training), reinforcement for appropriate behaviors on a dense schedule, schedule thinning, caregiver training, and generalization. **Applicants must be working toward a BCBA and have completed some coursework to be considered for this Track**.

Interns in the full-year track will gain experiences providing short-term follow-up to clients after discharge from the Intensive Outpatient Program to build skills in the area of maintenance of behavioral interventions and caregiver training. Interns in the full-year program will also have opportunities to increase the variety of clients they see through the minor rotation options in the severe behavior program. These minor severe behavior rotations will occur throughout the year, but with a heavier emphasis on in the second six months.

TREATMENT TRACK (2 positions)

Interns in this track will spend 6 months in in the Language and Leaning Center program and 6-months in the Pediatric Feeding Program for a total of 2, 6-month major rotations. They will also complete a year-long minor rotation and complete a brief exposure experience in assessment.

The **Pediatric Feeding Track** offers an intern the opportunity to work with children ages 9 months to 21 years who do not consume enough volume or variety of food to maintain adequate growth or nutrition. Children with this level of feeding disorder fall under the broader psychiatric diagnosis of Avoidant-Restrictive Food Intake Disorder (ARFID). ARFID in pediatric populations often co-occurs with complex medical and/or developmental conditions (e.g., pre-maturity, gastrointestinal, cardiac, food allergy, autism); therefore, this rotation offers interns a breadth of training opportunities with a diverse range of patients. Our model of care involves multidisciplinary assessment and treatment and throughout the training year interns gain experience working with a team that includes physicians, nurse practitioners, dietitians, speech-language pathologists, an occupational therapist, and a social worker.

The **Language and Learning Clinic (LLC)** at Marcus Autism Center serves children diagnosed with autism spectrum disorders between the ages of 2 and 12 years (average 4 years of age) who are exhibiting significant language and social communication delays. Services provided in the LLC focus on building communication and vocal skills, bolstering appropriate play and social skills, targeting foundational learning skills such as imitation and matching, and reducing barriers to learning (e.g., limited reinforcers, mild to moderate problem behavior). The goal for each child admitted to the LLC is to acquire the critical skills they need in order to thrive in a less intensive setting. Children receive services between 3 and 6 hours per day, 5 days per week. All services are provided in a 1:1 format that utilizes a combination of discrete trial training and natural environment teaching to meet each child's individual and developmental needs. Intervention in the LLC also heavily involves caregivers via both didactic and in-vivo training in order to facilitate generalization and speed treatment progress.

Interns in the LLC have the opportunity to gain a diverse set of experiences that include working directly with children, providing consultation, and delivering caregiver training. They learn to conduct and utilize comprehensive language assessments to aid in the development of intervention programming that focuses on improving language skills, play skills, and adaptive skills and that addresses barriers that may interfere with learning. In addition, they learn how to integrate child development with evidenced-based practice in order to produce meaningful outcomes in the daily life of the children they work with. Interns will also have potential opportunities to participate in ongoing departmental research projects in the roles of designing and implementing research protocols, assisting with data collection and analysis, and manuscript writing.

POSSIBLE MINOR ROTATIONS

Interns in all tracks participate in a ½ day a week Minor Rotation. Minor Rotations are determined after the match. Possible minor rotations are listed below. The availability of minors varies from year to year.

Behavior Mental Health Outpatient Clinic (minor rotation) offers interns the opportunity to work with children ages 4-21 years of age for individual therapy. The Clinic serves children with a broad range of concerns associated with anxiety, mood disorders, somatic symptoms, medical adherence concerns, and behavioral problems. Many patients have comorbid medical conditions and are referred from endocrinology, oncology, neurology, transplant, and orthopedics.

RUBI-Parent Training Program (minor rotation) within the Severe Behaviors Program is an outpatient program developed and shown to decrease challenging behaviors in children with an Autism Spectrum Disorder (ASD) between the ages of 3 and 10. The program involves teaching parents a number of strategies to prevent, manage, and reduce occurrences of problem behaviors of mild to moderate severity while promoting skill development.

The Brief Behavior Intervention (BBI) Program (minor rotation) is a weekly outpatient program. Children have a variety of problem behaviors of moderate to high severity, including aggression, self-injury, noncompliance, disruptive behavior, elopement, and pica. Targeted treatment goals are achieved through the therapist coaching the caregiver in completing a functional analysis and implementing treatment. There is a heavy emphasis on parent training, with the caregivers rehearsing skills both during the appointment as well as between appointments. ABA experience is required.

Long-term Follow Up (minor rotation) is a service provided to children after completion of day-treatment and short-term follow-up within Severe Behavior. Clients are transferred to long-term follow-up approximately 6 months after discharge and most clients are seen every 1-3 months. This program provides experiences in maintenance of behavioral interventions. ABA experience is required.

The **Clinical Assessment and Diagnostic Department (minor rotation)** is a multidisciplinary clinic that provides diagnostic assessments of individuals with a wide range of neurodevelopmental disorders with a possible autism spectrum disorder. Children seen in the CAD clinic range from infancy to late adolescence with a focus on children ages 16 months to 6 years.

The **Pediatric Feeding Clinic (minor rotation)** offers interns the opportunity to work with children ages 9 months to 21 years who do not consume enough volume or variety of food to maintain adequate growth or nutrition. Children with this level of feeding disorder fall under the broader psychiatric diagnosis of Avoidant-Restrictive Food Intake Disorder (ARFID).

The **Early Intervention Program (minor rotation)** is an outpatient parent coaching program designed to support families of toddlers with or at-risk for autism spectrum disorder (ASD) in developing play, communication, social engagement, and imitation skills. The program uses the Project ImPACT curriculum, which has been shown to build skill in young children with ASD and other developmental delays through integrating behavioral and developmental treatment strategies. The program emphasizes active parent participation within and between sessions.

ADDITIONAL METHODS OF INSTRUCTION

Didactic Seminars

Throughout the year, the Internship arranges presentations by faculty, staff, postdoctoral fellows, visiting scholars and staff clinicians from other Children's Healthcare of Atlanta disciplines on subjects as diverse as pediatric psychology, anxiety treatment, behavioral assessment techniques, screening and diagnosis for developmental disabilities, ethics, manuscript review process, parent training, self-injurious behavior, pediatric psychology, motivational interviewing, pediatric feeding disorders, behavioral covariation, pediatric psychopharmacology, hyperactivity,

neuromuscular disorders, and social acceptability of behavioral treatments. Didactics generally occur twice a month.

Monthly Diversity Seminars

Interns participate monthly Diversity Seminars during the year. The seminars include psychologists and trainees from across the Children's Healthcare of Atlanta system and cover a variety of topics associated with diversity, equity, and inclusion within psychology. The seminars occur on Fridays at lunchtime.

Program-Wide Group Supervision

Interns meet monthly as a group to participate in a shared supervision experience. These sessions take a broader look at clinical activities, and their relationship with other areas of professional identify and activities. Often the discussions turn to the "soft skills," which are trans-theoretical in their relevance for being an effective professional psychologist. Group supervision typically occurs once a month.

Professional & Career Development

In addition to the breadth of clinical and research experiences available, the internship provides monthly Professional Development instruction and training focusing specifically on the interns' continued growth and development as professionals. The professional development component of the training program is designed to facilitate the interns' acquisition of a postdoctoral fellowship or employment after the completion of the internship year. This series explores every aspect of the employment process and includes topics ranging from the development of a curriculum vita to contract negotiation. The discussions are intended to be responsive to the needs of the interns, so the topics can be tailored to address the changing concerns as expressed by the interns.

