



Division 12

# CLINICAL SCIENCE

Society for the Science of Clinical Psychology  
Section III of the Division of Clinical Psychology of  
the American Psychological Association



*Developing clinical psychology as an experimental-behavioral science*

## Newsletter

Winter 2020: Volume 24, Issue 1

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Articles published in *Clinical Science* represent the views of the authors and not necessarily those of the Society for a Science of Clinical Psychology, the Society of Clinical Psychology, or the American Psychological Association. Submissions representing differing views, comments, and letters to the editor are welcome.

# PRESIDENTIAL COLUMN

**Joanne Davila, Ph.D.**  
Stony Brook University



Let me begin my first Presidential column by saying what an honor it is to serve in this role, and by thanking all those who have come before me. Most recently, our Past-President Carolyn Becker was a strong and effective leader, and I'm glad to have her continued support in this coming year. Thank you also to those who have completed their

Board service to SSCP – Past-President Dean McKay, Member-at-Large Kate Wolitzky-Taylor, Student Representative Joya Hampton, Post-doc Representative Rosanna Breaux, Convention Coordinator Tom Olino, and Newsletter Editor Andrea Niles. And, of course, welcome to those who are now beginning their positions with SSCP – President-Elect Cindy McGeary, Member-at-Large Michael Wheaton, Student Representative Alexandra Klein, Post-doc Representative Amy Stewart, Convention Coordinator Rosanna Breaux, and Newsletter Editor Jessica Hamilton. I so appreciate your willingness to serve!

I'd also like to take the opportunity to briefly discuss the goals I intend to pursue this year.

The first, naturally, is to continue to uphold our focus on science. As noted on our website, SSCP was formed to “affirm and continue to promote the integration of the scientist and the practitioner in training, research, and applied endeavors.” Although we have come a long way since the organization was formed in 1966, the need to continue to advocate for science remains. Indeed, we live in a world where some key policy makers in psychology – and in the country – do not fully see the value of science. Clearly, our work to promote a scientific approach must continue.

Fortunately, we had a very successful membership drive this past year, so there are more of us to advance our goals. Thanks to all of you who

renewed your membership, and welcome to all of our new members!

For the benefit of all of you, and new members in particular, let me tell you about some of the things SSCP is continuing to do to promote a scientific approach. At the organizational level, we provide:

- **Educational resources for psychologists** – for example, through our Virtual Clinical Lunches, our Translating Science to Practice series, and our convention programming at APS.
- **Educational resources for the public** – through our hosting of the CAAPS Expert Media Panel information.
- **Information on non-scientific practices** – through our Continuing Education initiative that identifies scientifically egregious CE offerings.
- **Rewards to our members for their contributions to a scientific approach to clinical psychology** – through the many awards we give to individuals at all stages in training and careers.
- **“Gathering places” where we can share ideas** – through our listserv and our new Clinical Psychological Science SIG at ABCT.

You can learn more about all of these activities on our webpage, which we're in the process of updating to better reflect all that SSCP is doing. So continue to check in to see our progress.

Let me elaborate on the new Clinical Psychological Science SIG at ABCT, as it is one of the developments I'm most excited about. Last year, ABCT gave us permission to revive the previous “Science and Pseudoscience” SIG and to rename it the Clinical Psychological Science SIG. They required us to have 20 members in attendance at the SIG meeting in order for the SIG to become permanent. Well, we easily surpassed that requirement, and we're now an official SIG, chaired by Nick Perry and Diana Bennett. Furthermore, the SIG will be run in collaboration with the Academy of Psychological Clinical Science, providing an ABCT home to clinical scientists from both organizations (and ABCT members generally). Our first SIG meeting generated a number of exciting ideas for presentations and activities for next year's meeting. We'll be certain to let you know about them later this year once plans are finalized. And if you're interested in becoming

a SIG member and/or getting involved, please contact Nick (nicholas\_perry@brown.edu) or Diana (diana.bennett2@va.gov).

**“If we want to truly make an impact and reduce the burden of mental illness, we need to better engage with the people and communities we want to serve and understand their needs in context.”**

So, these are the things that SSCP is doing as an organization. There are things I think we all need to do as individuals as well to continue to promote a scientific approach. One is to think about how we conduct and disseminate science. I have been thinking about something that was discussed at the CAAPS meeting at ABCT this past November, which was also clearly articulated by Bethany Teachman in a November posting to the SSCP list-serv. It's not surprising, but it highlights one of the ways in which we are failing. Specifically, if we want to truly make an impact and reduce the burden of mental illness, we need to better engage with the people and communities we want to serve and understand their needs in context. Sounds obvious, but we are not successfully doing this. I encourage all of you to think about how you, personally, can conduct research, engage in prevention and intervention efforts, and generally promote science in a way that connects with and reaches those we most need to reach.

Another thing I think we all need to do as individuals is this. We need to ask ourselves if we are maximizing understanding of human behavior change when we interact with people who are less scientifically minded, or do we give in to the urge to just criticize? I want to encourage all of us to encourage others to be more scientific, or at least to understand science. I'll give a personal example. I know many people involved in various types of wellness-related activities for which data do not exist. I regularly take the opportunity to encourage, in a positive and supportive manner, their thinking about how to assess claims that are made (and the potential dangers of over-stated claims), why it's important to ask questions, what kinds of questions should be asked, and how it will actually help them and their cause to ask these questions and provide data. I've found the people I speak with to be generally receptive. Of course, not everyone will be, but this is another way we can continue to try to reach the people we need to reach.

The second goal that I intend to pursue this year is to promote collaboration with others to reach shared goals. I have served in numerous professional positions in various organizations including ABCT, CUDCP, the Academy (where I have been

the Co-Chair of the Collaboration and Partnerships Committee), PCSAS, and now SSCP. These organizations have a number of similar goals, but they often operate in isolation from one another. Of course, it's not a realistic (nor even useful) goal for total collaboration. Rather, I hope to identify specific endeavors for which collaborative efforts would be realistic and useful. The collaborative nature of the ABCT Clinical Psychological Science SIG is one example where two organizations (SSCP and the Academy) are working together to create a dedicated space for clinical science and conference programming directed specifically toward the needs of clinical scientists. Another arena ripe for collaboration is to combine our efforts to make sure clinical science is represented in the major organizations and leadership roles in psychology. SSCP has an “External Boards and Awards” committee whose mission it is to publicize and help elect clinical scientists to leadership positions. This past year, the committee worked actively on supporting Steve Hollon's bid for APA President, as well as Carolyn Becker's successful election to ABCT Representative-at-Large. In the coming year, I hope to work with individuals from other organizations who share similar goals for clinical science representation.

