Changes in Daily Behaviors and Cognitions During the COVID-19 Pandemic: Associations With Suicide Crisis Syndrome and Suicidal Ideation
Megan L. Rogers et al.

Rogers and colleagues examined changes in the daily behaviors and cognitions of individuals with symptoms of suicide crisis syndrome (SCS) and/or suicidal ideation after the implementation of physical/social distancing mandates during the COVID-19 pandemic in 10 countries. Results indicated that individuals with more severe SCS symptoms had the largest changes in behaviors and cognitions, though this effect was not replicated across all countries. Results also indicated interactions between time, SCS, and suicidal ideation in predicting behaviors (outdoor and social engagements) and cognitions (thoughts about health, finances, and living situation). These findings highlight the potential for mutually exacerbating influences of routine disruptions and suicide risk and the importance of examining such influences cross-culturally.

ParTy 'n' Play: Associations Between Sex-Related Substance Use and the Disinhibited Externalizing Spectrum Among Gay and Bisexual Men
Craig Rodriguez-Seijas, Brooke G. Rogers, Audrey Harkness, Steve A. Safren, and John E. Pachankis

Rodriguez-Seijas and colleagues examined the associations between the disinhibited externalizing spectrum of psychopathology and several domains of sex-related substance use (i.e., heavy drinking, poppers [alkyl nitrite], cannabis, cocaine, and methamphetamine) in gay and bisexual men. Disinhibited externalizing was associated with self-reports of sex-related cannabis and methamphetamine use (vs. non-use) and with more frequent sex-related alcohol and cocaine use. However, results suggested few and weak associations between the disinhibited externalizing spectrum and overall sex-related substance use, except for methamphetamine use (which very few participants reported). The authors discuss future directions for research on sexual behavior and substance use grounded in the specific sociocultural context of sexual-minority men.
Reforming Clinical Psychological Science Training: The Importance of Collaborative Decision-Making With Trainees

Dylan G. Gee and Alexander J. Shackman

Gee and Shackman consider Palitsky and colleagues’ (2022) key suggestions as applicable to the entire sequence of clinical training, including doctoral studies that occur prior to internship. Gee and Shackman suggest that although there is cause for cautious optimism, overcoming systemic barriers to reforming clinical psychological science training will require a coordinated, all-hands approach and a collaborative approach to policymaking.

Look What Appeared From Under the Rug: A Commentary on Palitsky et al. (2022)

Marc S. Atkins and Tara G. Mehta

Atkins and Mehta emphasize how Palitsky and colleagues (2022) shed light on inequities in clinical science training and the field’s inaction in solving them. They note that the original article demonstrates the importance of including interns’ perspectives in any efforts to change the field and address its inequities. Atkins and Mehta also expand upon some points of immediate action that Palitsky and colleagues propose and give examples from their own experience. They express hope that the original article becomes an impetus for graduate-training programs and internships to engage in discussion and change.

A Commentary on “Systemic Challenges in Health Service Psychology Internship Training: A Call to Action From Trainee Stakeholders”

Chardée A. Galán, Cassandra L. Boness, Irene Tung, Sarah L. Pedersen, and Neil P. Jones

Galán and colleagues examine the potential for translating the issues raised by Palitsky and colleagues (2022) into practice and the barriers to doing so, including constraints upon internship sites (e.g., funding: accreditation requirements). They recommend situating conversations regarding HSP-internship training within discussions about broader reforms of the HSP training model. Moreover, they suggest that any changes to training be data-driven, evidence-based, and considerate of diverse stakeholder perspectives, including trainees, trainers, organizations, and the people HSP serves.

Toward a Postdoctoral-Residency Training Model

Kelly A. Knowles, Rebecca C. Cox, and Bunmi O. Olatunji

Knowles and colleagues support Palitsky and colleagues’ (2022) suggestions but argue that if institutions variably “pick and choose” which suggestions to adopt, inequities in training will likely persist. Instead, the authors advocate for a universal shift from the current predoctoral internship model to a postdoctoral model, akin to medical residency. Knowles and colleagues suggest that a postdoctoral-residency training model would directly address the problems that underpin many of the concerns raised by Palitsky and colleagues.

Inclusion of Trainee Stakeholders Is Necessary for Effective Change in Health-Service-Psychology Internship Training

R. Palitsky et al.
In a recent article (Palitsky et al., 2022), 23 trainees across different sites and specializations used lessons learned from COVID-19 as a call to action in health-service-psychology (HSP) training. The authors described pressing issues in the HSP internship from the perspective of interns and sought to initiate a dialogue that would include trainees in bringing about concrete changes and addressing inequities in clinical training. This article generated several commentaries and actionable recommendations. Here, the authors respond to these commentaries and seek to move the conversation forward. They note that two themes cut across commentaries: the impetus to gather novel data on training (the “need to know”) and the importance of taking action (the “need to act”). Palitsky and colleagues emphasize that in new efforts to gather data and take policy-level action involving HSP training, the inclusion of trainee stakeholders (as well as others involved) is a crucial ingredient for sustainable and equitable change.

The commentaries below respond to the 2022 article by Palitsky et al.

**Adolescents’ Sexual Orientation and Behavioral and Neural Reactivity to Peer Acceptance and Rejection: The Moderating Role of Family Support**

*Kirsty A. Clark et al.

Sexual-minority adolescents may display distinct behavioral and neural reactions to peer acceptance and rejection, this study suggests. Clark and colleagues examined associations among sexual orientation and behavioral and neural reactivity to peer feedback and the moderating role of family support. Adolescents completed a social-interaction task, in which they voted to accept/reject peers, and they also received peer acceptance/rejection feedback. While participants completed the task, the researchers recorded electroencephalogram data. Compared with heterosexual adolescents, sexual-minority adolescents engaged in more behavioral efforts to ingratiate after peer rejection and demonstrated more blunted neural reactivity to peer acceptance when they had low (but not medium or high) levels of family support.

**Daily Emotion Regulation in Major Depression and Borderline Personality Disorder**

*Ulrike Zetsche et al.

Zetsche and colleagues examined how individuals with major depressive disorder (MDD) or borderline personality disorder (BPD) might regulate their emotions differently than healthy individuals. Using a 7-day experience sampling assessment, the researchers assessed participants’ use of six regulation strategies and the strategies’ effectiveness. Compared to healthy individuals, participants with MDD or BPD employed rumination and suppression more often and acceptance less often. Participants with MDD ruminated more often than those with BPD. Expressive suppression and rumination negatively affected subsequent emotions in all groups. However, when participants with MDD or BPD selected adaptive regulation strategies, such as accepting their feelings or distracting themselves, they were able to benefit.