The training director also provides the interns with ongoing updates regarding jobs across the country. The interns have the opportunity to practice a job talk during weekly teaching rounds or in a similar forum. Although delivering a job talk is not mandatory, it is an excellent opportunity to perform a "dry run" of the talk and improve the content and delivery before the actual interview. Finally, the faculty members make themselves available to assist the interns further in acquiring employment by writing letters of reference and contacting colleagues in the field on behalf of the interns. Our commitment to the interns extends beyond the training year, and the professional development component of the program allows us to facilitate the interns' continued success as they begin their careers. Over the years, many interns have stayed to pursue postdoctoral training opportunities in one or more of our clinical programs. The training director typically meets with interns once a month.

Each intern participates in our Mentorship Program and is matched with a faculty mentor that serves in a non-evaluative role. The Children's Healthcare of Atlanta Doctoral Internship Mentorship Program exists to encourage interns' professional

growth and provide support for all interns as future health service psychologists, particularly in the context of diversity and inclusion factors.

The mentor-mentee relationship may include discussions of topics such as:

1) Professional growth opportunities (e.g., clinical, research, service);
1) Specific skills (e.g., grant writing, implementation science, program development)
2) Professional networking;
3) Work-life balance and burnout prevention;
4) Aspects of identity (e.g., racial, sexual, gender, religious identity); and
5) Ethical considerations within professional work.

Grand Rounds

Grand Rounds occur throughout the Children's Healthcare of Atlanta system. The Marcus Autism Center provides semi-monthly grand rounds as does Scottish Rite Hospital. Egleston also holds a monthly grand rounds. These series includes clinical and scientific lectures from Emory University and Children's Healthcare of Atlanta faculty and staff, as well as invited faculty from academic institutions from around the country. Interns are expected to attend 5 grand rounds (or equivalent presentations) during the year.

Summer Symposium

Near the start of each training year, interns involved in the care of children with developmental disabilities join other trainees and professionals to attend the Marcus Autism Center Annual Summer Symposium. This symposium includes three full days (18 hours) of presentations that provide an in-depth review of key issues related to research and clinical care for the populations served by the Center. Topics in recent years have included defining, detecting and diagnosis ASD, ethical issues in identification and diagnosis, intervention programming, family and community programming, translational research, cultural diversity, telemedicine, nutrition, clinical trials, and animal models. An additional two day (12 hours) Autism Diagnostic Observation Schedule, 2nd Edition Advanced Clinical Training is also available to interns.

INTERN RESEARCH PROJECT

In order to learn skills related to clinical research, all interns are expected to complete a research project in collaboration with a faculty research preceptor. These projects must be separate from the dissertation, and must result in a research "product," in which the intern plays a major role. Most often this involves first authorship on a poster or paper presentation at a conference; however, some interns also generate a manuscript to submit for publication. Projects usually involve gleaning data from an existing clinical dataset or completing a program evaluation. During the first month of internship, faculty

rotate through to share opportunities for involvement in their ongoing research with interns.

RESEARCH

The Internship faculty has an internationally renowned research program and a consistent record of research productivity. Whenever possible, interns are supported fully to participate in ongoing research projects encountered through clinical services. Interns may elect to participate in ongoing studies directed by faculty and/or to initiate independent research compatible with the Internship's mission. Each intern is required to complete at least one research project, separate from the dissertation, that results in a professional product (poster, paper, manuscript), usually as first author. A list of representative faculty publications is available here. Historically, trainees have been active in research activities as evidenced by the number of publications that have included trainees.

EVALUATION

Supervisors provide feedback to interns about progress toward these competencies orally on an ongoing basis, and they review feedback in writing at baseline (i.e., 1 month) and at the end of each quarter thereafter. In this context, the faculty formally evaluates progress toward readiness to practice as formalized in the program's goals and objectives. To successfully complete the internship, trainees must demonstrate a competence level at least high enough to enter practice at a basic level of professional challenges (i.e. a score above 2 on evaluation forms). Of course, we aim to train interns to function at higher levels of capability than basic proficiency and most interns achieve advanced levels of competence in most domains.

DIVERSITY EQUITY AND INCLUSION

Our internship values creating an education and training environment that is inclusive, equitable, and respectful of diversity. We recognize the value diverse interns bring to our internship training community and provide to our patients. We aim to wholistically recruit interns from a wide range of backgrounds.

For detailed information about our guidance and policies around diversity, equity, and inclusion (DEI), please see our internship handbook (found on the front page of our website) which includes:

A. our values and commitments related to DEI,
B. support for APA's Multicultural Guidelines,

C. a framework for self-reflection regarding one's own multicultural identities and biases,
D. general guidance for positive and productive interpersonal engagement regarding DEI,
E. Emory School of Medicine Policy on Discrimination and Harassment Reporting,
F. internship policy on addressing discriminatory/racist patient behaviors,
G. working definitions for DEI-related terminology,
H. and links to additional resources and references at the end of this document

We hope that the values, commitment, and framework articulated inform and are integrated into our work culture.

Supervision

Our supervisors are strongly encouraged to incorporate discussions of identity and diversity in supervision. In particular, we encouraged our supervisors and interns to openly discuss aspects of their identity and how that may affect their interactions with patients and within the supervision process during the first weeks of supervision.

Monthly Diversity Seminars

Interns participate monthly Diversity Seminars during the year. The seminars include psychologists and trainees from across the Children's Healthcare of Atlanta system and cover a variety of topics associated with diversity, equity, and inclusion within psychology. The seminars occur on Fridays at lunchtime.

Mentorship Program

The Children's Healthcare of Atlanta Doctoral Internship Mentorship Program exists to encourage interns' professional growth and provide support for all interns as future health service psychologists, particularly in the context of diversity and inclusion factors. Each intern is matched with a faculty member outside of their primary track to serve as a mentor. Matches are based on interns' areas of interest. In addition, interns can request to be matched on aspects of culture/identity such as gender, race, ethnicity, sexual orientation, spiritual/religious background, parental status, ability status, and first generation college graduate status.

Didactics

Every year our didactics fluctuate; however, we typically invite certified trainers from the Emory School of Medicine to lead a training on Implicit Bias.

RESOURCES AND FACILITIES

The Internship maintains a supply all materials needed for assessment or treatment sessions, and it has software programs specifically designed for collecting, analyzing, summarizing, and graphing direct-observation data. The data from treatment sessions are collected on computers, saved to a shared computer server and reviewed daily in supervision sessions. Each intern has a workstation and computer capable of analyzing and graphing treatment or assessment data. In addition, interns have access to all the library and related research resources afforded by Emory University School of Medicine.

Interns receive training across several locations in the Children's Healthcare of Atlanta Network, specifically the Marcus Autism Center, the Center for Advanced Pediatrics, and the Behavioral and Mental Health Center.

The **Marcus Autism Center** (MAC) is a National Institutes of Health Autism Center of Excellence and it comprises the Division of Autism and Related Disorders in the Emory University School of Medicine's Department of Pediatrics. One of the nation's largest centers for clinical care of autism and related disorders that annually serves over 5000 patients, the Center provides clinical assessment and treatment services for several pediatric populations; conducts translational research in the lab, in the session room, and in the community; and offers training for multiple disciplines at several educational levels. More than 25 treatment rooms and 9 assessment rooms are equipped with one-way mirrors in connected observation rooms and video recording systems that allow for live viewing or review of recorded videos. There is a Social Neuroscience Laboratory equipped with numerous eye tracking devices for infants, toddlers, and school-age children; a Spoken Communication Laboratory with a motion capture system, high speed camera, and audiovisual speech perception; an EEG Laboratory; a phlebotomy room, and a 4-D research ultrasound system. There are 3 indoor play rooms, 2 multipurpose rooms, a childcare/family room, and 2 outdoor play areas. Interns provide services throughout these facilities.

