



Zuckerberg San Francisco General Hospital



Langley Porter Psychiatric Institute

2020-2021

University of California, San Francisco Clinical Psychology Training Program





CLINICAL PSYCHOLOGY TRAINING PROGRAM

The Faculty of the Department of Psychiatry of the University of California, San Francisco, affirms as one of its major priorities the training of women and minorities for academic careers as researchers and clinician-teachers. We are therefore actively seeking individuals who plan to undertake leadership roles in research and training in the mental health fields. Our faculty is explicitly committed to providing the mentorship and support necessary to facilitate successful entry into academic positions.

INTRODUCTION

The Clinical Psychology Training Program (CPTP) is dedicated to the training of clinical psychologists committed to an academic and/or research career with a strong record of both clinical and research experience. We are committed to preparing research oriented psychologists to work sensitively and competently with underserved populations including minorities, low income individuals, persons with severe and persistent mental illness, victims of violence, children, and the elderly. In addition to training in service delivery, the CTPT provides specialized research training in:

- ADHD/disruptive behavior disorders
- eating disorders
- juvenile justice and behavioral health
- neuropsychology
- post traumatic stress disorder
- substance use disorders
- violence and trauma in adults and children

A two-year Fellowship is comprised of:

- one year of general clinical psychology doctoral internship (APA accredited)
- one year of postdoctoral clinical and clinical research experience

This 2019 edition of the CPTP brochure is for the class entering the program on July 1, 2020 and ending on June 30, 2022.

Deadline for receipt of applications: Friday, November 1, 2019

PROGRAM ADMINISTRATION

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This brochure can be downloaded from:

<http://psych.ucsf.edu/cptp>

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PROGRAM DESCRIPTION

The University of California, San Francisco (UCSF) Clinical Psychology Training Program in the Department of Psychiatry offers a two-year fellowship opportunity within the scientist-practitioner model. The first year consists of an APA-accredited clinical internship followed by a one-year postdoctoral clinical and clinical research fellowship. Our Fellows are selected from applicants whose achievements reflect a strong commitment to pursue careers emphasizing research and training in academic/research settings, including those affiliated with health and mental health service systems. Over the last ten years, 90% of our graduates have obtained research or academic positions upon leaving our program.

Increasing the number of women and minorities in academic and research positions is one of our goals. During the last ten years, 77% of our Fellows have been women, and 44% have been minorities.

The internship year provides general training in clinical psychology with an opportunity to specialize in one of two cluster areas. Selected clinical training at an advanced level is provided during the second, postdoctoral year, in which there is an emphasis on clinical research within the area of specialization. The amount and distribution of clinical hours in the program meet APA internship accreditation standards as well as general licensure requirements.

Applicants for the two-year program should have completed all other requirements for the doctoral degree, preferably including the dissertation, at an APA-accredited program in clinical psychology. The dissertation proposal must have been accepted prior to application. We also require a minimum of 400 practicum hours. The UCSF Clinical Psychology Training Program follows the Association of Psychology Postdoctoral and Internship Centers (APPIC) Match Policies (See page 54). Advancement into the Postdoctoral Fellowship requires completion of the doctoral degree. Therefore, if all requirements for their degree at their home university have not been completed by the end of the first year (June 30, 2020), the Fellow will either remain in the doctoral internship status or be asked to leave the program.

STIPENDS

Doctoral Internship: \$32,480

Postdoctoral Fellowship: \$50,760

Postdoctoral stipends may be supplemented from research grants. Clinical “moonlighting” is not permitted.

Acknowledgement: For the class of 2020-2022, stipends are supported by a generous gift from the Ingrid D. Tauber Fund.

APPLYING FOR 2020

Interviews are granted only to individuals who have submitted a completed application and are highly ranked by their selected research mentor. Scheduled interview dates this year are Monday, December 9th, 2019, Friday December 13th, 2019 and Friday, January 3rd 2020. Alternate dates can sometimes be arranged. **DEADLINE FOR RECEIPT OF APPLICATIONS: Friday, NOVEMBER 1, 2019.**

MISSION STATEMENT

The UCSF Clinical Psychology Training Program provides doctoral students in clinical psychology who are headed for academic and research careers with both material and personal support during a crucial transitional period in their professional development. Given the current state of the field, a postdoctoral year of advanced training is essential to successfully enter academic and research positions. Thus, graduate students face the possibility of having to manage four environments during as many years: their graduate program, a clinical internship, a postdoctoral fellowship year, and their first academic or research position. At the same time, the psychologist-in-training is undergoing a change of identity from student, to doctoral-level professional, to licensed psychologist (and, therefore, independent practitioner), and to faculty member and/or principal investigator on research projects.

The UCSF two-year fellowship program encompasses the (predominantly clinical) internship required for the doctorate in clinical psychology and a postdoctoral year emphasizing clinical research as well as providing the advanced supervised clinical experience needed for licensing. Thus, the Fellow is assured of obtaining both of the experiences needed to continue smoothly into a **scientist-practitioner** career path. Our intent is to help the Fellow obtain the research momentum to facilitate successful entry into academic positions. We require, as part of the application procedure, that applicants carefully select the research area that best fits their goals in order to arrange for the faculty member in charge of that research program to become the Fellow's mentor during the two years with us. By becoming familiar with the mentor's work and research methods during the first year, it is possible to begin an empirical clinical research project which can be completed during the second year. This is why we count progress toward dissertation completion so highly in our selection process: the earlier the dissertation is done, the sooner new research plans can take shape. (In addition, of course, the postdoctoral year cannot begin unless the doctorate has been completed.)

We provide the [Recommended Timeline for UCSF CPTP Fellows](#) (Page 8) to make explicit our expectations and recommendations to prospective Fellows. Few Fellows will achieve all the illustrated milestones on time, but we hope that having a clear view of the two-year Fellowship goals will increase the proportion that come close to the mark. We include our recommendations for dissertation completion prior to starting the Fellowship because we have found that working on the dissertation during the internship year is both stressful and delays work on the empirical clinical research project. All other things being equal, we prefer to admit candidates whose dissertation proposal is approved and data collection completed prior to the APPIC Rank Order List Submission Deadline. We strongly encourage that data collection for the empirical clinical research project takes place in the 10 months ending in December of the postdoctoral year. This allows for travel for job interviews during January to April, and analysis and write up of results prior to leaving UCSF. We will do all we can to facilitate achievement of this admittedly ambitious timeline. We believe having the dissertation and the empirical clinical research project submitted for publication prior to starting a faculty position will greatly enhance our graduates' quality of life as new assistant professors.

RECOMMENDED TIMELINE FOR UCSF CPTP FELLOWS

APPLICATION YEAR

Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Prior to applying:												
1. Dissertation proposal approved				3. Data collection completed				4. Data analysis completed			5. Final draft completed	6. Dissertation defended & turned in
2. Data collection underway				11/01/2019 UCSF Application Deadline		12/09/19 & 12/13/19 UCSF Interview Dates	01/03/20 UCSF Interview Date					

INTERNSHIP YEAR

Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Clinical rotations 80% time								Clinical rotations time commitment changes to 50% - 70%			
Begin planning clinical research project with mentor 10% time					Submit Human Subjects application			Begin data collection 20% - 40% time			
Seminars – 10% time											
Write up dissertation & submit for publication						Begin drafting research statement (for job application)					

POSTDOCTORAL YEAR

Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun		
Clinical rotations 40% - 50%			Empirical clinical research project continues 40% - 50% time						Data collection completed		Data analysis completed	Write up and submit for publication and/or presentation	
Seminars 10% time		Begin preparing job talk			Submit job applications			Job talks – can include dissertation and empirical clinical research project			Conclude negotiations		Prepare for faculty position