**“The entire field will benefit if we work together, collaboratively, to support and promote clinical science.”**

The third goal that I plan to pursue is to actively encourage service so that our shared goals can, indeed, be reached. Professional service is a key ingredient in the stability and success of our field. Although it's true that we're all busy, it's critical that we – and by that I mean you – get involved. As I mentioned earlier, I have been involved in many professional organizations, at many levels of leadership. Having the opportunity to not just help maintain our field, but contribute to its development, as well as shape the direction of clinical science training, has been deeply rewarding. I know that many of us who have served in leadership roles feel the same. However, as much as I enjoy being a leader and contributing to policy-making (and I hope to continue to do so), I also know that the field needs more people and new people to get involved. I hope that you will consider doing so. In the coming year, SSCP will be holding nominations for a President-Elect, a Member-at-Large, a Student Representative, and a Division 12 Representative. Please think about running for office. Contact me or anyone on the SSCP Board to talk about the organization and these roles. And do the same with other organizations. The entire field will benefit if we work together, collaboratively, to support and promote clinical science.

# ANNOUNCING THE INAUGURAL AWARD: Scott Lilienfeld Clinical Science Visionary Award

**The SSCP Board is delighted to announce that  
Scott Lilienfeld, Ph.D.  
is the inaugural winner of the  
Scott Lilienfeld Clinical Science Visionary Award!**

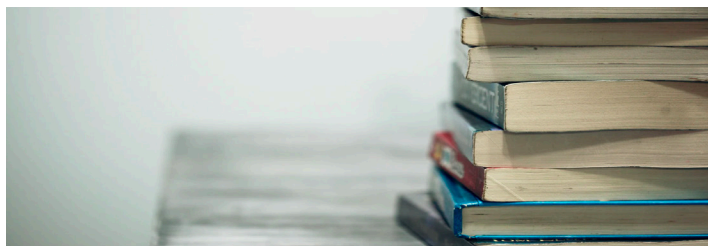


This annual award will be given to the SSCP member who has made distinguished conceptual contributions to the field of psychological clinical science. With this award, the Board hopes to create lasting recognition of the tremendous impact Scott Lilienfeld has had in advancing the quality of our collective thinking about a diverse range of topics. Scott Lilienfeld is Samuel Candler Dobbs Professor of Psychology at Emory University, and a past president of SSCP. He received his B.A. in Psychology from Cornell University in 1982 and his Ph.D. in Psychology (Clinical) from the University of Minnesota in 1990. He completed his clinical internship at Western Psychiatric Institute and Clinic in Pittsburgh, Pennsylvania from 1986-1987. His primary area of research is the study of personality and personality disorders, but many members of SSCP know him best for his diverse conceptual (and skeptical) writings – both formal and informal.

For those who are less familiar with his work, we provide a list of recent conceptual publications.

**Happy reading, SSCP members!**

Please see our Awards Section for the interview with Scott Lilienfeld (Page 13).



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# Clinician Perspective

## Recommendations for Building Evidence-Based Clinical Services in Community Settings

Lindsey D. Bruett, Ph.D., University of California, San Francisco



As an assistant clinical professor in the UCSF Eating Disorders Program and Child and Adolescent Services (CAS) at Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG), a significant part of my role has been to build and lead what is now the Eating Disorders Program at ZSFG. ZSFG is the public safety net hospital in San Francisco, and has part-

nered with UCSF since 1872. CAS provides mental health services to a diverse population of youth and families who are living in or near poverty. One hundred percent of our clients have Medi-Cal insurance (California's Medicaid health care program), and 70% of caregivers presenting to our clinic do not speak English as their primary language. I would be remiss not to mention that several CAS providers have provided excellent clinical service to youth with eating disorders at different points in history. However, staff turnover and a lack of established infrastructure for consistently using evidence-based protocols and training new providers made consistent care challenging.

My task: develop and lead a sustainable clinical program providing the same quality of evidence-based care for eating disorders available to families with private insurance. Today, our program accomplishes that goal, currently serving five times more patients than when I joined, and is continuing to grow each year. We offer evidence-based evaluation and treatment (e.g., Family Based Treatment, Cognitive Behavioral Therapy, Dialectical Behavior Therapy) for youth and young adult eating disorders as well as consultation to our community partners. We train mental health trainees and professionals to more effectively screen for eating disorders as well as to provide evidence-based care. Given that eating disorders continue to be under-detected and access to evidence-based treatment services is insufficient, particularly for individuals of color (e.g., Becker et al., 2003; Marques et al., 2011), increas-

ing provider competence to treat eating disorders is a key mission of our service.

Below, I outline the steps that have been crucial components in our program development process, which are applicable to building evidence-based services in any community mental health setting. The goal: make evidence-based treatment accessible to more families in a manner that is sustainable and acceptable to relevant stakeholders.

### **Do your homework, but don't reinvent the wheel.**

Chances are, clinical and research programs similar to the one you're aiming to form already exist. Get to know them, and understand the differences in context between those programs and your own. What is the institutional support like? Do you have a budget for hiring and/or training, or do you need to bootstrap using existing resources? How do the billing structures differ? How are the patient populations similar or different? Holding a dual role as an attending psychologist on the UCSF Eating Disorders program led by Dr. Daniel Le Grange, and leading the Eating Disorders Program at ZSFG, understanding an effective framework for building a new evidence-based treatment service was relatively seamless. Our UCSF team has been providing evidence-based assessment and treatment for long before I came on the scene, and using many of the same protocols at ZSFG was a boon to our new program. For instance, unstructured clinical evaluations were replaced with a battery of evidence-based semi-structured interviews and self- and caregiver-report measures (repeated at set timepoints to monitor treatment progress) for every patient presenting to our service, ensuring that we are systematically arriving at appropriate diagnoses and, when families consent to research, utilizing our data to learn more about eating disorders and related psychopathology in our clinic population.