The **Center for Advanced Pediatrics (CAP)** at Children's Healthcare of Atlanta (Children's) is a 260,000 square foot outpatient clinic facility that utilizes a multidisciplinary, coordinated care approach to provide treatment to children and teens with chronic diseases and complex care needs by enabling access to multiple specialized health services in one place. Servicing thousands of families across Georgia, the center brings together over 20 pediatric specialties under one roof, harnessing the expertise and skills of more than 450 physicians and staff. The center's multidisciplinary framework merges both clinical and research services to provide patients with optimal treatment options and state of the art care. CAP is the first building of its kind for pediatrics in Georgia, conducting state of the art research and providing more than 100,000 patient visits per year. CAP's pediatric specialists provide treatment to a significant number of children with medically complex conditions who require multidisciplinary, coordinated care to optimize their outcomes. Providing "patient-

centered” care, the center allows access to specialized programs and services, improved appointment availability, and a “child-friendly” design and setup.

The **Behavioral and Mental Health Outpatient Clinic** is a centralized clinic that serves as a resource for internal teams to refer children and adolescent when they require longer term mental and behavioral healthcare that what can be offered elsewhere in our healthcare system. Located in 4,800 square feet of clinical space, newly renovated with this population in mind, this clinic includes 12 individual therapy rooms, as well as capacity for group therapy and in-vivo observation.

Children’s Hughes Spalding Hospital is a freestanding, 24-bed, pediatric acute care and outpatient children's hospital located in downtown Atlanta, Georgia. The primary care clinic serves as a medical home for children ages 0-18 years. Our team consists of MDs, nurse practitioners, nurses and medical assistants, nutritionists, lactation specialists, interpretive services, social workers, respiratory therapists, nurse navigators, and psychologists.

MEET THE PSYCHOLOGY INTERNSHIP FACULTY

Supervising Faculty Members

Summer Bottini, PhD, BCBA-D *received her doctorate in clinical psychology from Binghamton University and completed post-doctoral residencies at the Marcus Autism Center and May Institute. Dr. Bottini is an Assistant Professor in the Emory University School of Medicine Department of Pediatrics and a Psychologist in the Severe Behavior Program at Marcus Autism Center. Dr. Bottini specializes in the assessment and treatment of externalizing behavior among individuals with developmental disabilities. Additionally, her work is focused on the effective supervision of clinicians to provide optimal care for autistic and neurodivergent individuals. This includes embedding a neurodiversity framework within clinical practices, addressing staff burnout, effective/efficient training methods, and treatment fidelity.*

Bianca Brooks, PhD *is a licensed clinical psychologist and part of the assessment and diagnosis team at Marcus Autism Center. Dr. Brooks completed her doctorate in clinical psychology at Georgia State University, where she studied ways to facilitate access to early intervention after diagnosis of autism spectrum disorder (ASD). She continued her passion for serving underserved communities and reducing disparities in mental healthcare access by completing an internship at Memphis Veteran's Affairs Medical Center. She returned to Atlanta for her postdoctoral fellowship at Emory University School of Medicine and assisted with diagnostic services at Marcus Autism Center. In her current position, Dr. Brooks conducts diagnostic assessments of young children. She values exploring innovative techniques to reduce racial and ethnic disparities in accessing early intervention services for families.*

Deva Carrion, PhD, BCBA-D *earned her doctorate in school psychology from the University of Iowa. She completed her pre-doctoral internship at Munroe-Meyer Institute and her postdoctoral experience at Marcus Autism Center. She is a licensed psychologist and doctorate-level, board-certified behavior analyst (BCBA-D). Dr. Carrion has more than 10 years of experience working with children with autism spectrum disorder (ASD) and related developmental disabilities, particularly with individuals displaying challenging behaviors. She joined Marcus Autism Center in July 2018 in the School Consultation Program. She works with school districts as a behavioral consultant and trainer. She is responsible for providing direct behavioral consultation to school districts across Georgia, training teachers and paraprofessionals in principles of applied behavior analysis (ABA), behavior management, developing individual education plan (IEP) goals and general classroom management strategies. Dr. Carrion's research interests include assessment and treatment of challenging behavior in the school setting and training school-based professionals to conduct empirically based assessments and develop evidence-based treatments.*

Laura Dilly, PhD, ABPP, NCSP *is the Training Director for the Doctoral Psychology Internship at the Marcus Autism Center, Children's Healthcare of Atlanta, and an Assistant Professor at the Emory School of Medicine Department of Pediatrics. She received her doctorate in school psychology at Michigan State University in 2005. She completed her doctoral internship at the Houston Independent School District. Dr. Dilly then worked within the public school districts for 10 years as a lead psychologist and training coordinator. Dr. Dilly leads outpatient services within the Behavioral Mental Health Center and conducts assessments of young children with genetic and neurodevelopment concerns through the Developmental*

Neurology Program at the Center for Advanced Pediactics. Her research interests involve the intersection of the school based and medically based services for children with autism spectrum disorders as well as workforce and training issues.

Elizabeth Greenfield, PhD *completed her PhD in Counseling, Clinical and School Psychology at the University of California, Santa Barbara. Dr. Greenfield completed her doctoral internship at the University of North Carolina, Chapel Hill and her postdoctoral residency program with the Marcus Autism Center. Dr. Greenfield is an assistant professor in the Department of Pediatrics within the Emory University School of Medicine and a psychologist within the Early Intervention and Clinical Assessment and Diagnosis teams. Dr. Greenfield conducts diagnostic evaluations to assess for autism and collaborates with parents to help promote their child's social communication skills.*

Nicole Hendrix, PhD *received her PhD in school psychology at the University of Iowa, where her training concentrated on assessment and treatment of neurodevelopmental disabilities across the lifespan. She completed a doctoral internship at the Marcus Autism Center in the Language and Learning Clinic and Pediatric Feeding Program before then completing a postdoctoral fellowship in diagnostic services. Dr. Hendrix is an assistant professor in the Department of Pediatrics within the Emory University School of Medicine and a psychologist on the assessment and diagnostic team. In her clinical role, she conducts diagnostic evaluations for children and adolescents. Dr. Hendrix's research focuses on early assessment and intervention for at-risk populations, with current projects striving to better understand the development of nonverbal communication strategies within typical development and neurodevelopmental disorders.*

Kathryn Holman Stubbs, PhD *received her doctoral degree in Clinical Psychology from University of Wisconsin—Milwaukee. She completed her doctoral internship at Munroe Meyer Institute (University of Nebraska Medical Center) and her fellowship through Emory University School of Medicine at the Marcus Autism Center in the Pediatric Feeding Disorders Program. She is currently a senior psychologist in the Pediatric Feeding Disorders Program where she works with children and families to develop effective treatments to improve mealtime behavior in the day treatment and outpatient programs and provides consultation in pediatric gastroenterology clinics. She supervises predoctoral interns and postdoctoral fellows in the intensive day treatment program for children with feeding disorders. Her clinical and research interests have focused on the assessment and treatment of children with pediatric feeding disorders as well as treatment adherence in pediatric populations.*