TRAINING PROGRAM COMPETENCIES

Consistent with our mission, interns (predoctoral clinical psychology fellows) will be expected to develop broad and general preparation for entry level practice including the following competencies:

- **Research** – Interns will demonstrate the ability to critically evaluate and disseminate research or other scholarly activities at the local (including the host institution), regional, or national level.
- **Ethical and Legal Standards** – Interns will demonstrate the ability to respond professionally in increasingly complex situations with a greater degree of independence across levels of training including knowledge and accordance with the APA Ethical Principles and Code of Conduct and relevant, laws, regulations, rules, policies, standards, and guidelines.
- **Individual and Cultural Diversity** – Interns will demonstrate the ability to conduct all professional activities with sensitivity to human diversity, including the ability to deliver high quality services to an increasingly diverse population. Interns will demonstrate knowledge, awareness, sensitivity, and skills when working with diverse individuals and communities who embody variety of cultural and personal backgrounds and characteristics.
- **Professional Values, Attitudes and Behaviors** – Interns will demonstrate a maturing professional identity and ability to respond professionally in increasingly complex situations with increasing independence, and awareness and receptivity to areas needing further development.
- **Communication and Interpersonal Skills** – Interns will demonstrate effective communication skills and the ability to form and maintain successful professional relationships.
- **Assessment** – Interns will develop competence in evidence-based psychological assessment with a variety of diagnoses, problems, and needs. Emphasis is placed on developing competence in diagnostic interviewing and the administration, scoring and interpretation and of psychometrically-validated instruments.
- **Intervention** – Interns will demonstrate competence in evidence-based interventions within the scope of health service psychology, including but not limited to psychotherapy.
- **Supervision** – Interns will demonstrate knowledge of evidence-based supervision models and practice and apply the knowledge in direct or simulated practice.
- **Consultation and Interprofessional/Interdisciplinary Skills** – Interns will develop competence in the intentional collaboration of professionals in health service psychology with other individuals or groups.

Postdoctoral clinical psychology fellows are expected to develop competency at an advanced level in these profession wide competencies. This provides advanced preparation for independent practice.

TRAINING SITES

The University of California, San Francisco, is one of ten campuses of the University of California, and the only one devoted solely to the health sciences. The principal teaching missions of the campus are the education of health practitioners in dentistry, medicine, nursing, pharmacy, the allied health professions, and the graduate education of research investigators and teachers in the biological and social sciences. A large and outstanding university, UCSF employs about 24,000 people, and regularly ranks as one of the top medical schools in the country in amount of research funds received from the National Institutes of Health. In addition to serving the local communities, patients are referred to UCSF from throughout California and all over the world for consultation, diagnosis, and treatment when these patients require highly specialized knowledge or procedures

because of the seriousness or complexity of their illness. Two major teaching hospitals, the Joseph M. Long Hospital and the Herbert C. Moffitt Hospital, are located on the UCSF Parnassus campus.

The UCSF Department of Psychiatry has programs located in several institutions: the Langley Porter Psychiatric Institute, the Zuckerberg San Francisco General Hospital and Trauma Center, the Mission Bay Campus, the Mount Zion Medical Center and the VA Medical Center, where UCSF faculty have full responsibility for teaching, research, and patient care. In addition to internship and postdoctoral training in clinical psychology, the department has clinical training programs in psychiatry, nursing and rehabilitation therapies, and academic training programs in several social science areas. The multidisciplinary faculty of the department includes both full-time faculty and a large volunteer clinical faculty.

As part of UCSF, the Clinical Psychology Training Program shares in the educational resources of the Schools of Medicine, Dentistry, Nursing, and Pharmacy, and of the graduate programs in the life sciences. The University maintains a large medical library within a state-of-the-art facility that contains excellent collections in psychiatry, psychology, and related fields. Its computer-based catalog and interlibrary loan service provides Fellows with access to libraries at the ten campuses of the University of California system. Fellows are provided electronic mail with access to the Internet as well as voice mail. The two major training sites for the Clinical Psychology Training Program are:

Langley Porter Psychiatric Institute

The Langley Porter Psychiatric Institute (LPPI) is a teaching, research, and clinical service facility located on the UCSF Parnassus Avenue campus. LPPI child and adult clinics, with about 20,000 outpatient visits annually, offer individual, group, and family therapies to a socially and culturally diverse population. The Consultation Liaison Service provides psychiatric services to inpatient areas and the Emergency Department of the medical center. The Adult Psychiatry Clinic provides services to outpatients. The LPPI Adult Inpatient Program has about 750 hospital admissions annually. The Children's Center at Langley Porter provides outpatient services to children and adolescents with mental disorders. (Note: The Dept. of Psychiatry has received a large gift that will allow it to construct a new building to replace the Langley Porter Psychiatric Institute building. The new building, projected to open in late 2020, will be located near the Mission Bay campus of UCSF. The new building will be substantially larger than the current Langley Porter building, and is expected to yield enhanced opportunities for collaboration both within the Dept. of Psychiatry, and between Psychiatry and other departments such as Neurology and Pediatrics. The new building is not expected to affect the nature, function, or mission of the internship program, or the program's accreditation status.)

Zuckerberg San Francisco General Hospital and Trauma Center

Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG) is a 281-bed public service hospital serving diverse ethnic and racial minority populations of San Francisco. ZSFG, the county hospital of the City and County of San Francisco, has been a teaching hospital for the University of California, School of Medicine since the 1800s. Most clinical services are directed by UCSF faculty. Clinical services of the UCSF Department of Psychiatry at ZSFG are linked to the community mental health system. Two inpatient units house 44 beds. A forensic unit works closely with the courts and the San Francisco Jail Psychiatric Services. Other services involved in our training program include the Division of Substance Abuse and Addiction Medicine, and the Division of Infant, Child and Adolescent Psychiatry (which provides a range of mental health care to children from birth to 24 years of age), and the Trauma Recovery Center and Rape Treatment Center.

APPLICATION AND SELECTION PROCEDURE

The UCSF Clinical Psychology Training Program provides a strong mentorship system to ensure that Fellows obtain individualized attention as they pursue their clinical and research training with us. To provide a good fit between the trainee and the mentor, candidates are asked to choose a specific mentor whose research area fits with the candidate's research interests (see description of the Clusters below). **This faculty member becomes the candidate's mentor and coordinator of training during the two-year fellowship.** *It is expected that the Fellow will become part of the mentor's research team and carry out an empirical clinical research project with the mentor. It is very important, therefore, that applicants carefully choose the specific mentor with whom they would like to work.*

We usually receive 80 to 95 applications for four positions (two in the Public Service and Minority Cluster and two in the Clinical Assessment and Interventions Cluster). Each applicant is evaluated in the following areas:

- clinical training, including experience in assessment and psychotherapy
- research interest as documented by training obtained and productivity (especially presentations, publications, and grants)
- overall excellence as a psychologist as shown by breadth and depth of experiences and letters of recommendation
- appropriateness for cluster(s) chosen by applicant, as shown by work done in that area and familiarity and fit with the mentor's work
- progress toward dissertation completion
- evidence of accomplishments indicating commitment to an academic and/or research career

Application Requirements

- a minimum of 400 practicum hours
- comprehensive exams passed
- dissertation proposal approved
- a minimum of three years of graduate training
- doctoral degree program must be APA-accredited in Clinical Psychology
- submission of official graduate degree(s) transcripts

The average number of the following academic achievements reported by the top 25 applicants for the last five years were:

	2015	2016	2017	2018	2019
Peer-reviewed articles	8.7	8.7	7.9	9.0	9.2
Book chapters	1.7	1.6	1.5	1.1	1.2
Presentations	21.8	19.1	19.9	19.9	17.3

Highly-ranked candidates will receive invitations for interviews with cluster leaders, potential mentors, and other relevant faculty or Fellows no later than November 30, 2019. These interviews are very helpful for both the program and the candidates to determine whether our two-year program and the cluster they have chosen are appropriate for them. Interviews will take place on Monday, December 9th, Friday, December 13th, 2019 and Friday, January 3rd, 2020. If due to economic reasons an applicant cannot travel to San Francisco, we will be happy to make other arrangements.