### **Step back and observe before diving in.**

When I was new in my role, I quickly learned that the most effective approach to making change was to take it slow – focusing first on intimately understanding the how and why of existing practices. Though my job at ZSFG is primarily focused on

clinic administration and training at this point, it was crucial for me to start by carrying my own caseload of patients alongside my colleagues. I needed to get to know a cross-section of the families in our program at a deeper level than I can as a supervisor. I needed to experience, not just observe, the ins and outs of operating within our Medi-Cal system of documentation and billing. Perhaps most importantly, I needed my new colleagues to be able to trust that my expertise was relevant to the work that they were already doing.

### **Get to know your stakeholders.**

A healthy clinical service needs a steady flow of referrals. In our service, referrals come from pediatricians practicing at ZSFG, UCSF more broadly, and community clinics, as well as mental health providers in the community. Most providers are more likely to refer to clinicians they know and trust. In my role, I prioritize getting to know providers outside of our clinic, and the organizations in which they work. Sometimes it's as simple as getting together for coffee or making a visit to their clinical setting; I also offer free trainings in eating disorder screening to interested clinics. Not only does this help potential referring providers understand what their clients will experience if they refer to us, it aligns with my value of increasing detection and treatment of eating disorders among underserved populations.

### **Integrate with training programs when possible.**

Training new mental health providers is my favorite part of my job. I am fortunate that ZSFG has a robust psychology training program, the APA-accredited UCSF Child and Adolescent Services Multicultural Clinical Training Program (MCTP) at ZSFG, among other excellent training programs in related mental health disciplines. The program's training director, Dr. Barbara Stuart, as well as faculty on the UCSF Eating Disorders team, have been tremendously supportive in increasing trainee involvement in our Eating Disorders Program at ZSFG. Over the past several years, we have gone from supporting interested trainees to see 1-2 supervised eating disorders cases to creating a specialized training track in eating disorders and adolescent mental health, now in its inaugural year. Through the Adolescent Mental Health Track, psychology interns receive specialized training in evidence-based outpatient assessment and treatment of eating disorders and participate as active members of our multidisciplinary inpatient medical stabilization team, among other opportunities. This training track has facilitated 5x growth in clinical capacity for our

Eating Disorders Program at ZSFG – not only are interns trained and supervised to provide high quality direct treatment, but annual trainings organized for trainees mean more built-in opportunities for interested clinic staff to gain expertise in working with this population.

### **Build on existing expertise.**

Rather than hiring new staff and faculty, which would require significant institutional support, our program has been able to grow by offering training and ongoing supervision to interested staff and faculty already providing mental health treatment to children and adolescents in our clinic. These individuals bring their expertise in related areas, such as treating anxiety, depression, and trauma, and they are already experts in operating within our clinic and hospital context. Further, availability of professional development opportunities is often cited by our faculty and staff as a key ingredient in their job satisfaction.

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**@SSCP\_Tweets**

Direct message or tweet at us and let us share your news and achievements in clinical science!



# Early Career Perspective

## Behind the CV and Smiles: Adventures in the Winding Path of an Early Career Faculty Member

Sophia (Sophie) Choukas-Bradley, Ph.D. University of Pittsburgh



During my post-doctoral fellowship at Western Psychiatric Institute and Clinic, my colleagues and I started a journal club. We didn't discuss the open science movement or critique the methodology of peers' studies. Rather, we read aloud and discussed our own journal articles. And by "journal," I mean our high school diaries.<sup>1</sup>

As an intern, postdoc, and faculty member in my early 30s, I would read and re-read Paul Silvia's *How to Write a Lot*. Years earlier, as an angsty teen diary-writer, I needed no advice on the topic. I wrote more than 100 dissertations' worth of text about my own adolescent experiences as I lived them.

Now, as an assistant professor studying adolescence, those diary pages continue to fill me with empathy for teens and—yes—research ideas.

I could tell my story as a linear journey: I declared a Psychology major at Brown University, accumulated research experiences across multiple labs, and conducted an honors thesis at the intersection of research and clinical practice. I earned a Ph.D. in clinical psychology at UNC Chapel Hill and completed my internship and post-doc at Western Psychiatric Institute and Clinic (WPIC), before

obtaining a tenure-track position as an assistant professor of psychology at the University of Pittsburgh. But like so many people in our field, I benefited from a series of serendipitous (some would say "random") events that shaped my career path, with failures and set-backs that were as important as the successes.<sup>2</sup>

Like many undergraduates, I planned to be a therapist. I stumbled into my first psychology research job after meeting a researcher through tutoring his niece. My path to an honors thesis was also random: Searching for clinical training experiences at a university that doesn't

have a clinical psychology program, I was referred to the lab of Jack Wright, a social psychologist studying children's behavioral changes during residential treatment. My work with Jack fueled my drive to pursue a research career. But following failed attempts to obtain a post-baccalaureate research position in a psychology lab, I accepted a position at an education non-profit. I loved this job with its 9 to 5 schedule and Keurig machine. Yet as I spent my days analyzing adolescents' algebra performance, I knew I wanted to build a research career focused on gender, sexuality, and interpersonal relationships in adolescence. As a grad student at UNC, I was very fortunate to work with Mitch Prinstein.<sup>3</sup> With his incredible mentorship, as well as his connecting me to researchers across multiple fields, I was able to develop the skills and CV I would need to later be competitive for faculty jobs. But in what Mitch jokingly called "the curse," my

<sup>1</sup> This brilliant journal club was created by the editor of this newsletter, Jess Hamilton.

<sup>2</sup> Google "CV of failures" to learn about other professors' imperfect career paths.

<sup>3</sup> In case you've missed it, see: <http://mitch.web.unc.edu/professional-development/>

publications were repeatedly rejected until my fourth year of grad school, and my NIH NRSA (F31) was administratively withdrawn.<sup>4</sup> I remained committed to research, and I also discovered a passion for teaching and mentoring. My internship and post-doc at WPIC—while invaluable—also confirmed that I wanted a career that would more closely intertwine research, teaching, and mentorship (with the not-insignificant bonus of a hard money salary).<sup>5</sup>

I applied broadly to tenure-track psychology positions during my first year as a post-doc in 2016. Like many students, I went into the search believing life might be less stressful at a liberal arts college or R2 university, as compared to an R1 university.<sup>6</sup> During that year of working in a psychiatry department while applying to a broad range of psychology departments, two clear lessons arose for me, which have been further reinforced in my junior faculty years (see box #1).