Sarah Slocum Freeman, PhD, BCBA-D *received her doctorate in Psychology at the University of Florida under the mentorship of Dr. Timothy Vollmer, BCBA-D. She was subsequently appointed as a Rollins College faculty member for two years before joining the Marcus Autism Center. In her clinical position in the Marcus Autism Center Severe Behavior Program, Dr. Slocum manages cases in the intensive outpatient program, coordinates employee supervision towards board certification as behavior analysts, and oversees the intake process for the Severe Behavior program. As a researcher in the Pediatrics Institute of Emory University's School of Medicine, Dr. Slocum's work focuses on behavior-analytic approaches to the assessment and treatment of problem behavior. Specifically, she is interested in further investigation into the variables that contribute to treatment effectiveness for problem behavior maintained by escape from aversive situations.*

Kristina R. Gerencser, PhD, BCBA-D *is an Assistant Professor of Pediatrics at Emory University School of Medicine and a board-certified behavior analyst doctorate (BCBA-D) and Program Manager for the Language and Learning Program at Marcus Autism Center. Dr. Gerencser has worked with children with autism spectrum disorder (ASD) and related disabilities in home-, center- and school-based programs targeting skill acquisition and reducing challenging behavior. Dr. Gerencser completed her post-doctoral fellowship at Marcus Autism Center in the Severe Behavior Program. She holds a doctorate in disability disciplines, with a specialization in applied behavior analysis from Utah State University, and received her master's in behavior analysis from Western Michigan University.*

Kristin Hathaway, PhD, BCBA *earned her doctorate in school psychology from the University of Missouri. She completed her predoctoral internship at the University of Nebraska Medical Center Munroe-Meyer Institute in Omaha, Nebraska, with an emphasis in pediatric feeding disorders and interdisciplinary autism spectrum disorder evaluations. She completed her postdoctoral fellowship in the Multidisciplinary Feeding Program at Marcus Autism Center and the Center for Advanced Pediatrics through Emory University School of Medicine. Dr. Hathaway is a licensed psychologist in the state of Georgia and a board-certified behavior analyst. As a psychologist for the Feeding Program, Dr. Hathaway conducts multidisciplinary feeding evaluations and provides behavioral intervention in the outpatient and day treatment programs.*

Cheryl Klaiman, PhD *received her doctorate in School and Applied Child Psychology from McGill University under the mentorship of Jacob Burack. She completed her internship and post-doctoral training at the Yale Child Study Center where she worked with Drs. Ami Klin, Fred Volkmar, Robert Schultz and Sara Sparrow. She joined the faculty of the Yale Child Study Center as an Associate Research Scientist, and then relocated to California where she was the Director of the Autism and Developmental Disabilities Interdisciplinary Care Team at Children's Health Council in Palo Alto, CA. She joined the team at The Marcus Autism Center and Emory University in January of 2012 where she directs the FDA regulated clinical trial which is attempting to validate our eye-tracking work as a medical device. She also works on the clinical characterization team among other various research projects. Research interests include early diagnosis and screening of autism spectrum disorders, innovative treatment strategies and clinical trials.*

Meena Khowaja, PhD *(she/her/ella) received her doctorate in Clinical Psychology from Georgia State University, where her research was focused on early identification of autism. She completed her predoctoral internship focused on Integrated Behavioral Health at Nemours Children's Health and her postdoctoral fellowship in Developmental Pediatrics and Children's Hospital Colorado. Before transitioning the Marcus Autism Center in 2022, she worked at the Swank Autism Center within Nemours Children's Health. Her training also included a Leadership Education in Neurodevelopmental Disabilities (LEND) fellowship while a graduate student at GSU and again as a postdoctoral fellow in Colorado. Dr. Khowaja's role at MAC includes conducting psychological testing services through the Clinical Assessments and Diagnostics Program and parent-mediated NDBIs through the Early Intervention/ Project ImPACT program. She strives to continuously learn about and provide neurodiversity-affirming care. Additionally, she is a bilingual psychologist who provides assessment and therapy services in English and Spanish; she has a strong interest in supporting bilingual trainees and collaborating with other bilingual colleagues at MAC and across CHOA. She is also a member of several Employee Resource Groups (ERGs) within CHOA to build community and connection*

Meena Lambha, PhD *completed her undergraduate training at the University of Georgia and earned her*

doctorate degree in clinical psychology from Auburn University. She completed her internship at A.I. DuPont Hospital for Children. She completed her postdoctoral fellowship at the Marcus Autism Center and Emory University. She briefly worked in private practice before returning to the Marcus Autism Center. At Marcus, she has conducted psychological assessments for families participating in various research studies as well as children seen through the clinic for concerns related to autism. She has also provided parent training services through the RUBI Parent Training program for children with autism presenting with behavioral difficulties. Currently, she continues to conduct psychological assessments with children suspected of having an autism spectrum disorder.

Emily Malugen, PhD *earned her doctorate in school psychology from the University of Missouri. She completed her pre-doctoral internship at the University of Nebraska Medical Center Munroe-Meyer Institute in Omaha, Nebraska, with an emphasis in pediatric feeding disorders and interdisciplinary autism spectrum disorder evaluations. She began her post-doctoral fellowship at the Munroe-Meyer Institute, and completed her fellowship at the Center for Advanced Pediatrics in the Multidisciplinary Feeding Program. Dr. Malugen is a licensed psychologist in the state of Georgia. As a psychologist for the Multidisciplinary Feeding Program, Dr. Malugen conducts feeding evaluations and provides behavioral intervention in the Day Treatment and Outpatient Programs.*

Colin Muething, PhD, BCBA-D *received his doctorate in school psychology from University of Texas-Austin, after having completed a master's degree in special education from University of Georgia. His research involves evaluating assessments and treatment for problem behavior across a large sample of individuals. Having completed his doctoral internship and postdoctoral residency at Marcus Autism Center, he joined the faculty as an assistant professor of pediatrics at Emory University School of Medicine in 2017. He is the Director of the Severe Behavior Department.*

Alexis Pavlov, PhD, BCBA-D *received her doctorate in educational psychology from Oklahoma State University and completed her doctoral internship and post-doctoral residency at Marcus Autism Center. Dr. Pavlov is an Assistant Professor in the Emory University School of Medicine Department of Pediatrics and a Psychologist in the Severe Behavior Program at Marcus Autism Center. Dr. Pavlov specializes in the assessment and treatment of severe problem behavior. Additionally, her clinical work focuses on behavioral supports for children diagnosed with developmental disabilities and who present to the hospital in crisis due to challenging behaviors. Dr. Pavlov's research interests include assessment and treatment for severe problem behavior, crisis prevention and de-escalation in medical settings, and caregiver acceptability of crisis intervention programming.*

Kristina S. Patel, PsyD, BCBA *earned her doctorate in clinical psychology from Nova Southeastern University. She completed her pre-doctoral internship in the feeding program at Marcus Autism Center through Emory University's Department of Pediatrics. She completed her post-doctoral residency at the Mailman Segal Center for Human Development at Nova Southeastern University with an emphasis on the treatment of pediatric feeding disorders and parent training to address challenging behaviors. Dr. Patel has specialized in providing evidence-based behavioral assessment, intervention, and caregiver training to families of children with and without autism spectrum disorder and behavioral difficulties. Dr. Patel is a licensed psychologist in the state of Georgia and a board certified behavior analyst. As a psychologist for the Feeding Program at Marcus Autism Center, Dr. Patel conducts multidisciplinary feeding evaluations and provides behavioral intervention in the outpatient and day treatment feeding programs.*