The deadline for receipt of formal application is Friday, November 1, 2019, for entrance into the program July 1, 2020. The program will officially start on Wednesday, July 1, 2020; however, there will be an all-day orientation on Tuesday, June 30, 2020 that all fellows will be expected to attend.

You may download a copy of this brochure by going to:
<http://psych.ucsf.edu/education/cptp>

The Clinical Psychology Training Program is a member of APPIC and uses the APPIC Application for Psychology Internship (APPI) (available now). **In the first paragraph of your cover letter, please state the name of the research mentor you would like to work with** (see page 13). If you wish to be considered by a second research mentor, you may submit his/her name; however, please list the names alphabetically. (APPIC Match Policy 7d precludes obtaining or using information about relative ranking of “programs” within one site, except for purposes of setting up interviews.)

AREAS OF SPECIALIZATION

Described below are the major cluster or content areas around which the Clinical Psychology Training Program is organized. The first year is a general internship (predoctoral fellowship). The second year is a postdoctoral fellowship that includes advanced research and clinical training in one of the focus areas described below. All pre- and postdoctoral Fellows attend core training program seminars on Monday afternoons, consisting of a clinical seminar, a research seminar, and a Fellows' support group. The Director of Training meets with Fellows every other month to obtain formative feedback regarding their experiences in the program.

Candidates indicate the focus area of specialization that best fits their career goals by specifying in their application their choice among the mentors/research tracks. Fellows work closely with their mentor, who serves as coordinator of training, research preceptor, and advocate within the program. Depending on the project, support for Fellow's research may or may not come from investigator-initiated grants of their research mentor; additional sources of support may include multidisciplinary collaborative projects where another faculty member serves as the principal investigator, small grants submitted by Fellows, or other resources.

The table below lists the clusters and focus areas of the research mentors/tracks. A more detailed description of each follows. Description of faculty members begins on Page 38.

PUBLIC SERVICE AND MINORITY CLUSTER

*(Based at Zuckerberg San
Francisco General Hospital)
Cluster Leader: James L.
Sorensen*

- Alicia F. Lieberman: Early Childhood Trauma
- James L. Sorensen & Valerie A Gruber: Substance Use Disorders Research-Practice Linkages
- Laurie Fields & Martha Shumway*: Adult Traumatic Stress
- Marina Tolou-Shams: Juvenile Justice and Behavioral Health

CLINICAL ASSESSMENT AND INTERVENTIONS CLUSTER

*(Based at Langley Porter
Psychiatric Institute)
Cluster Leader: Dale E.
McNiel*

- Joel Kramer: Neuropsychological Research
- Daniel Le Grange: Eating Disorders
- Dale E. McNiel: Violence and Trauma
- Linda Pfiffner: ADHD/ Disruptive Behavior Disorders

**Drs. Fields and Shumway will not be accepting applicants for the 2020 – 2022 training cohort*

The Public Service and Minority Cluster is based at Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG). The Department of Psychiatry at ZSFG specializes in the treatment of underserved populations. Faculty and Fellows are committed to providing services and developing innovative interventions for such groups as persons with chronic mental illness, low-income populations, and minorities.

Core Faculty

The core Public Service and Minority Cluster faculty includes Adrian Aguilera, Ph.D., Ann Chu, Ph.D., Nancy Compton, Ph.D., Laurie Fields, Ph.D., Valerie A. Gruber, Ph.D., Alicia F. Lieberman, William Martinez, Ph.D., Sarah Metz, Psy.D., Eddie Ong, Ph.D., Martha Shumway, Ph.D., James L. Sorensen, Ph.D. (cluster leader), Marina Tolou-Shams, Ph.D., D. Andrew Tompkins, M.D., and Christina Weyer-Jamora, Ph.D.

Clinical

The Public Service and Minority Cluster provides clinical training in the full range of psychiatric inpatient and crisis intervention roles, as well as outpatient treatment via, the Child Trauma Research Project, and the Division of Substance Abuse and Addiction Medicine and the Division of Trauma Recovery Services. Fellows in this cluster typically have clinical training experiences during the internship year as described below.

- a. Inpatient experience: Four-month, half time rotation on psychiatric inpatient units. The focus is on training to function as an attending psychologist in a hospital service, including admitting and discharging patients, diagnostic evaluation and treatment planning, legal issues, and recommendations for disposition. Close collaboration with other mental health disciplines is a major part of the experience, including consultation with psychiatrists regarding psychopharmacological treatment issues.
- b. Crisis intervention experience: Four-month, part time rotation at ZSFG Trauma Recovery and Rape Treatment Center. The focus is on training in assessment and crisis intervention with adults who are seen after a sexual assault, in an emergency department setting with follow up at the Trauma Recovery Center. The rotation includes training in clinical interviewing, diagnostic evaluation, crisis intervention, and psychological first aid for people in crisis. The experience includes collaboration with medical, psychiatric, and law enforcement professionals, risk assessment, evaluation of need for hospitalization, and linkage to community resources.
- c. Outpatient experience: Outpatient training at ZSFG is provided through one of several services, depending on the Fellow's interest. These include the Division of Infant, Child, and Adolescent Psychiatry which includes the Child Trauma Research Program (CTRP), the Division of Substance Abuse and Addiction Medicine (DSAAM), and the Trauma Recovery Center (TRC). Each offers Fellows opportunities to consult to medical care providers and to provide psychotherapy to English or Spanish-speaking medical outpatients. Fellows have the option of selecting outpatient rotations focused on adults or children and adolescents.

Research

Fellows become part of their mentors' research group during the internship year. During their postdoctoral year, they spend about half of their time in advanced research training and about half time in advanced clinical training relevant the focus area of the mentor. Fellows in the Public Service and Minority Cluster concentrate on one of the following focus areas:

a. Mentor: Alicia F. Lieberman, Ph.D.

Research Area: Early Childhood Trauma, Disorders of Attachment, Parent-Child Psychotherapy Outcome

Fellows in this research area will join a multidisciplinary team studying the effects on infants, toddlers and preschoolers of interpersonal trauma due to violence, including domestic violence and abuse. The research involves extensive assessments of the children and their parents for the purpose of ascertaining the incidence of child traumatic stress and co-morbid conditions and the child's functioning in the areas of physiological functioning, cognitive development, socioemotional development, quality of attachment, moral development, and peer relations. The Child Trauma Research Program (CTRP) is a center of the SAMHSA National Child Traumatic Stress Network (NCTSN), a federal initiative with the mandate of enhancing access to service as well as quality of treatment for traumatized children across the country. As a NCTSN center, CTRP is the lead program in the Early Trauma Treatment Network, a collaboration focusing on trauma in infancy and early childhood that also includes the Boston Medical Center, Louisiana State University Health Science Center, and Tulane University. Research focuses on the effectiveness of Child-Parent Psychotherapy (CPP) with young children exposed to interpersonal violence and other traumas. We are currently conducting a study of biological markers of traumatic stress in mothers and children aged 2-6 exposed to interpersonal trauma to determine the relationship between maternal and child biological markers and whether physiological indices of stress are alleviated by treatment with child-parent psychotherapy. In addition, we are developing an adaptation of CPP for pregnant women and the perinatal period. Child-Parent Psychotherapy is accredited as an evidence-based treatment (EBT) in the SAMHSA NREPP (National Registry of Evidence Based Programs and Practices). This research track involves clinical training in CPP, incorporating psychodynamic, attachment theory, social learning theory, and CBT principles. The clinical and research team is multiethnic and places great emphasis on cultural issues in clinical intervention. The population served is multiethnic and includes approximately 40% monolingual Spanish-speaking families. Applications are encouraged from individuals committed to clinical research careers in the areas of infancy and early childhood attachment, trauma, and mental health. Fellows accepted into the doctoral internship in this track are encouraged to apply for an extramurally funded postdoctoral fellowship within this research program (**See pages 31 - 37**).

b. Mentors: James L. Sorensen, Ph.D. and Valerie A. Gruber, Ph.D.