I began my position as an Assistant Professor of Psychology at Pitt in 2017. In my Teen and Young Adult (TAYA) Lab, my research projects are the academic mirror of my adolescent diary pages. It's a remarkable privilege to be able to conduct research, writing, and teaching on these topics I've been passionate about for 20 years. And with the flexibility and excitement of an academic job comes the risk of becoming overwhelmed. I've learned some important lessons about how to intentionally spend my time (see box #2; also see, Brooke Ammerman's column in the Fall 2019 SSCP newsletter, Lessons Learned in How to Intentionally Spend Your Time).

My research currently focuses on interpersonal and sociocultural influences on adolescent body image, sexuality, and mental health. Much of my work focuses on a phenomenon that didn't exist until I was out of high school: social media use. I'm fascinated by how adolescents navigate this

## Box 1. Lessons Learned While Applying to Different Kinds of Faculty Jobs

### Lesson #1: R1 tenure-track jobs are not inherently more stressful than other types of faculty jobs.

Many people believe R1 tenure-track jobs are inherently more stressful than other types of faculty jobs. I don't agree. Each job has pros and cons that may be more or less important to each individual psychologist. For example:

- R1 jobs often have more intense research standards for tenure as compared to R2 positions, but they also provide greater access to resources (e.g., the start-up package I was offered at an R1 university was 7 times higher than what I was offered at an R2 university, allowing me to hire multiple staff to help run my lab).
- Psychology department jobs often don't carry the same pressure to get grants as med school-based jobs, and a guaranteed research salary can allow for more freedom of research topics, but psychology department jobs also often involve a lot more mentorship and service work.
- At liberal arts colleges, faculty don't mentor Ph.D. students, but they often mentor a high number of undergraduates (e.g., at a liberal arts college I applied to, one professor was mentoring 20 honors thesis projects).

For me, starting a lab in the context of an R1 psychology department has been the absolute dream job. It allows me to run my own lab and engage in teaching and mentoring of graduate and undergraduate students, with the financial resources and flexibility to conduct the research I'm passionate about. But for other people, a different environment might be a better fit.

### Lesson #2: Someone has to get these tenure-track jobs, and like with every career stage in psychology, there is randomness in how things shake out.

It's true that it can be hard to get a tenure-track job. But I've met many trainees who are extremely well-qualified for tenure-track jobs, yet who convince themselves they won't get the jobs (or that they wouldn't be happy if they did). Is this you? As I applied to jobs and then later saw job searches from the other side, I learned that (1) rejection can mean any number of things, and (2) there is no way to predict the outcome of your search. For each job, it depends on the pool of applicants, what the department is looking for (which may be esoteric and secret, but which might be exactly what you do!), and a constellation of random factors having to do with who's on the search committee and what mood they're in when they read your application. In 2016, there were jobs I applied to that I felt confident about, but I didn't even get a phone interview. Then there was Pitt, arguably the best R1 department I applied to in 2016, and I got the job (but only after they gave it to someone else first, who turned it down; again, google "CV of failures"!).

new world, in which one's experiences are shared not in angsty private journal entries but in curated public posts.

In the newest chapter of my winding career journey, I navigated a dual career job search with my partner (a story for another day), and in early 2020 I accepted a faculty position in the University of Delaware's clinical science program. I'll keep my website updated as I move the lab this summer. But don't forget, when you look at my website's CVs and smiles, you're not seeing the messier parts of my career path. For that, you'd have to read my journal.

### Box 2. What would you do with an extra 650 hours?

Whatever your current career stage, start a system that helps you track "saying no & saying yes." The demands on one's time are relentless in academia, but you have the power to say "no." And each time you say "yes" to something you don't want to do, you are implicitly saying "no" to something you do want to do.

**Imagine learning you could have an extra 650 hours. That's what my Google spreadsheet just told me.**

By the end of my first year as a faculty member, I was feeling burned out from trying to balance my personal life and professional demands. During my second year, I decided to track everything I said no to: manuscript reviews, projects, phone calls, committees, meetings. I then forced myself to say no to everything I was asked to do, unless I could answer "yes" to these questions:

1. Will saying yes lead to meaningful and important benefits to me (or my mentees or close colleagues), personally or professionally?
2. Is saying yes to this worth saying no to something else (personal or professional)?

I shared my Google spreadsheet with both my partner and a research colleague to hold myself accountable. I estimated for each "no" how many hours I would have spent if I had said "yes." It was highly reinforcing to watch the running total climb. The 2019 grand total was exactly 650 hours. That's 12.5 hours/week of things I said "no" to.

**In turn, I was able to say "yes" to so many things that were more important to me.**

<sup>4</sup> Before you submit a fellowship application, read the fine print of its requirements! For an NRSA application, make sure your topic will fit with an institute currently accepting applications. For an NSF application, don't list "clinical science" as your field (<https://www.psychologicalscience.org/policy/important-information-from-aps-for-clinical-science-students-applying-for-the-nsf-grfp.html>).

<sup>5</sup> "Hard-money" refers to a salary that is based on teaching commitments or other guaranteed university-based funding, while a "soft-money" salary is funded by a researcher's own grants (common in med schools).

<sup>6</sup> Research 1 (R1) universities are those designated by the Carnegie Classification of Institutions of Higher Education as engaging in the highest levels of research activity. Research 2 (R2 universities) are those designated as high research activity. For example, UNC - Chapel Hill is designated as an R1 university, while UNC Charlotte, Greensboro, and Wilmington are all designated as R2.