Trista Perez Crawford, PhD *graduated from the University of Alabama-Birmingham. She completed her internship and postdoctoral fellowship at Children's Mercy Hospital. Dr. Perez Crawford is a pediatric psychologist in the Children's Healthcare of Atlanta Center of Behavioral and Mental Health Integrated Primary Care Program at Hughes Spalding and an Associate Professor of Pediatrics in Emory University School of Medicine. Her clinical interests are in the assessment and treatment of toddlers to young adults from historically underserved populations and Spanish speaking families with a range of psychological conditions, including behavioral issues, autism spectrum disorders, developmental disabilities, internalizing disorders and adjustment to chronic medical conditions. Her research interests are in improving access to interventions for underserved populations. In addition to her clinical work and research, Dr. Perez Crawford, serves as a mentor to underrepresented minority undergraduate and medical students.*

Kaitlin Proctor, PhD *earned her doctorate in clinical psychology from Auburn University. She completed her predoctoral internship at the University of Oklahoma Health Sciences Center and her postdoctoral residency at Children's Healthcare of Atlanta, in partnership with Emory University School of Medicine. Dr. Proctor received training in the area of pediatric psychology, which focuses on children's behavioral, developmental and psychosocial functioning in the context of pediatric healthcare. As a licensed clinical psychologist in the* ***Feeding Program****, Dr. Proctor provides multidisciplinary assessment services, as well as intervention services in the day treatment and outpatient programs. Dr. Proctor is also certified in parent-child interaction therapy, an evidence-based parent training intervention for disruptive behaviors or noncompliance in young children.*

Bonney Reed, PhD *a Georgia native, received her undergraduate, master's degree, and PhD in clinical psychology from the University of Georgia. She completed her pre-doctoral internship at the Alpert Medical School at Brown University and returned to Georgia for a postdoctoral fellowship through Emory University School of Medicine and Children's Healthcare of Atlanta. Throughout her training, she focused on treating children diagnosed with chronic illnesses, particularly gastrointestinal conditions. Dr. Reed is an assistant professor of pediatrics at Emory University School of Medicine, and her research focuses on applying psychological science to improve disease outcomes and quality of life in youth with GI disorders. Her clinical interests include patient and family adjustment to pediatric chronic illnesses, and behavior change to promote health. She has experience working with patients diagnosed with Crohn's disease, ulcerative colitis, irritable bowel syndrome, functional GI disorders, celiac disease, and encopresis. In addition, she is highly trained in using cognitive behavioral therapy techniques to address symptoms of anxiety, depression, poor adjustment, school refusal, and chronic pain.*

Shana Richardson, PhD *is a clinical psychologist and member of the research assessment core. Dr. Richardson completed her undergraduate training in psychology at the University of Georgia and earned her doctorate degree from Georgia State University. Dr. Richardson completed her predoctoral internship at Children's Mercy Hospital in Kansas City, Missouri. She returned to Atlanta for her postdoctoral fellowship with Emory University School of Medicine and the Pediatric Neurodevelopmental Center (PNC) at Marcus Autism Center. In her current position at Marcus, Dr. Richardson conducts psychological assessments for families participating in the various research studies, with a focus on the clinical characterization of infants and toddlers.*

Mindy Scheithauer, PhD, BCBA-D *received her PhD from Louisiana State University with a dual emphasis in Clinical and Biological Psychology and a minor emphasis in School Psychology. She completed a doctoral internship in the Neurobehavioral Unit at the Kennedy Krieger Institute through Johns Hopkins*

University and a postdoctoral residency at Marcus Autism Center through Emory University. Dr. Scheithauer is an associate professor in Pediatrics at Emory University and is a psychologist in the Severe Behavior Program. She oversees the Brief Behavior Intervention program (a primarily community-based treatment service) and supervises cases in the Severe Behavior Day Treatment program. Her current research focuses on automatically maintained problem behavior, assessment and treatment of elopement, and improving methods for observational data collection. Her future research goals include clinical trials of specific behavioral treatments and the study of applied behavioral pharmacology through the use of functional analyses in drug trials. Dr. Scheithauer assists with the supervision and training of doctoral and postdoctoral training.

William G. Sharp, PhD *is the Director of the Pediatric Feeding Disorders Program at the Marcus Autism Center and Professor in the Division of Autism and Related Disorders in the Department of Pediatrics, Emory University School of Medicine. He received his doctorate from The University of Mississippi in 2006, with an emphasis in pediatric and clinical child psychology. Dr. Sharp completed a doctoral internship and a post-doctoral fellowship at A.I. duPont Hospital for Children in Wilmington, DE, where he focused on the application of behaviorally-based interventions for severe behavior problems, feeding issues, anxiety and sleep difficulties. His current research interests include the assessment and treatment of feeding disorders among children with autistic spectrum disorders, the impact of antecedent manipulations in the treatment of pediatric feeding disorders, and the use of parent training to address feeding difficulties.*

Jennifer L. Stapel-Wax, PsyD *received her doctorate in clinical psychology from the Georgia School of Professional Psychology in 1998. She completed her doctoral internship at Miami Children's Hospital and her postdoctoral fellowship at the Emory University School of Medicine at the Marcus Center. As a Professor in the Department of Pediatrics at Emory University School of Medicine, she directed a statewide evaluation project for children with complex neurodevelopmental disorders, conducting neurodevelopmental assessments with young children and supervising dozens of trainees. Dr. Stapel-Wax also taught graduate clinical psychology at the Georgia School of Professional Psychology. She currently is the Director of Infant and Toddler Clinical Research and an Associate Professor in the Department of Pediatrics and is a Past President of the Georgia Psychological Association. Her current clinical and research interests lie in teaching and training, assessment of young children and community implementation of scientifically based methods of screening, assessment and intervention.*

Renee Ussery, PsyD *received her doctoral degree in clinical psychology from Argosy University. She completed a postdoctoral fellowship in private practice and the Marcus Autism Center. For the next several years, Dr. Ussery completed psychological evaluations with children and adolescents in private practice In 2008, Dr. Ussery rejoined Marcus Autism Center where she continued to complete assessments with school aged children within the Pediatric Neurodevelopmental Center. She coordinates training experiences that involve conducting comprehensive psychological assessments for children and adolescents who present with complex histories and differential diagnosis is essential.*

Valerie Volkert, PhD, BCBA-D *is a psychologist program manager in the Pediatric Feeding Disorders Program at Marcus Autism Center. She also holds the position of Assistant Professor of Pediatrics in the Emory University School of Medicine. She received her doctorate in school psychology from Louisiana State University, completed a doctoral internship at the Marcus Institute and a postdoctoral residency at the Munroe-Meyer Institute. She was faculty at the Munroe-Meyer Institute for seven years and during*

that time she was President of the Heartland Association for Behavior Analysis (2009-2011) and training director for the MSIA PhD program in ABA and Nebraska Internship Consortium in Professional Psychology in the Center for Autism Spectrum Disorders (2012-2015). An active clinician, teacher and researcher, she sees patients in the outpatient clinics of the Feeding program, supervises interns and fellows and pursues lines of clinical research. Of particular interest are treatments to increase advanced feeding skills (e.g., self-feeding and chewing).