Research Area: Substance Use Disorders Research-Practice Linkages

Training in the Substance Abuse Research-Practice Linkages area focuses on narrowing the gap between research and clinical practice in substance use disorders treatment. Fellows develop skills in conducting clinical assessment, treatment, and research in drug treatment programs. Consistent with its mission, this training area is set within the Division of Substance Abuse and Addiction Medicine (DSAAM) at Zuckerberg San Francisco General, which provides state-of-the-art substance abuse treatment including on-site mental health and medical services, with an emphasis on understanding and treating clients within the context of their culture. A major clinic site is the Opiate Treatment Outpatient Program, which provides methadone and buprenorphine services in clinic, primary care, and van sites. In addition, integrated substance use and mental health services are provided in the HIV primary care clinic. The majority of patients have HIV, Hepatitis C, chronic pain, cardiovascular or other chronic medical conditions. Many have co-occurring stimulant use, post-traumatic stress, affective, psychotic, or personality disorders. Patients include large proportions of African-American, Latino, and Asian Pacific Islander individuals, as well as large proportions of gay, lesbian, bisexual, and transgender individuals. These programs have been the site of over 60 funded research investigations of psychological, social, and biologically-based treatment innovations.

Fellows choosing to train in the Substance Abuse Research-Practice Linkages area gain clinical experience with substance use disorders in integrated substance use and mental health services in specialty behavioral health and primary care settings. Services may include psychological assessment, evidence-based individual and group psychotherapies, consultation, and staff training.

Fellows also gain experience conducting clinically relevant research in clinical settings serving diverse urban patient populations. Fellows have the opportunity to develop and test improved psychological interventions for substance use disorders and related psychological or medical problems. Fellows may contribute to existing studies and develop their own research using intramural or extramural funding. Fellows may join in research activities through the Western States Node of the Clinical Trials Network, which focuses on improving drug abuse treatment, with an emphasis on integration with primary medical care. Dr. Sorensen is a Principal Investigator for the Western States Node of the Clinical Trials Network, and Dr. Gruber is a strong contributor.

c. Mentor: Marina Tolou-Shams, Ph.D.

Research area: Juvenile Justice and Behavioral Health

Training in the juvenile justice and behavioral health area will involve a range of clinical, epidemiological and policy research on ways to improve psychiatric, substance use, sexual health and legal outcomes for underserved youth and their families. Fellows' direct research experience can be varied according to interest and goals. Examples of potential research experiences, training and collaborations may include: direct clinical trial experience through delivering and/or monitoring fidelity of a group-based gender-responsive drug use treatment for justice-involved girls; examining RCT outcome data from an HIV prevention intervention for juvenile drug court offenders; training and practice in qualitative research methods through analyzing data from system-level research participants; designing mHealth technology interventions to improve behavioral health outcomes for justice-involved youth and/or analyzing longitudinal data collected from 400 juveniles and caregivers related to mental health, substance use, HIV/STI risk and/or recidivism. Fellows choosing to train in the Juvenile Justice and Behavioral Health area are gaining experience conducting clinically relevant research as well as research relevant to structural and policy level change. As part of this training, fellows will gain experience collaborating within a multidisciplinary team, including partners from SF and Alameda County Juvenile Probation, SF Department of Children, Youth and Families and faculty from collaborating institutions in the areas of epidemiology, anthropology, public health and social work.

d. Mentors: Laurie Fields, Ph.D. and Martha Shumway, Ph.D.

Research Area: Adult Traumatic Stress

Fellows in this research area will conduct a range of clinical and services research on post-traumatic stress and its treatment in public sector settings. Fellows will join a multidisciplinary team that has conducted a randomized clinical trial involving over 650 victims of crime, demonstrating that comprehensive care for victims of crime improves access to mental health services and victim restitution benefits, and reduces disparities in access to the victim service system. Other research efforts have focused on disparities in access to medical and mental health follow-up services after sexual assault, characterizing the course of posttraumatic stress symptoms among victims of crime, understanding and treating drug facilitated sexual assault, characterizing criminal victimization and its sequelae among sexual minority victims, developing and testing a brief clinical interview for PTSD and complex PTSD, and manualizing the TRC's comprehensive model of care for dissemination.

Fellows also have opportunities to join faculty in collaborative research ongoing with other investigators in the Department of Psychiatry and other SFGH departments that focuses on posttraumatic stress in relation to high risk pregnancy, unintentional injury, HIV/AIDS and homelessness.

This area affords fellows opportunities to integrate their research interests with their clinical training and to gain exposure to the San Francisco public health system. Specialized trauma-focused training is provided at the Trauma Recovery Center (TRC), an outpatient clinic that was established in 2001 with funding from the state of California to empirically evaluate innovations in mental health services for victims of crime. The TRC provides comprehensive mental health and psychosocial services for victims of violent crime, including those impacted by gun violence (victims and their family members), domestic violence, stabbings and muggings. The TRC model of care is now being replicated throughout California, as well as other states across the US. The TRC encompasses the San Francisco Rape Treatment Center, which provides acute forensic sexual assault exams, medical follow-up services and mental health care. The TRC works closely with the Zuckerberg San Francisco General Hospital and Trauma Center, the City's only Level 1 Trauma Center, and collaborates with the San Francisco Victims Services Office, and San Francisco Community Behavioral Health Services. Since 2012, the TRC has also provided specialized services to torture survivors and asylum seekers. The TRC serves a diverse client population and places great value on addressing the needs of members of racial/ethnic and sexual minority groups.

Fellows participate in clinical training in the assessment and treatment of trauma patients. Core clinical training includes (1) comprehensive assessment and evaluation of the trauma patient, (2) learning and adapting evidence-based cognitive-behavioral, psychodynamic, and integrative psychotherapy (individual and group) approaches for treating the trauma patient, and (3) crisis assessment and intervention for the acute trauma patient.

Please note that Drs. Fields and Shumway will not be taking applicants for the 2020-2022 training cohort which begins on July 1, 2020.

The Clinical Assessment and Interventions Cluster offers training in evaluation, assessment, and treatment appropriate to a wide variety of clinical situations. The cluster's clinical settings, based at Langley Porter Psychiatric Institute (LPPi), include the Adult Psychiatry Clinic, the Adult Inpatient Program, the Moffitt-Long Emergency Department, the Children's Center at Langley Porter, and rotations associated with funded clinical trials associated with the research tracks in the cluster that periodically become available. The relative emphasis among these rotations is affected by which of two tracks the Fellow applies to work in: *Adult* or *Child*.

Faculty:

The Clinical Assessment and Interventions Cluster faculty includes Erin Accurso, Ph.D., Lindsey Bruett, Ph.D., Whitney Ence, Ph.D., Sarah Forsberg, Psy.D., Susanna Fryer, Ph.D., Amanda Gregory, Ph.D., Lauren Haack, Ph.D., Sarah Holley, Ph.D., William D. Hooker, Ph.D., Jessica Keyser, Ph.D., Joel Kramer, Psy.D., Daniel Le Grange, Ph.D., Beverly K. Lehr, Yan Leykin, Ph.D., Allison Libby, Psy.D., Christie Enjay Lin, Ph.D., Rachel Loewy, Ph.D., R. Scott Mackin, Ph.D., Ashley Maliken, Ph.D., Keith McBurnett, Ph.D., Dale E. McNeil, Ph.D. (cluster leader), John McQuaid, Ph.D., Stuart Murray, Ph.D., Mina Park, Ph.D., Auran Piatigorsky, Ph.D., Linda Pfiffner, Ph.D., Jason M. Satterfield, Ph.D., Esme Shaller, Ph.D., Dianne Shumay, Ph.D., Janice Y. Tsoh, Ph.D. and Christine Zalecki, Ph.D.