### Recommended Reading for Graduate Students & Early Career Faculty

1. Paul Silvia's How to Write a Lot
2. Cal Newport's Deep Work
3. David Allen's Getting Things Done: The Art of Stress-Free Productivity
4. Linda Babcock's and Sara Laschever's Ask for It: How Women Can Use the Power of Negotiation to Get What They Really Want (recommended for people of all genders)
5. I Just Can't Say No Club: Why Women Get Saddled With Unrewarded Work—And How to Change That, by Linda Babcock, Brenda Peyser, Lise Vesterlund, and Laurie Weingart, forthcoming 2020
6. The Awesomest 7-Year Postdoc or: How I Learned to Stop Worrying and Love the Tenure-Track Faculty Life, an article by Radhika Nagpal (2013): <https://blogs.scientificamerican.com/guest-blog/the-awesomest-7-year-postdoc-or-how-i-learned-to-stop-worrying-and-love-the-tenure-track-faculty-life/>



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# Student Perspective

## A Brief Clinical Psychology Grad School Field Guide: Lessons learned from the first one and a half years of graduate school

Evan Burdette, University of Miami



I am a second year graduate student in a Clinical Psychology Ph.D. program at the University of Miami (UM). If you're like me, you probably thought that the hardest part of grad school would be getting into grad school. There is an abundance of information passed around both formally and informally about gaining entrance into clinical psychology graduate programs (e.g., workshops, mock interviews, Mitch Prinstein's *Uncensored Advice for Applying to Graduate School in Clinical Psychology*). Though the graduate school admissions process can feel like a marathon, once you matriculate into a graduate program you will quickly realize that the race has just begun. While some information exists on how to succeed in grad school (here I'll nod again to Prinstein, 2012), the student perspective is rarely formally offered.

Here, I offer just that: one student's ( $n = 1$ ) reflections on lessons learned from the first 1.5 years of graduate school.

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### 1. Seek supplemental mentorship

This is not to say that your primary research mentor is not fantastic – I'm sure they are. However, a single perspective is simply not enough. Since my time as an undergrad RA and a post-bacc research assistant, I have benefitted from the guidance of multiple mentors. This additional mentorship can be sought formally through co-mentorship with additional faculty research advisors, through collaboration with other faculty in the department, master's and dissertation committees, practicum supervision, and classes. Forging these relationships is incredibly important for professional development. Many of these relationships will form naturally, but putting in the extra effort to solidify relationships with faculty will serve you well.

Peer mentorship is equally important. When I arrived at UM, I was my mentor's only student. For the first time in my young career in psychology, I found myself without an older lab-mate to guide me. Thankfully, I shared an office with a fifth year

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student who provided me with much-needed guidance for navigating my first year, including unwritten rules, things no one tells you about, and departmental gossip. Find your fifth year! Many programs have formal peer mentorship programs. For instance, UM has a peer mentorship program through the Psychology Graduate Students Organization. We also have a pyramid model for assessment supervision, where students are assigned an advanced assessment practicum student as a peer mentor. While these relationships can be very useful for formal training such as peer supervision, peer mentorship is equally important for informal guidance, and you should try to forge relationships with older students wherever you can.

### 2. Science is social

This brings me to my next point: science is social! Since my time as an undergraduate research assistant, the vast majority of my friends have been fellow researchers in my lab or department. This theme has continued for me in grad school, and I cannot stress its importance enough. There are no other friendships quite like those formed through comradery with fellow students in your program. You will likely find that the students in your program are among the best friends you've ever had. Do your best to be close with your fellow students. Help them with their stats homework, with their research projects, and by being a shoulder to cry on in times of need. It will pay off when you inevitably find yourself in need of support.

Get outside of your comfort zone at departmental parties. For many students, social interactions with faculty and even advanced graduate students can provoke intense anxiety. However, academic

relationships are often solidified in social settings. Chances are, if you have obtained admission into a graduate program, people in the department like you! They will like you more if you allow yourself to shine at these events. You will also find that when you do so, these events are much more enjoyable. Remember that peer and faculty mentors will become your future colleagues. You will almost certainly run into them in your future career, and you want them to be able to speak well of your undoubtedly wonderful personality.

### **3. Propose your thesis or dissertation before you collect your data**

If you are in a research-oriented program, you probably had three to four ideas for various research projects before you even began grad school. This can be an incredible productivity boost if these ideas involve secondary analysis of existing data. However, you may wish to collect your own data for some of these projects. If you are doing so for your master's thesis and you are in a program that requires a proposal meeting, do not collect your data before your proposal. You may be thinking that this is obvious. However, due to various reasons, you may find yourself in a position where you or your advisor will want to begin data collection as soon as possible. For me, this lesson was learned the hard way. In my first semester, I had a great idea for a study and my mentor was incredibly supportive of my desire to collect my own data. We decided that this project would become my master's thesis and began collecting data. When I later proposed my master's thesis, my committee had wonderful ideas for how I could make the project better that involved changing a few pieces of my study's design. I ended up with a better project because of it, but I was unable to use the data I had already collected for my thesis. That said, I now have two complete datasets to play with.

### **4. Graduate school is one big naturalistic exposure**

Ph.D. students, particularly those in psychology, are more anxious than most. A recent study found that nearly half of psychology graduate students experience clinically significant levels of anxiety, and more than one third of students experience clinically significant levels of both anxiety and depression (Rummell, 2015). Whether you fit this mold or not, experiencing some level of anxiety is an experience shared by all, and you will undoubtedly find yourself in some anxiety-inducing situations at some point in your time in graduate school. Think of this as a positive! As clinical scientists, we know that opposite action is the gold standard for treatment of anxiety, and you will find yourself in a number of situations that provide opportunities for naturalistic exposures.

First, you are going to make a ton of mistakes. You may be a bit of a perfectionist when you begin grad school, but these tendencies will likely fade to slightly-above-population-average levels throughout the years. You will hopefully learn to realize when something is "Good Enough to Move On" (GEtMO) and to triage tasks that require a large amount of effort, medium effort, and little effort. Second, you are going to experience a significant amount of rejection from funding agencies, journals, and other peer review processes. You will also receive considerable negative (or worse, ambiguous) feedback. This will come from your primary research mentor, your clinical supervisors, your master's and dissertation committees, reviewers, and even peers. This can be especially difficult for students to take, but you will likely habituate or find that your distress tolerance significantly increases over time. You will probably become a better scientist, clinician, and person because of this. Third, you will quickly learn that reassurance seeking is not an adaptive behavior in graduate school. Scientists are incredibly gifted critical thinkers, and when you ask your advisor if something is okay, they will almost certainly find something that could have been done better. This is useful for refining your research ideas and producing high-quality results, but you may find that your workload increases exponentially if you are someone who frequently seeks reassurance.