Addam Wawrzonek, PhD, BCBA *earned his doctorate in school psychology from Michigan State University. He completed both his year-long doctoral internship as well as his year-long postdoctoral residency in the Multidisciplinary Feeding Program at Marcus Autism Center through Emory University's Department of Pediatrics. Dr. Wawrzonek first began working with children with autism and developmental disabilities in 2010. Since then , he has worked in both clinical and school settings, focusing on early language and learning intervention, treatment for severe behavior, and treatment of pediatric feeding disorders. Currently, Dr. Wawrzonek specializes in providing behavioral based interventions for children with food refusal and aversion, with an additional focus on acceptance and chewing of regular textured foods.*

Stormi Pulver White, PsyD *is a psychologist program manager in the Clinical Assessments and Diagnostics Program at the Marcus Autism Center. She also holds the position of Associate Professor of Pediatrics in the Emory University School of Medicine. She pursued her doctorate in school psychology from University at Albany, State University of New York. Dr. White completed her post-doctoral fellowship at Vanderbilt University's Treatment and Research Institute for Autism Spectrum Disorders (TRIAD), focusing on early identification of autism. Additionally, Dr. White completed a Leadership Education in Neurodevelopmental Disabilities (LEND) fellowship while at Vanderbilt. Before joining Marcus Autism Center, Dr. White was an Assistant Professor at University of Texas Southwestern (UTSW), where she held administrative titles of head of psychology and co-clinical director in the Center for Autism and Developmental Disabilities (CADD). Dr. White's clinical and research interests include early identification and intervention for autism spectrum disorder (ASD), as well as clinical characterization of rare variant disorders.*

Latasha Woods, PhD *is a licensed psychologist and nationally certified school psychologist. She earned her doctorate from the University of North Carolina at Chapel Hill. Dr. Woods completed her pre-doctoral internship at Marcus Autism Center and her post-doctoral fellowship at the Duke Center for Autism and Brain Development, during which she served on the clinical assessment and research teams. As a part of the assessment and diagnosis team at Marcus Autism Center, Dr. Woods specializes in conducting diagnostic assessments with children, adolescents and young adults, and providing evidence-based treatment to individuals diagnosed with autism spectrum disorder (ASD). Dr. Woods is a certified Research Units in Behavioral Intervention (RUBI) therapist with the RUBI Autism Network. Prior to entering clinical practice, Dr. Woods spent more than a decade serving children and families in schools as a certified school psychologist and classroom teacher.*

Rachel Yosick, PsyD, BCBA-D *is a licensed psychologist and board-certified behavior analyst–doctoral in the Language and Learning Program at Marcus Autism Center. Dr. Yosick completed her doctorate in clinical child psychology at the Georgia School of Professional Psychology and obtained her certification in applied behavior analysis from Florida Institute of Technology. She completed her doctoral internship and postdoctoral fellowship at Marcus Autism Center and Emory University School of Medicine, where she*

gained extensive experience working with children affected by autism and significant language delays, severe problem behavior, and feeding difficulties.

Andrea Zawoyski, PhD, BCBA-D *received her PhD in Educational Psychology with an emphasis in School Psychology at the University of Georgia. She completed internship training at the Munroe Meyer Institute Behavioral Pediatrics and Integrated Care Program and completed postdoctoral training at Cherokee Health Systems in Integrated Health Psychology and Developmental Psychology. She was limited-term Assistant Professor in the Special Education Department at the University of Georgia before transitioning to a role as an Assistant Research Scientist at the Center for Autism and Behavioral Education Research. There, she provided clinical supervision to graduate students in applied behavior analysis and school psychology in their practicum experiences and conducted autism spectrum disorder evaluations. Currently, Dr. Zawoyski works in the Children's Healthcare of Atlanta Behavioral and Mental Health outpatient clinic at Chantilly, providing psychotherapy to children and adolescents for a wide range of presenting behavioral and mental health concerns. She also works in integrated pediatric primary care at the Hughes Spalding Primary Care clinic, where she provides brief assessment and intervention to children and adolescents to address behavioral and mental health concerns that arise during their primary care visits. She also conducts expedited autism spectrum disorder evaluations for toddlers. Dr. Zawoyski is certified in Parent-Child Interaction Therapy, utilizing this modality for young children presenting with disruptive behavior. In addition, she utilizes Acceptance and Commitment Therapy (ACT) as a primary treatment modality for older children and adolescents.*

Contributing Faculty Members

Nathan A. Call, PhD *received his PhD in School Psychology from the University of Iowa in 2003 under the mentorship of David P. Wacker, PhD He completed a pre-doctoral internship at the University of Iowa Hospitals & Clinics and Center for Disabilities & Development and a post-doctoral fellowship at the Marcus Institute and Emory University under the supervision of Wayne Fisher, PhD, and Henry S. Roane, PhD After working as an assistant professor at Louisiana State University from 2004-2006, Dr. Call returned to the Marcus Autism Center where he is currently the Associate Chief for the center. Dr. Call's current research interests include the assessment and treatment of severe behavior disorders. This interest includes identifying the basic behavioral mechanisms that influence the occurrence of problem behavior, as well as the variables that impact the integrity with which caregivers implement treatment recommendations. Dr. Call has an active publication agenda that includes publishing and presenting research in applied behavior analytic forums.*

Ami Klin, PhD *is the Director of the Marcus Autism Center and Professor and Chief of the Division of Autism and Related Disorders in the Department of Pediatrics at Emory University School of Medicine. Dr. Klin is an internationally recognized psychologist and researcher. His primary research activities focus on developmental social neuroscience; specifically on visual engagement of individuals with autism from infancy through adulthood. In his most noted work, Klin uses eye-tracking technology to visualize and measure social engagement, allowing him to monitor infants who potentially have an autism spectrum disorder (ASD). His research goal is to identify individuals with and at risk for ASD as early as possible so that potential therapies can have their maximal effect. He serves as Chief Psychologist of the Internship.*

Joanna Lomas Mevers, PhD, BCBA-D *received her doctorate in school psychology from Louisiana State University, under the mentorship of Jeffery Tiger, PhD and George Noell, PhD. She completed her pre-doctoral internship and postdoctoral fellowship at the Marcus Autism Center and Emory University under the supervision of Nathan Call, PhD. Dr. Lomas Mevers is currently Clinical Director of the Marcus Autism Center. In addition to her clinical duties she also provides training for doctoral and postdoctoral trainees. Dr. Lomas Mevers' current research interests include increasing the social validly of behavioral interventions, increasing efficiencies in caregiver training, treatment of enuresis and encopresis.*

David J. Marcus, PhD, ABPP/CN *is a Clinical Instructor in the Department of Rehabilitation Medicine and a pediatric neuropsychologist at Children's Healthcare of Atlanta. He received his doctorate in Child Psychology from the University of Minnesota in 2005, completed an internship at Children's Hospital of Philadelphia (through University of Pennsylvania) and a fellowship at National Children's Medical Center in Washington, DC. Active as a clinical teacher, he supervises graduate practicum students, interns, residents and fellows. Dr. Marcus' areas of interest include pediatric epilepsy, spina bifida, and genetic and metabolic disorders.*

David O'Banion, MD, FAAP, *attended University of Texas Medical School in San Antonio, and matched to Oregon Health Science University's pediatric residency program, where his mentors helped shape his interests in relational health, parenting, adverse childhood experiences and difficult behaviors. He then pursued a fellowship in developmental and behavioral pediatrics at the University of Oklahoma. Upon finishing fellowship, he followed his wife to London in her pursuit of a master's in public health for eye care. There, he was a research assistant and co-authored a parenting support program for cerebral palsy in Ghana.*

Helen Panarites, MD *received her medical degree from Columbia University, College of Physicians and Surgeons in New York City. She completed her adult psychiatric residency training at the New York Hospital-Westchester Division in White Plains, N.Y. In 1992, she moved to Atlanta for her child psychiatry residency training at Emory University School of Medicine. After training, Dr. Panarites continued as a faculty member at Emory University, working with children and adolescents with a wide range, psychiatric, behavioral and developmental disabilities. She had a position as assistant professor of psychiatry and served as the medical director of the Grady Health System Child and Adolescent Outpatient Psychiatry Clinic. During her time with Grady Health System, Dr. Panarites helped develop a school-based partnership with Atlanta Public Schools, setting up psychiatric teams that provided direct in-school services to several elementary schools. The school-based clinic was effective in improving access to mental health care for children in high-risk schools.*