Clinical

Clinical training for all Fellows in this cluster includes rotations in the Adult Psychiatry Clinic, the Adult Inpatient Program, and the Moffitt-Long Emergency Department. Fellows who pursue the Adult Track also do a rotation focused on psychological/neuropsychological assessment. Those who pursue the Child Track also do rotations in the Children's Center at Langley Porter.

I. Required Rotations for *All Fellows*:

- a. Outpatient experience may be offered through several services, such as the Adult Psychiatry Clinic, the Young Adult and Family Center, and funded clinical trials that periodically become available. Fellows may gain experience in group and individual psychotherapy. Training and supervised experience is available in cognitive-behavioral approaches including dialectical behavior therapy. For interested individuals, it may be possible to obtain supervision from other approaches, such as psychodynamic, family systems, or other orientations.
- b. Inpatient experience in the Adult Inpatient Program, including functioning as primary therapist for patients with major psychopathology who range in age from late adolescence to the elderly. Supervised experience in differential diagnosis, case formulation, development of treatment plans, supportive psychotherapy, crisis-oriented family intervention, working with a multidisciplinary team including collaboration with psychiatrists regarding medication issues, and working with community resources and the legal system (e.g., regarding civil commitment).
- c. Crisis intervention experience in the Moffitt-Long Emergency Department. Fellows learn to assess rapidly behavioral emergencies, perform differential diagnoses, and begin appropriate interventions. Fellows learn to make clinical decisions regarding issues such as hospitalization, legal aspects of emergency care, and coordination of community services.

II. Additional Rotations for Fellows in the ADULT TRACK:

- a) Fellows receive training in neuropsychological and psychological assessment of patients with actual or suspected neurological diseases or disorders, patients with a wide range of psychiatric disorders, and general medical patients with neurobehavioral disorders. Consultations may be provided to various clinical services at Langley Porter and the UCSF Memory and Aging Center. Experiential training in assessment is complemented by relevant case conferences, grand rounds, and seminars (e.g., neuropsychological assessment, neuroanatomy, pharmacology, etc.). Fellows develop individually tailored training plans in the amount and types of their assessment activities pertinent to their professional goals (e.g., those intending to become clinical neuropsychologists have different training plans than those intending to become general clinical psychologists).

III. Additional Rotations for Fellows in the CHILD TRACK:

- a) Children's Center at Langley Porter. Fellows may participate in the Hyperactivity, Attention, and Learning Problems (HALP) Clinic housed in the Children's Center at Langley Porter. This is a specialty clinic for Attention Deficit Hyperactivity Disorder (ADHD) and related Disruptive Behavior Disorders (DBD).

The ADHD/DBD clinical research service provides comprehensive, multidisciplinary evaluation of children having attention and/or behavioral problems with related learning and/or emotional problems. The service also includes group and family-based cognitive-behavioral interventions (e.g., social skills training, parent training), school consultations for school-age children; medication evaluations occur in conjunction with the general outpatient service. Trainees gain experience with a range of assessment methods (unstructured clinical interviews, structured diagnostic interviews, parent and teacher rating scales, and psychometric testing) with an emphasis on integration of results for DSM diagnoses and treatment planning. Training in the provision of therapeutic feedback to families and preparation of written summary reports is also included. The intervention component includes training in structured, evidence-based treatments for ADHD including group-based social and life skills training for children, parenting skills groups for parents, and behavioral family therapy. Trainees participate in leading therapeutic groups or individual family sessions. Trainees also participate in ongoing clinical research.

IV. Elective Rotations

Regardless of whether they are in the Adult or Child Track, Fellows may also pursue a minor elective rotation, depending on training needs and interests. For example, elective rotations may include: a) group therapy with adolescents (e.g., dialectical behavior therapy), b) training in evidence-based treatments for adolescent eating disorders, such as family-based treatment, c) assessment of children and adolescents with suspected autism spectrum disorder, d) cognitive behavioral therapy for children and adolescents with obsessive compulsive disorder, etc.. The various clinical interventions are taught in this cluster by a combination of clinical experience, supervision, and seminars.

Research

Research in several areas of clinical assessment and intervention is available within this cluster for Fellows' collaborative research during the second, postdoctoral year. These focus areas include violence and trauma, neuropsychology, ADHD/disruptive behavior disorders, and eating disorders. Fellows become part of their mentors' research group during the internship year, during which they concurrently receive general clinical training. During their postdoctoral year, they spend about half of their time in advanced research training with the mentor and about half time in advanced clinical training relevant the focus area of the mentor.

Adult Track

a. Mentor: Dale E. McNeil, Ph.D.

Research Area: Violence and Trauma

Research specialization is available in the area of violence and trauma. Potential topics of collaborative research include studies concerning development of improved strategies for assessing violence potential; identification of clinical, demographic, and situational correlates of violence risk; mandated community treatment (e.g., mental health courts); family violence and victims of violence; studies of methods to improve clinical decision making about patients at risk of violence to self or others; gun violence; and studies of the interaction of legal and health care systems in the treatment of violent patients. Fellows may also participate in research on suicide risk assessment.

Fellows also may participate in interdisciplinary seminars on topics in mental health and law, such as forensic mental health services research and review of landmark cases, in conjunction with the UCSF Program on Psychiatry and Law, an accredited forensic psychiatry fellowship. Elective rotations in the Program on Psychiatry and Law typically occur during the postdoctoral year.

b. Mentor: Joel Kramer, Psy.D.

Research Area: Neuropsychological Research

Research opportunities for pre- and postdoctoral trainees center around the neuropsychological and neurobehavioral features of typical and abnormal aging. Trainees have access to a large normal control cohort and patients with Alzheimer's disease, frontotemporal-spectrum disorders, progressive aphasia, cerebrovascular disease, mild cognitive impairment, parkinsonian disorders, and Huntington's disease. Projects linking clinical and experimental data with quantitative structural and functional neuroimaging and fluid biomarkers can be pursued. Trainees are encouraged to participate in a broad range of funded projects related to early detection and characterization of neurodegenerative diseases. Independent projects are encouraged.

a. **Mentor:** Daniel Le Grange, Ph.D.

Research Area: Treatment development and psychological Interventions for adolescents with eating disorders

The Eating Disorders Program at UCSF is a research-based clinical service for youth ages 12 thru 20 and is a close collaboration between the Division of Child and Adolescent Psychiatry and the Division of Adolescent Medicine (Pediatrics). The main focus of this program is treatment research and fellows can participate in a variety of ongoing collaborative projects. In addition, fellows are encouraged to develop their own research projects in areas that may be related to this focus on treatment development and dissemination. Current studies/datasets that may be of interest include a comparison of parent-focused therapy and family-based treatment for adolescents with anorexia nervosa, developing telemedicine delivery of family-based treatment, evaluating the relative efficacy of family-based treatment and cognitive behavior therapy for adolescents with bulimia nervosa, and disseminating evidence-based treatment for adolescents with eating disorders to practitioners outside tertiary training institutions. Fellows are strongly encouraged to collaborate with program team members and co-author papers given the many datasets that can be accessed, and fellows are also supported to serve as lead authors on their own manuscripts. Training in this context is strongly oriented toward supporting fellows in their preparation to pursue academic or research faculty appointments post fellowship.

- b. Mentor: Linda Pfiffner, Ph.D.**
Co-mentor: Keith McBurnett, Ph.D.