Finally, if you are providing evidence-based therapy, you will, at some point, find yourself in a position where you must ask a client to do something that you also find extremely anxiety-inducing. This might involve holding a rather large spider, exposing yourself to heights, licking a sponge that touched the bathroom floor, or some other terrifying or disgusting task. Further, you will need to do this with your client while conveying an air of confidence or nonchalance. It helps to practice beforehand.

### **5. Learn your own lessons**

In closing, a final caution. You will receive an overabundance of advice from other students, faculty, and from non-academics like family, friends, and even strangers. Take this column with a grain of salt! Make your own mistakes and learn from them! No amount of advice is as useful for learning as experience, and there is no real recipe for success.

#### **References**

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- Rummell, C. M. (2015). An exploratory study of psychology graduate student workload, health, and program satisfaction. *Professional Psychology: Research and Practice*, 46(6), 391.



32<sup>nd</sup> APS Annual Convention | Chicago, IL, USA | May 21-24, 2020

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**FRIDAY, May 22<sup>nd</sup> 2020**

**SSCP Presidential Address:**  
Joanne Davila, Ph.D.  
4:00 PM – 4:50 PM

**SSCP Distinguished Scientist  
Address:**  
Thomas Ollendick, Ph.D.  
5:00 PM – 5:50 PM

**SSCP Invited Symposium**

**Using clinical science to improve  
the assessment and treatment of  
underrepresented groups**

**Co-Chairs:** Derek M. Novacek, Ph.D.  
Joya N. Hampton-Anderson, Ph.D.

**Presenters:** Lauren R. Khazem, Ph.D.  
Craig Rodriguez-Seijas, Ph.D.  
Natalie N. Watson-Singleton, Ph.D.

**Discussant:** Rheeda L. Walker, Ph.D.

**FRIDAY, May 22<sup>nd</sup> 2020**  
Time TBA

**THANKS FOR JOINING US AT  
ABCT IN ATLANTA!**



Evan Kleiman, Ph.D.  
accepting the SSCP 2019  
Early Career Award!



**Attendees at the inaugural SSCP Clinical Psychological Science  
Sig meeting at ABCT! Thank you to all those who made this possible.**

**We cannot wait to see you for our second annual SIG meeting at  
ABCT in Philadelphia in 2020!**

# Awards & Recognition

## 2020 SSCP Scott Lilienfeld Clinical Science Visionary Award



### Scott Lilienfeld, Ph.D.

Samuel Candler Dobbs Professor of Psychology  
Emory University

Dr. Lilienfeld was born and raised in New York City. He received his B.A. in Psychology from Cornell University in 1982 and his Ph.D. in Psychology (Clinical) from the University of Minnesota in 1990. He completed his clinical internship at Western Psychiatric Institute and Clinic in Pittsburgh, Pennsylvania from 1986-1987. He was assistant professor in the Department of Psychology at State University of New York (SUNY) at Albany from 1990 to 1994, and has been a faculty member in the Department of Psychology at Emory since 1994. He is also a visiting fellow at the University of Melbourne in Australia. Dr. Lilienfeld is presently Samuel Candler Dobbs Professor of Psychology at Emory University. Dr. Lilienfeld is a past president of SSCP.

### What does it mean to you to be the inaugural winner of the Scott Lilienfeld Clinical Science Visionary Award?

I am deeply honored and deeply humbled to receive this award, which I very much hope to earn one day! I've actually never thought of myself as a visionary – just as a scholar who tries (often unsuccessfully...) to think deeply about conceptual issues in psychology and allied fields. As surprised and delighted I was to receive this wonderful award, I am even more pleased that SSCP has demonstrated the wisdom to recognize the value of conceptual work and theorizing. As Eiko Fried and others have recently observed, our field is beset by a theory crisis every bit as much as a methodology crisis. Paul Meehl, David Lykken, and many others made much the same point decades ago. In many psychological domains, including clinical science, we sorely need more powerful theories that will allow us to generate more informative predictions.

### What advice do you have for students and faculty who are pursuing training and careers in clinical science?

I am probably not the ideal person to ask, as I am a marked outlier in clinical science. I frankly doubt that I would be especially successful in today's academic environment, which typically values substantive specialization and grant funding, neither of which I have prioritized in my career. I am an unrepentant generalist, which places me in a marked minority of academicians in contemporary

clinical psychology. The best advice I can give to young scholars is to try to find a balance between specialization and generalization, between depth and breadth. The most successful scholars, in my view, are those who know enough about one or two substantive domains to become experts, but who also possess enough broad knowledge of psychology and allied fields (e.g., anthropology, neuroscience, statistics, philosophy of science, history, medicine) to be able to see the field from 30,000 feet. They have a wide enough perspective to perceive the interconnections among diverse substantive and methodological threads.

### What do you hope to see in the future of clinical science?

I hope to see a continuing tearing down of largely artificial institutional silos in our field. For example, I hope to see continued integration between such traditionally disparate fields as basic personality psychology and psychopathology, between social psychology and clinical psychology, and between basic personality psychology and neuroscience. I'd also like to see clinical science training and education begin to dissolve these barriers. In the domain of psychotherapy, I'd like to see our discipline transition from evidence-based practice, which has been an essential step in the right direction, toward science-based practice, which considers not merely scientific outcome evidence but also basic science evidence bearing on the intervention's theoretical rationale.

# Awards & Recognition

## 2020 SSCP Distinguished Scientist Award

### Thomas Ollendick, Ph.D.

Distinguished Professor in Clinical Psychology  
Director of the Child Study Center  
Virginia Polytechnic Institute and State University



clinical and research interests range from the study of diverse forms of child psychopathology to the assessment, treatment, and prevention of these child disorders from a social learning/social cognitive theory perspective. He has served as the mentor and dissertation advisor for 44 doctoral students – all since joining Virginia Tech in 1980.