Publication List 2019-2023

This list is representative of publications by faculty, but not comprehensive

Key: Faculty

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MEET THE DOCTORAL PSYCHOLOGY INTERNS

Current Interns (Class of 2023-2024)

Jae Hyung Ahn, Lehigh University
Terreca Cato, University of Southern Mississippi
Olivia Demario, Mercer University
Heather Halford, Alliant IU/CSPP-San Die
Kavya Kandarpa, University of Cincinnati
Savanna Kiefer, PGSP-Stanford Psy.D. Consortium
Carolyn Lasch, University of Minnesota
Kaely Mateo, Nova Southeastern University
Jennifer Mattera, Washington State University
Leandra Prempeh, Mercer University
Taylor Rosenblat, Nova Southeastern University
Leonora Ryland, Baylor University
Caroline Swetlitz, Boston University

Internship Graduates (Class of 2022-2023)

Chloe Beacham, Georgia State University
Courtney Breiner, University of Albany – SUNY
Ellen Doernberg, Case Western Reserve University
Mayank Gandhi, Mercer University
Shannon Harper, Fielding University
Megan Knedgen, Antioch University Seattle
Samantha Stanford, University at Buffalo/North Campus
Catherine Taylor, Nova Southeastern University
Camilla Woodard, Philadelphia College of Osteopathic Medicine

Internship Graduates (Class of 2021-2022)

Amy Barton, University of Houston
Kathleen Edmier, Adler University
Bryana Gadis Jones, Adler University
Abby Hodges, University of Denver
Jennifer Hodnett, University of South Florida
Courtney Mauzy, University of Georgia
Jessica Owen, The Chicago School of
Alexandra Page, Adler University
Taylor Williams, Mercer University

Representative Home Graduate Programs of Previous Interns

Adler University (Clinical)
Antioch University Seattle (Clinical)
Argosy University-Atlanta (Clinical)
Auburn University (Clinical)
Ball State University (School)
Binghamton University- SUNY (Clinical)
Case Western Reserve University (Clinical)
Fielding Graduate University (Clinical)
Fordham University (School)
Georgia State University (Clinical, Neuropsychology, & School)
Indiana State University (School)
Louisiana State University (School)
Louisiana State University (Clinical)
McGill University (School)
Mercer University (Clinical)
Michigan State University (School)
Mississippi State University (School)
Nova Southeastern University (Clinical/School)
Oklahoma State University (School)
Palo Alto University (Clinical)
Philadelphia College of Osteopathic Medicine (School Psychology)
Rutgers University (School)
The Chicago School of Professional Psychology (Clinical)
University of Alabama (School)
University of Albany – SUNY (Clinical)
University of Buffalo (Clinical & Counseling/School)
University of Cincinnati (School)
University of Denver (School)
University of Eastern Michigan
University of Georgia (School)
University of Houston (School)
University of Tennessee Knoxville
University of Illinois (School)
University of Indianapolis (Clinical)
University of Iowa (School)
University of Kentucky (School)
University of Manitoba (Clinical)
University of Massachusetts-Boston (School)
University of Missouri-Columbia (Counseling)
University of North Carolina-Chapel Hill (School)
University of North Carolina-Greensboro (Clinical)
University of Notre Dame (Clinical)
University of Oregon (School)
University of South Florida (School)
University of Southern Alabama (Clinical)
University of Southern Maine (School)
University of Southern Mississippi (School)
University of Texas-Austin (School)
University of Utah (School)
Seattle Pacific University (Clinical)
Spalding University (Clinicla)
Texas Tech (Clinical)
Virginia Tech (Clinical)
Xavier University (Clinical)
Vanderbilt University (Clinical)

Current Professional Activities & Locations (After Fellowship)	
ACTIVITY	**LOCATION**
• Assistant Professor	Duke
• Assistant Professor	Munroe Meyer Institute, University of Nebraska Medical Center
• Assistant Professor	Murray State University
• Assistant Professor	University of Alabama
• Assistant Professor of Pediatrics	University Wisconsin-Milwaukee, School of Medicine
• Assistant Professor of Pediatrics & Clinical Faculty(5)	Emory University School of Medicine / Marcus Autism Center
• Assistant Professor of Psychology	University of Wisconsin, Milwaukee
• Assistant Professor of Psychology	University of North Carolina, Wilmington
• Assistant Director of Clinical Services & Research	Trumpet Behavioral Health, San Jose, California
• Autism Program Director	Emerge Center For Communication, Education and Development, Baton Rouge, Louisiana
• Behavioral therapist	San Diego, California
• Child Psychologist	Hong Kong, China
• Pediatric Neuropsychologist	Integrated Center for Child Development, Boston, Massachusetts
• Private Practice (4)	Atlanta, Georgia
• Private Practice	Greensboro, NC
• Private Practice	Harrisonburg, Virginia
• Private Practice	Long Island, New York
• Private Practice	Louisville, Kentucky
• Private Practice	New Orleans, Louisiana
• Private Practice	Seattle, Washington
• School Psychologist	Durham, North Carolina
• Staff Psychologist (4)	Children’s Healthcare of Atlanta, Atlanta Georgia
• Staff Psychologist (2)	Cincinnati Children’s Hospital, Developmental & Behavioral Pediatrics
• Staff Psychologist	Boston Children's/ Harvard Medical
• Staff Psychologist	The Kelly O'Leary Center for Autism Spectrum Disorders, Cincinnati, Ohio
• Staff Psychologist (2)	Kenney Krieger

INTERNSHIP SELECTION AND APPLICATION PROCESS

Required Doctoral Preparation and Experiences

We are interested in highly qualified applicants who have a demonstrated commitment to clinical and research interests relevant to work with children with pediatric populations. Applicants must be enrolled in a doctoral psychology program (School and Clinical Psychology preferred, Counseling Psychology considered) at a regionally accredited institution of higher education and must have completed at least three years equivalent of full-time graduate-level study by the start of the internship. In addition, applicants must have the approval of their graduate program Director of Clinical Training, and have the completed at least 500* hours of practicum work at the time of application, and they must have a dissertation/capstone project proposal accepted by their graduate faculty to the start of internship. Our internship follows the selection guidelines and procedure of the Association of Psychology Postdoctoral and Internship Center (APPIC), and thus application materials are not accepted directly by the program. In the APPIC match process, successful candidates will match with one Track, although they may list multiple Tracks on their match rank-order list.

Successful candidates on the Treatment Track, Feeding Track, and Severe Behaviors Track will have a strong background in behavioral theory and treatment, and/or other significant clinical experience with individuals with developmental disabilities. Successful candidates on the Neurodevelopmental Assessment and Early Intervention Track will have considerable standardized assessment experience, including some experience with autism or other developmental disabilities. Successful candidates for the Behavioral Mental Health Track will have significant experience using evidence based treatments within individual therapy. Candidates to the School Consultation and Parent Training Track must experience in schools and have a BCBA.

Interns must come from programs accredited by the APA or the Canadian Psychological Association (CPA). Foreign nationals are encouraged to apply and must arrange on their own any work visa required to hold a paid trainee position for the duration of the internship. We welcome applications from both PhD and PsyD programs.

* We understand that due to COVID-19, some applicants many likely have fewer hours and will allow for this change.

Application Materials and Deadline

All applicants to the Internship program are managed via the APPIC application and match process. In accordance with their guidelines, candidates must submit the following:

1. A complete APPIC Application for Psychology Internship (APPI), curriculum vitae, official transcripts of all graduate coursework, and letters of recommendation

written by three professors or work supervisors must be uploaded to the application portal.