Research Areas:

- 1) Psychological Interventions for Children with ADHD and Other Disruptive Behavior Disorders
- 2) Family Factors and Child Psychopathology

Ample research opportunities are available through a clinical research program for children with Attention Deficit Hyperactivity Disorder (ADHD) and related Disruptive Behavior Disorders (DBDs). Fellows are encouraged to participate in ongoing collaborative projects and may develop their own projects in related areas. Sample topics for collaborative projects include testing of efficacy and sustainability of school-implemented behavioral interventions for ADHD, developing web-based, remote training models for school mental health professionals in the implementation of behavioral interventions within schools, digital health tools to augment behavioral treatment and improve adherence, studies of tailored psychosocial treatment for the inattentive presentation of ADHD, implementation factors related to treatment outcome, family and social factors in developmental models of child psychopathology, clinical trials of new medications, and investigation of the potential utility of Sluggish Cognitive Tempo symptoms in ADHD. Technical assistance with design, statistical analysis, literature integration and grant application preparation is provided. Fellows working in our program have co-authored papers using data from our lab (HALP) and have gone on to academic or research appointments in university psychology or psychiatry departments.

SAMPLE TRAINING SCHEDULES

The training schedules on the next two pages are illustrative. They include the approximate number of scheduled hours per week allotted to each rotation. We have attempted to provide a realistic picture of what a Fellow is likely to experience. The program schedules consist of 40-hour weeks, the California licensing board accepts up to 44 hours of supervised training per week, but Fellows report that they spend 50-60 hours per week on program-related activities including reading the literature and preparing research proposals and manuscripts for publication. Each Fellow's training plan is proposed by the research mentor, taking into account the Fellow's background and professional plans, and must be approved by the Cluster Leaders and the Director. Note that the cluster and research track chosen by the applicant have major implications for the specific rotations the applicant will experience. The first year is a primarily clinical year. The second, postdoctoral year combines advanced training in clinical services and clinical research, with greater emphasis on the latter. Postdoctoral Fellows spend 16 to 20 hours in clinical rotations related to their research area, and the rest of their time in research activities. Fellows receive a minimum of four hours per week of supervision plus additional training activities (this may include additional supervision, seminars, clinical rounds and so on).

Required Seminars for All Fellows

I. **Core Seminars and Fellows' Support Group** (4 hours/week).

Monday afternoons are set aside from 1:00 to 5:00 p.m. so that Fellows (pre- and postdoctoral) are able to 1) attend three mandatory meetings on the 1st and 3rd Monday of the month, and 2) can use this “protected time” for research-related activities (e.g., manuscript or grant preparation) during the remaining Mondays. Dr. McNiel, the Program Director, meets with the Fellows every other month to obtain direct feedback regarding their experiences in the program. The Monday afternoon meetings are:

- The Clinical Seminar – Leaders: Sarah Holley, Ph.D. and Susanna Fryer, Ph.D.
- The Research Seminar / Research Career Development Seminar - Leaders: Janice Y. Tsoh, Ph.D., Yan Leykin, Ph.D., James Sorensen, Ph.D., and Annesa Flentje, Ph.D.
- The Fellows' Support Group – Facilitator: Each training year, the fellows decide whether to have a facilitator in the support group.

II. **Required Short-term Seminar:**

- Psychopharmacology Seminar – Six sessions at the beginning of the internship year, as part of the Clinical Seminar. Leader: Caroline Tsai, Pharm.D.

Method and Frequency of Evaluation

Fellows are formally evaluated in writing twice per year at which time they also formally evaluate the program and their supervisors. Each Fellow meets individually with the Director of Training to review these evaluations and progress in the program. Opportunities to discuss concerns or complaints with the Cluster Leaders and Director of Training are readily available. Should these prove insufficient, there is a formal grievance procedure which is described in the Clinical Psychology Training Program Handbook.

Minimum Requirements for Completion of Internship

1. Completion of the internship requires verification that the intern meets broad and general preparation for entry level independent practice (which in California is readiness for postdoctoral fellowship or its equivalent) on each of the competencies described above on page 9: Research, Ethical and Legal Standards, Individual and Cultural Diversity, Professional Values, Attitudes, and Behaviors, Communication and Interpersonal Skills, Assessment, Intervention, Supervision, and Consultation and Interprofessional/Interdisciplinary Skills.
2. Successful completion of all rotations specified in the intern's individualized training program, as designed by the clinical research mentor and approved by the cluster leader and the director of training. The objectives of each rotation are found in the CPTP Handbook. The minimum performance requirements consist of satisfactory evaluations for all these objectives by rotation completion.
3. A minimum of 1500 hours of supervised professional experience at the internship level. Most interns will complete many more hours. For example, completion of all training days minus allowable holidays (13) and vacation days (20) would result in 1,816 hours of supervised training. Interns who, in addition, need to use allowable sick leave days (12, if needed), and professional leave days (5, if needed) would complete 1,680 hours of supervised professional experience.
4. For interns who have or adopt a child during the internship, paid parental/maternity leave is provided. Arrangements must be made to ensure that the minimum of 1500 hours are completed to certify successful completion of the internship.
5. Not be found to have engaged in any significant unethical behavior.

Minimum Requirements for Completion of Postdoctoral Fellowship

1. Completion of the postdoctoral fellowship requires verification that the postdoctoral fellow meets advanced preparation for independent practice, as defined by competency at an advanced level on each of the competencies described above on page 9: Research, Ethical and Legal Standards, Individual and Cultural Diversity, Professional Values, Attitudes, and Behaviors, Communication and Interpersonal Skills, Assessment, Intervention, Supervision, and Consultation and Interprofessional/Interdisciplinary Skills.
2. Successful completion of all rotations specified in the postdoctoral fellow's individualized training program, as designed by the clinical research mentor and approved by the cluster leader and the director of training. The objectives of each rotation and focus area are found in the CPTP Handbook.

The minimum performance requirements consist of satisfactory evaluations for all these objectives by rotation completion.

3. A minimum of 1500 hours of supervised professional experience at the postdoctoral level. Most postdoctoral fellows will complete many more hours. For example, completion of all training days minus allowable holidays (13) and vacation days (20) would result in 1,816 hours of postdoctoral supervised professional experience. Postdoctoral fellows who, in addition, need to use allowable sick leave days (12, if needed), and professional leave days (5, if needed) would complete 1,680 hours of supervised professional experience.
4. For postdoctoral fellows who have or adopt a child during the postdoctoral fellowship, paid parental/maternity leave is provided. Arrangements must be made to ensure that the minimum of 1500 hours are completed to certify successful completion of the postdoctoral fellowship.
6. Not be found to have engaged in any significant unethical behavior.

PUBLIC SERVICE AND MINORITY CLUSTER (Sample Training Schedule)

<i>Internship Year</i>			
REQUIRED ROTATIONS	July-October	November-February	March-June
Inpatient Psychiatry (ZSFG)	16	-	-
Crisis Intervention (Trauma Recovery/Rape Treatment Center (ZSFG)	-	16	-
Outpatient (ZSFG)	16	16	16
Rotations Related to Chosen Research Track (one of the following)			
Child Trauma Research Project (Lieberman)	4	4	20
Substance Abuse Research-Practice Linkages (Sorensen)	4	4	20
Adult Trauma Stress (Fields, Shumway)	4	4	20
Juvenile Justice and Behavioral Health (Tolou-Shams)	4	4	20
<i>Postdoctoral Year</i>			
CLINICAL ROTATIONS			
(16-20 hours)			
Outpatient (ZSFG)			
Advanced Clinical Rotation Related to Research Track (as in internship year above)		8 – 10 hours all year	8 – 10 hours all year
RESEARCH			
(Approximately 20 hours)			
Focuses on chosen research track			
(see above)		20 hours all year	

NOTE: All Public Service and Minority Fellows attend the Monday afternoon seminars (4 hrs.).