Dr. Ollendick received an Honorary Doctorate from Stockholm University in 2011 and holds Honorary Adjunct Professor Positions at Roehampton University in London, Griffith University in Brisbane, Australia, and Sydney Institute of Technology in Sydney, Australia. He was awarded the Distinguished Research Contributions to the Field of Clinical Child Psychology in 2007 (APA), the Career/Lifetime Achievement Award from the Association for Behavioral and Cognitive Therapies in 2013, the Lifetime Achievement Award for Scientific Contributions from the Society of Clinical Psychology (APA) in 2017, the Aaron T. Beck Lifetime Career Award from the Academy of Cognitive Therapy (2019), and, most recently, the Lifetime Achievement Award from the Spanish Society for Child and Adolescent Clinical Psychology (2019).

Thomas H. Ollendick, Ph.D., is University Distinguished Professor in Clinical Psychology and Director of the Child Study Center at Virginia Polytechnic Institute and State University, Blacksburg, Virginia, USA. He is the author or co-author of 350+ research publications, 100+ book chapters, and 38 books. His recent books include the Oxford Handbook of Clinical Child and Adolescent Psychology, Innovations in CBT Treatment for Childhood Anxiety, OCD, and PTSD (Cambridge), and Emotion Regulation and Psychopathology in Children and Adolescents (Oxford). He is the past editor of the Journal of Clinical Child and Adolescent Psychology and Behavior Therapy, as well as founding and current Co-Editor of Clinical Child and Family Psychology Review.

He is Past-President of the Association for the Advancement of Behavior Therapy (1995), the Society of Clinical Psychology (1999), the Society of Clinical Child and Adolescent Psychology (2007), and the Society for the Science of Clinical Psychology (2010). The recipient of several NIMH grant awards, his

**Please join us for the  
SSCP Distinguished  
Scientist Lecture by  
Dr. Thomas Ollendick  
at the APS Convention!**

**Friday, May 22, 2020**

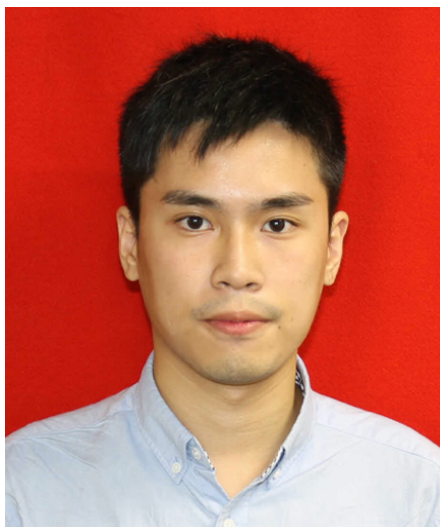
**5:00 PM – 5:50 PM**

**Location: TBD**

# Awards & Recognition

## Outstanding Student Researcher Award

### Tommy Ho-Yee Ng, M.Phil. Temple University



Tommy Ho-Yee Ng, M.Phil. is a sixth year Ph.D. student in Clinical Psychology with a Specialization in Neuroscience at Temple University under the supervision of Dr. Lauren Alloy. He earned a B.A. in Psychology from the University of California, Berkeley and a M.Phil. in Psychiatry from the University of Hong Kong (HKU). He is completing his clinical internship at NewYork-Presbyterian Hospital / Weill Cornell Medicine. Tommy's research is committed to improving our understanding of bipolar disorder and unipolar depression. His work is funded by grants from the American Psychological Foundation, the Council of Graduate Departments of Psychology, the American Psychological Association of Graduate Students, the National Institute of Mental Health, and the Sir Edward Youde Memorial Fund. Tommy is the recipient of a number of awards, such as the Early Graduate Student Researcher Award from the American Psychological Association, the President's Award from the Society Research in Psychopathology, and the Outstanding Student Researcher Award from SSCP.

#### 1. What are your research interests?

Bipolar disorder and unipolar depression are two of the most debilitating conditions in the world, according to the World Health Organization. Many patients do not respond to conventional treatments and remain symptomatic after years of treatment. Despite the great public health significance, major unanswered questions exist regarding their underlying mechanisms. Yet, understanding their pathophysiology is crucial for translating foundational knowledge to theoretically coherent interventions designed to prevent or treat these impairing conditions. My area of research is exciting to me because of its potential to lead to targeted prevention and treatment programs for those with or at risk for mood disorders and relieve their burden.

#### 2. Why is this area of research exciting to you?

Bipolar disorder and unipolar depression are two of the most debilitating conditions in the world, according to the World Health Organization. Many patients do not respond to conventional treatments and remain symptomatic after years of treatment. Despite the great public health significance, major unanswered questions exist regarding their underlying mechanisms. Yet, understanding their pathophysiology is crucial for translating foundational knowledge to theoretically coherent interventions designed to prevent or treat these impairing con-

ditions. My area of research is exciting to me because of its potential to lead to targeted prevention and treatment programs for those with or at risk for mood disorders and relieve their burden.

#### 3. Who are/have been your mentor(s) or scientific influences?

I am fortunate to have received mentorship from a group of inspiring scientists who also happen to be incredible human beings. This includes Dr. Sheri Johnson who helped me to discover my love of research; Dr. Ka Fai Chung who provided me with the freedom and encouragement to rigorously pursue important research questions; Dr. David Smith who has been extraordinarily generous with his time and instrumental in my learning of neuroimaging methods; and Dr. Lauren Alloy who has been unbelievably supportive and deeply invested in my growth in every way.

#### 4. What advice would you give to other students pursuing their graduate degree?

Do what you genuinely want to do, not what you think you should do. One of the most wonderful things about our profession is its wide range of career options. Find out what career path is the most suited and exciting to you as quickly as possible during graduate school and plan your time accordingly.

## Awards & Recognition

### Outstanding Student Teacher Award Announcement

## CONGRATULATIONS TO THE 2020 SSCP OUTSTANDING STUDENT TEACHER AWARD WINNERS!

Jennifer Gamarra, M.A.  
University of California, Los Angeles

Jessica Kansky, M.A.  
University of Virginia



**Stay tuned for our spring  
issue featuring our  
teacher award winners!**

### Accepting Applications for the SSCP Outstanding Student Clinician Award!

SSCP is accepting nominations for the Outstanding SSCP Student Clinician Award.

This award is intended to recognize outstanding graduate students who are providing exceptional contributions to the field of clinical psychology through their clinical work. SSCP encourages candidates from all underrepresented and minority groups to apply. Winners will be selected based upon his/her interest, dedication, and exceptional performance in clinical work (see below for examples). Selected students will be featured in the Outstanding SSCP Student section of the SSCP Newsletter and receive a \$100 monetary award.