2. Within your cover letter, **please indicate your interest in specific Tracks. The most up-to-date listing of Tracks and positions will be available on the APPIC website.**
3. The Deadline for receipt of all application materials is **November 1st**. Qualified applications will be reviewed and interview notifications will be issued by the first Monday in December.

Interviews

Candidates are required to complete an interview day, which will be scheduled on one of 4 days in December and/or January. Candidates will be notified of the invitation to interview by the first Monday in December. Please see the APPIC website for updated interview information. Applicants typically participate in a tour of the site, general information session with the Training Director, and multiple interviews (approximately 30 minutes in length). Interviews often include asking candidates behaviorally based questions about previous experiences and cases. If you need accommodations to participate in interviews, please feel free to contact the Internship Training Director.

Match and Notification of Application Status

Following the interviews, internship faculty participants in the selection process meet to establish a ranking of applicants for each track. This ranking determines the applicant order that is sent to the APPIC Internship Matching Program for the computer match process. The internship program conforms to all APPIC selection policies (please see the APPIC web site at www.appic.org). The internship program agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking related information from any intern applicant.

Notice of acceptance into the Internship program will be extended via the computer matching service and a subsequent phone call. The program emails appointment agreements to all matched applicants within seven days of receipt of the match results. These agreements include confirmation of the conditions of the appointment and are copied to the applicants' Directors of Clinical Training.

Start Date

The Internship program begins the first week of July. Alternate starting dates are not negotiable.

Emory Equal Opportunity/Affirmative Action Statement

Emory University is dedicated to providing equal opportunities and equal access to all individuals regardless of race, color, religion, ethnic or national origin, gender, genetic

information, age, disability, sexual orientation, gender identity, gender expression, and veteran's status. Emory University does not discriminate in admissions, educational programs, or employment on the basis of any factor stated above or prohibited under applicable law. Students, faculty, and staff are assured of participation in university programs and in the use of facilities without such discrimination. Emory University complies with Executive Order 11246, as amended, Section 503 of the Rehabilitation Act of 1973, the Vietnam Era Veteran's Readjustment Assistance Act, and applicable executive orders, federal and state regulations regarding nondiscrimination, equal opportunity, and affirmative action. Emory University is committed to achieving a diverse workforce through application of its affirmative action, equal opportunity, and nondiscrimination policy in all aspects of employment including recruitment, hiring, promotions, transfers, discipline, terminations, wage and salary administration, benefits, and training. Inquiries regarding this policy should be directed to the Emory University Department of Equity and Inclusion, 201 Dowman Drive, Administration Building, Atlanta, GA 30322. Telephone: 404-727-9867 (V) | 404-712-2049 (TDD).

Employment Requirement

Interns are subject to Children's Healthcare of Atlanta pre-employment screening which includes (Policy 9.06):

1. Passing a drug screen including nicotine (30 days without use) and marijuana.
2. Proof for vaccinations and titres for MMR, varicella, Tdap, hepatitis B, COVID-19, and annual influenza vaccine. Necessary immunizations will be provided. Work cannot begin until vaccinations are complete.
3. Documented negative Tuberculosis (TB) blood test within the last twelve months or complete a TB blood test.
4. Pre-employment health screening to ensure employee is capable of meeting physical demands of their job description, including lifting 50 pounds.
5. Passing a background check, including misdemeanors (some case-by-case exceptions allowed for misdemeanors, please consult ahead of time).
6. Proof of eligibility to work in the United States.

COVID-19 Related Information

Telehealth

The majority of work is conducted in-person at Children's Healthcare of Atlanta. However, some assessment and intervention work is currently allowed to occur via telehealth. Interns will be provided with a didactic on the provision of services via telehealth early on in year. All telehealth Interns are responsible for following all HIPPA guidelines while conducting telehealth and should ensure they are in an appropriately private and professional location when providing services.

Vaccinations

Emory University requires all students, faculty, and staff to be vaccinated and boosted against COVID-19, with exceptions only for those with approved medical or religious exemptions.

Approved COVID-19 vaccination exemptions will be extended for the COVID-19 booster; there is no need to reapply if you have already received an approved exemption (see more exemption information below).

- **COVID-19 Primary Series:** Faculty and staff members will need to upload their COVID-19 vaccination documentation via the HOME employee portal. Please review documentation instructions here.
- **COVID-19 Booster:** All faculty and staff can complete an online form attesting to their booster status by following this link.*

Faculty, staff, and students can request an exemption from the COVID-19 vaccine primary series or the COVID-19 booster for medical or religious reasons only. Approved COVID-19 exemptions for the primary series will be extended for the booster; there is no need to reapply if you have already received an approved exemption.

Financial Support & Fringe Benefits

The Marcus Autism Center provides financial remuneration to interns. The salary for interns is expected to be $35,000; this is currently under administrative and budgetary review. Interns receive 15 days of Paid Time Off (vacation and sick days; additional days may be available for COVID related illness), 5 days of Professional Development leave, 11 holidays (Independence Day, Labor Day, Thanksgiving Day, day after Thanksgiving, Christmas Eve, Christmas, New Year's Eve Day, New Year's Day, Martin Luther King, Jr. Day, Memorial Day, Juneteenth), and bereavement time. In addition, interns receive $1100 for professional development activities and up to $5000 tuition reimbursement at their home institution (dependent on continued budgetary support).

ATLANTA, GEORGIA

Atlanta is one of the most dynamic and intriguing cities in the United States, and yet she successfully retains her historic charm and hospitality. This continually evolving metropolis is currently home to well over four million people of great ethnic and cultural diversity. As a developing city, Atlanta has an expanding job market, encompassing the most current avenues of business, technology, and health care. Academic opportunities, associated with Atlanta's prestigious colleges and universities, are abundant. Air travel is made easy by hubs for Delta Airlines and Southwest Airlines at Atlanta's Jackson-Hartsfield International Airport.

In terms of entertainment, Atlanta accommodates a wide range of interests. Historic sites include the birthplace of and national monument for Martin Luther King Jr., the Margaret Mitchell House, the Jimmy Carter Presidential Library, and area Civil War battlefields. Cultural institutions are as varied as a the Fox Theater, Atlanta Ballet, Atlanta Symphony Orchestra, High Museum of Art, and the Verizon, Lakewood and Chastain Amphitheaters. Atlanta's sports and recreational activities easily rival that of any city. Sports teams include the *Falcons* (football), the *Braves* (baseball), the *Dream (*women's basketball), the *Atlanta United FC* (men's soccer) and the *Hawks* (men's basketball). Hiking, biking, walking, rollerblading, golfing and boating can be found in Stone Mountain Park, Piedmont Park as well as many of the other area parks and gardens. Atlanta Motor Speedway and Road Atlanta are hosts to yearly stock car races. Six Flags over Georgia, the World of Coca-Cola, the Georgia Aquarium, The Center for Civil and Human Right, Georgia History Center, Atlanta Botanical Garden, High Museum of Art, and Zoo Atlanta, and high profile shopping centers of the South are also popular attractions. Atlanta also offers a fantastic assortment of nightlife activities including bars, dance clubs, jazz clubs, and restaurants of every theme imaginable. Finally, Atlanta is located 4 hours from Savannah, among other historic southern cities, allowing for weekend trips to revisit the charm of the Old South or the beaches of the Atlantic Ocean. The overwhelming number of opportunities, whether business or pleasure, combine to make Atlanta a city of energy and excitement.

Questions may be addressed to:

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