CLINICAL ASSESSMENT AND INTERVENTIONS CLUSTER (Sample Training Schedule)

<i>Internship Year</i>				
REQUIRED ROTATIONS	July-September	October-December	January-March	April-June
Adult Inpatient Program (LPPI)	24	-	-	-
Moffitt-Long Emergency Department	-	-	8	-
Adult Psychiatry Clinic (LPPI)	8	8	8	8
Rotations Related to Chosen Research Track				
ADULT TRACK				
Neuropsychological/Psychological Assessment (LPPI)		24	12	20
Clinical Research	4	4	8	8
CHILD TRACK				
Children’s Center at Langley Porter	4	24	12	20
Clinical Research	4	4	8	8
<i>Postdoctoral Year</i>				
CLINICAL ROTATIONS (approximately 20 hours)				
Advanced Neuropsychological Assessment and/or: Advanced Clinical Rotation Related to Research Track			8 – 10 hours, all year	
			10 – 12 hours, all year	
RESEARCH (approximately 20 hours)				
Focuses on chosen research track (see above)			20 hours, all year	

NOTE: All Clinical Assessment and Interventions Cluster Fellows attend the Monday afternoon seminars (4 hrs.)

ADDITIONAL TRACK: Partial Affiliation Between the UCSF Clinical Psychology Training Program and UC Berkeley Doctoral Program in Clinical Science

As described above, the core traditional UCSF Clinical Psychology Training Program (CPTP) includes a two-year full time fellowship comprised of a one-year general clinical psychology internship and a one-year postdoctoral clinical and clinical research fellowship, based on the scientist-practitioner model. Graduates are expected to pursue careers emphasizing research and training in academic/research settings including those affiliated with health and mental health service systems. The program has a strong mentorship structure; candidates apply to work with a specific faculty research mentor.

For the 2020-2021 training year, we anticipate appointment of one or more fellows in a relatively new track in the CPTP, which involves a partial affiliation with the APA-accredited clinical psychology Ph.D. program at the University of California, Berkeley, referred to as the doctoral program in Clinical Science. In this track, select UC Berkeley Clinical Science doctoral students will complete a clinical psychology internship in the CPTP in two half-time years, while concurrently continuing research with their UC Berkeley faculty mentors. The new track aims to innovate by expanding our mentorship model of training research oriented clinical psychologists. Candidates for the half-time internship track will be considered for the same areas of clinical training described elsewhere in this brochure. They will be admitted to either the Clinical Assessment and Interventions Cluster or the Public Service and Minority Cluster and will participate in the core CPTP seminars on Monday afternoons (Research Seminar, Clinical Seminar, and Fellows Support Group). Clinical internship training goals will be the same for Fellows in the half-time track as for full time predoctoral Fellows, but will be extended over two years. Fellows in the half-time track will not be automatically accepted into a postdoctoral fellowship in the CPTP, but are welcome to apply for consideration in various postdoctoral training opportunities described at the end of this brochure.

The new slots added to the CPTP for the half-time internship track will be protected for UC Berkeley Clinical Science doctoral students. Candidates for the half-time internship track will meet the same eligibility criteria as applicants for the full-time internship. UC Berkeley faculty will pre-screen candidates, and CPTP faculty will make final decisions about which applicants are accepted into the new track. CPTP faculty will apply the same policies and procedures for successful completion to interns in the new half-time track as are applied to the full-time interns. Interns in the half-time track will receive stipend support comparable to the full time interns on a pro-rated basis (i.e., monthly stipends of the half-time interns will be half that of the full time interns), and will receive health insurance benefits.

ADDITIONAL POSTDOCTORAL RESEARCH OPPORTUNITIES

Available to Clinical Psychology Training Program Applicants

In the last few years, we have noted that some CPTP Fellows proceed to additional postdoctoral work after completing the two-year CPTP program. They often apply to other UCSF programs, but sometimes move to other institutions (fellows have gone on to other postdoctoral programs at Stanford and Harvard, for example). Therefore, the Clinical Psychology Training Program (CPTP) has begun to explicitly encourage Fellows to consider applying to other UCSF research-oriented training programs to extend the postdoctoral period of training from one year to two years. Acceptance to these prestigious NIH-funded programs allows Fellows to continue working with their CPTP mentor for two years after their internship ends (versus only one postdoctoral year under the CPTP program). We have found that the one-year postdoctoral year can be burdened with the time-intensive tasks of a job search, including travel to present job talks. This means that the number of months devoted predominantly to research may turn out to be fewer than expected. Adding an additional year allows at least one year of uninterrupted time for research activities, after which Fellows often have more publications and grant writing experience.

We therefore suggest that applicants examine the following training programs, which are currently in operation. Due to federal funding cycles, not all NIH training programs will be available every year. Candidates for the postdoctoral fellowships below must be citizens or non-citizen nationals of the United States, or must have been lawfully admitted to the United States for Permanent Residence (i.e., possess a currently valid Alien Registration Receipt Card I-551, or other legal verification of such status). Individuals on temporary or student visas are not eligible. Individuals may apply to these training programs including the F32 in advance of admission to the United States as a Permanent Resident recognizing that no award or appointment will be made until legal verification of Permanent Resident status is provided.

Postdoctoral Fellowship in Psychology and Medicine

This NIMH-funded postdoctoral program trains researchers to link basic psychological theories and research to preventing and ameliorating disease. There are two areas, and cross-cutting both areas is a consideration of disparities in mental and physical illness and the mechanisms by which they occur. The two areas are: (1) *Health-risking behavior*: Fellows in this area focus on developing and applying theories of risk perception, social learning, cognitive development, and risk-taking to understand and modify health-risk behaviors, especially those that contribute to exposure to the HIV virus, as well as those contributing to addictive behaviors. There is an emphasis on developmental processes and on adolescence as a critical period. (2) *Stress, depression, psychobiology and disease*: Fellows in this area focus on theories of the meaning and appraisal of stress, cognitive and affective responses that result from these appraisals, and biological concomitants of these responses that result in disease. We emphasize common pathways to multiple disease outcomes, especially those spanning mental and physical illness.

Fellows will be appointed for two years. In some instances, an optional third year may be possible. It is expected that about one-third of the fellow's time will be spent in formal seminars. All fellows take a core Health Psychology Seminar and a Research Process Seminar in both years of the fellowship and may take other courses and seminars. The remaining two-thirds of the fellow's time will be spent in research. Fellows will participate in their faculty mentor's research laboratory and will develop their own research study.

Nancy Adler, Ph.D. is the Director of Training. The Mentor in the Clinical Psychology Training Program who also teaches in this program is: Alicia F. Lieberman, Ph.D.

See the program's web site at: <https://healthpsychology.ucsf.edu/postdoctoral-program>

Postdoctoral Traineeship in Substance Use Disorders Treatment and Services Research

This National Institute on Drug Abuse (NIDA)-funded postdoctoral program is offered by the University of California, San Francisco (UCSF) Department of Psychiatry and Weill Institute for Neurosciences. Our program is one of the few that trains scientists in treatment and services research.

Scholars work with a preceptor to design and implement studies on treatment of substance use disorders (SUD), including nicotine, cannabis, opioids, and other substances. Scholars also select a specific area of focus for independent research. Current research interests of faculty include trials of efficacy and effectiveness of psychosocial and pharmacologic treatment of substance use disorders, including:

- Substance use disorders including cannabis, tobacco and opioids
- Innovative methodology, including internet-based studies
- Treatment of complex patients in health care settings
- Diagnostic techniques and research on treatment tailored for HIV-positive substance users with psychiatric and medical disorders
- Research on provision of services to substance-using populations
- Instrument development in substance use treatment.