**Applications must be received by March 1, 2020.**

Notification of awards will be made in April, 2020.

**Application Instructions:** Please upload a 500-word biography and CV at the following link:  
<https://forms.gle/CUEgCVWx8zwawjTH7>

**Please have your recommender upload your recommendation letter to the following link:**  
<https://forms.gle/hKytKHUFHaN8Qs3S7>

For more information regarding this award, please see email announcement on the SSCP student listserv.

## Updates and Resources

### Diversity Committee Updates

The SSCP Diversity Committee welcomes our new members! We are excited to continue our goals of increasing the diversity of SSCP membership and furthering the mission of clinical psychological science as it applies to diversity issues.

#### 2020 Diversity Board Members

Joya Hampton-Anderson, Emory University School of Medicine

Lauren Khazem, The University of Utah

Salome Wilfred, University of Missouri - Kansas City

Yara Mekawi, Emory University School of Medicine

Brandon Weiss, Georgia Southern University

Derek Novacek, University of California, Los Angeles

Jennifer Pearlstein, University of California, Berkeley

Ilana Gratch, Teachers College, Columbia University

Danielle McDuffie, The University of Alabama

Rebecca Revilla, The University of Alabama

### Professional Training and Employment Resource

**Faculty:** Looking for a Postdoc? Need a study coordinator? Taking a graduate student this year? Publicize and recruit on the SSCP Website!

Please email Rosanna Breau (rbreaux@vt.edu) with any information you would like included on the website.

**Students and Postdocs:** Check out the Professional Training and Employment page to find your next job! There are already over 50 faculty positions and 25 postdoctoral fellowships listed:

**View website here:** <https://societyforclinicalpsychology.wildapricot.org/page-18108>

### Virtual Clinical Lunch (VCL) Series

SSCP's Virtual Clinical Lunch offers an opportunity for the entire field to discuss clinical science research together. Programs in North America, Europe, and Australia are participating in the series, all watching the monthly talks as part of their programs' weekly colloquium or brown bag series.

**January:** Dr. Doug Mennin (Teachers College/Columbia): "An Affect Science Framework for Improving Treatment of Distress Disorders."

Link: <https://youtu.be/QPOrGnTx6xw>

**November:** Dr. Kate McLaughlin (Harvard University): "Neurodevelopmental Mechanisms Linking Childhood Adversity with Psychopathology"

Link: <https://youtu.be/n5hvdnR4xks>

**September:** Phil Kendall (Temple University): "Working with Anxious Youth: More action, less talk"

Link: <https://www.youtube.com/watch?v=lmadY->



### Congratulations to our 2019 Membership Drive Winners!

#### Student Winner:

Meghan Vinograd  
5 referrals

#### Student Runner-Up:

Angela Santee  
4 referrals

#### Professional Winner:

Annette LaGreca  
10 referrals

#### Professional Runner-Up:

Joye Anestis  
8 referrals



**Stay tuned for our 2020 Membership Drive to win free memberships and boost SSCP!!**

# Updates from Student Representatives

Alexandra Klein, M.A., Case Western Reserve University  
Ana Rabasco, M.A., Fordham University

As your student representatives, we would like to take this opportunity to update you on a couple opportunities and resources for our members.

## Outgoing SSCP Student Representative: Joya Hampton, Ph.D., Emory University

Thank you to Joya Hampton for serving as SSCP student representative over the past two years! It has been a pleasure to work with you and we have appreciated the dedication you have shown this organization. Hopefully we get the chance to work together in the future!

## Incoming SSCP Student Representative: Alexandra Klein, M.A., Case Western Reserve University

I graduated from the University of California, Berkeley with a B.A. in Psychology in 2015. Following graduation, I worked as a full-time Research Assistant at the VA Boston Healthcare System in the National Center for PTSD on a study examining trajectories of PTSD in Veterans who served in Iraq and Afghanistan under the supervision of Dr. Brian Marx. In 2017, I began graduate school at Case Western Reserve University in the PTSD Research and Treatment Program under the mentorship of Dr. Norah Feeny. Broadly, my research interests involve improving access to and efficacy of evidence-based interventions for PTSD. I am specifically interested in identifying novel bottom-up approaches to facilitate clinical decision making and dissemination and implementation of these interventions. I'm looking forward to my role as one of the SSCP student representatives and to moving the mission of SSCP forward!



**Upcoming Events and Initiatives: SSCP Feedback Survey 2020:** We want your input on how SSCP can improve for students in 2020! Please fill out the following (2 minute) survey with your feedback: <https://forms.gle/4fNAsuRs4dMWYQ7c6>

## Professional Resources

**SSCP Internship Directory** - The 9th edition of the Society for a Science of Clinical Psychology (SSCP)'s Directory of Training Opportunities for Clinical Psychology Interns is here. Results were compiled from clinical internship sites during the Summer of 2019. The Directory provides unique information not available elsewhere, including research opportunities and training in empirically supported interventions. As a student member of SSCP, you can download the internship directory at our website: <http://www.sscpweb.org/internship>

**SSCP Student Listserv**— Please email Evan Kleiman ([ekleiman@fas.harvard.edu](mailto:ekleiman@fas.harvard.edu)) to be added to the student listserv. This is a great resource of job, research, award, and training opportunities!

**SSCP Facebook Page** - One our goals for this year is to improve networking opportunities for students. Please utilize our Facebook page (<https://www.facebook.com/sscpstudent/>) to keep up-to-date with announcements and for a space to start a dialogue about clinical psychology in the news. Similarly, we are always looking for ways to improve our social media presence and our website - if this is something that interests you, please reach out!

**Professional Training and Employment:** Faculty positions and postdoctoral fellowships listed here: <https://societyforascienceofclinicalpsychology.wildapricot.org/page-18108>

## Contact Us!

We would love to hear from you with any suggestions, comments, questions, or concerns regarding SSCP student membership or resources for students, so feel free to email us!

Ali Klein: [abk67@case.edu](mailto:abk67@case.edu)  
Ana Rabasco: [arabasco1@fordham.edu](mailto:arabasco1@fordham.edu)