A variety of university-affiliated and community substance use treatment programs are available as research sites. These include inpatient- and outpatient-setting programs that treat a range of problems related to SUD treatment, including dependence on stimulants, cannabis, nicotine, alcohol, and opiates. Our program encourages close research involvement with a preceptor, and involvement in selected classes, seminars, and grant preparation.

At the end of our postdoctoral program, we expect scholars to have acquired the following competencies and completed the following tasks:

- gained knowledge of drugs of abuse and their treatment;
- advanced their knowledge of statistical and methodological techniques needed for clinical and services research;
- understand drug abuse treatment systems and drug research projects;
- conducted at least two treatment research projects in a clinical setting: One designed by their preceptor; and one of their own design, for which they have primary responsibility;
- made multiple internal presentations;
- made at least two presentations of their work at national meetings;
- published one to three journal articles;
- submitted a small grant application to local funding sources;
- published additional manuscripts from the work completed as a scholar during the two years following enrollment in our program.

Current research interests of faculty include:

- Innovative interventions to decrease drug use and improve health status among drug abusers with AIDS
- Implementation of state-of-the-art drug abuse treatments in new settings
- Efficacy and cost-effectiveness on innovative drug abuse treatment methodology
- Intersection of drug dependence with other psychopathology, and the effects of dually diagnosed disorders on treatment outcome
- Treatment of nicotine dependence in complex patient populations
- Methodological innovations in drug abuse treatment and services research
- Studies of Web-based interventions
- Organizational change and implementation of new interventions in clinical settings

James L. Sorensen, Ph.D., is Director of Training. The training program is supported in part by the Western States Node of the Clinical Trials Network. Resources from other significant extramural funding and research grants are also routinely available to scholars. Mentors in the Clinical Psychology Training Program who also teach in this program include: James L. Sorensen, Ph.D., Linda Piffner, Ph.D., and Marina Tolou-Shams, Ph.D.

See the program's web site at: <http://psych.ucsf.edu/SUDTSR>

Clifford Attkisson Clinical Services Research Training Program

Trainees in the program take on an apprentice role in the context of the faculty preceptors' clinical service research activities. This role will be progressively expanded into full collaboration on an aspect of the research about which substantial closure and publication can be reached within a two-year timeframe. Trainees are also encouraged and supported in the development of the multidisciplinary, collaborative, and negotiation skills required of clinical service researchers.

Research areas currently being surveyed by participating faculty include:

- Organization, financing, and delivery of mental health and related human services to seriously and persistently mentally ill adults, adolescents, and children;
- Service system studies of the co-occurrence of mental disorder and substance abuse;
- Mental health services in primary care settings;
- Mental health services delivery to persons with HIV;
- Implications of violence and potential violence in the delivery of mental health services;
- Service system needs for vulnerable children.

The training program includes:

- required coursework
- elective seminars and directed readings
- a preceptorship with a faculty member

Required coursework includes surveys of the current literature, clinical services research methods, biostatistics, program evaluation methods, reviews of standardized clinical assessment tools, economic and cost analysis methodologies, and professional and research ethics. A wide range of electives are also offered. Faculty include senior, established investigators and junior faculty who have a solid research track record.

Linda Pfiffner, Ph.D. is Director of Training. The program is funded by a training grant from the National Institute of Mental Health. Mentors in the Clinical Psychology Training Program who also teach in this program include: Daniel Le Grange, Ph.D., Dale E. McNiel, Ph.D., Linda Pfiffner, Ph.D., Marina Tolou-Shams, Martha Shumway, Ph.D. and James L. Sorensen, Ph.D.

See the program's web site at: <http://psych.ucsf.edu/clifford-attkisson-clinical-services-research-training-program>

Ruth L. Kirschstein National Research Service Awards (NRSA) For Individual Postdoctoral Fellows (F32)

The National Institutes of Health (NIH) awards individual postdoctoral fellowships (F32) to promising applicants with the potential to become productive, independent investigators in fields related to the mission of the NIH constituent institutes and centers.

This Postdoctoral Fellowship Award (F32) is issued under the auspices of the Kirschstein-NRSA Act. The proposed postdoctoral training must be within the broad scope of biomedical, behavioral, or clinical research and must offer an opportunity to enhance the fellow's understanding of the health-related sciences and extend his/her potential for a productive research career.

Fellowship awardees are required to pursue their research training on a full-time basis, devoting at least 40 hours per week to the training program. Research clinicians must devote full-time to their proposed research training and must restrict clinical duties within their full-time research training experience to activities that are directly related to the research training experience. Women, minorities, and individuals with disabilities are encouraged to apply.

Before submitting a fellowship application, the applicant must identify a sponsoring institution and an individual who will serve as a sponsor (also called mentor or supervisor) and will supervise the training and research experience. The applicant's sponsor should be an active investigator in the area of the proposed research who will directly supervise the candidate's research. The sponsor must document the availability of research support and facilities for high-quality research training. In most cases, the F32 supports research training experiences in new settings in order to maximize the acquisition of new skills and knowledge. However, in unusual circumstances, applicants may propose postdoctoral training experiences at their doctorate institution or at the institution where they have been training for more than a year. In such cases, the applicant must carefully document the opportunities for new research training experiences specifically designed to broaden their scientific background.

This information is a summary from the program's website: <http://grants.nih.gov/training/nrsa.htm>

Applicants to the CPTP are encouraged to discuss the potential for collaborating on an individual NRSA with their chosen mentor.

Additional Postdoctoral Opportunities in the Child Trauma Research Track of the Clinical Psychology Training Program

Grants and private contributions that support the Child Trauma Research Program of the Clinical Psychology Training Program are available to support postdoctoral training in this track. Applicants who are accepted for a clinical psychology doctoral internship with Alicia Lieberman, Ph.D. as mentor will be encouraged to apply for a postdoctoral fellowship in the Child Trauma Research Program.

FACULTY

ERIN C. ACCURSO is an Assistant Professor in the Department of Psychiatry at the University of California, San Francisco. She received a B.A. in psychology from Dartmouth College and a Ph.D. in Clinical Psychology from the San Diego State University (SDSU) / University of California, San Diego (UCSD) Joint Doctoral Program in 2012. She then completed a postdoctoral fellowship at the University of Chicago through the T32 Midwest Regional Postdoctoral Training Grant in Eating Disorders Research. Dr. Accurso is interested in mental health service delivery and improving access to effective care, particularly for underserved minority populations. Her research primarily focuses on the assessment and treatment of youth with eating disorders, as well effective dissemination and implementation of evidence-based practices in community-based settings. To date, she has authored and co-authored over 40 journal articles and several book chapters, advancing knowledge in the treatment of eating disorders and mental health service delivery. Dr. Accurso is also Clinical Director of the UCSF Eating Disorders Program, where she supervises fellows in evidence-based assessment and treatment of youth with eating disorders.

ADRIAN AGUILERA is an Associate Adjunct Professor in the UCSF Department of Psychiatry at San Francisco General Hospital and an Associate Professor in the UC Berkeley School of Social Welfare. Dr. Aguilera is the director of the Latino Mental Health Research Program (LMHRP - <https://latinomentalhealth.ucsf.edu/>) at UCSF, the Digital Health Equity and Access Lab (dHeal - <https://socialwelfare.berkeley.edu/research/digital-health-equity-and-access-lab>) at UC Berkeley. He received his B.A. from Stanford University in Psychology and Comparative Studies in Race and Ethnicity and received his M.A. and Ph.D. degrees in Clinical Psychology at the University of California, Los Angeles. He completed his psychology internship at the San Francisco VA Medical Center and a postdoctoral fellowship (T32) in the Clinical Services Research Training Program at UCSF. Dr. Aguilera's research focuses on developing digital mental health interventions for low-income and ethnic minority populations with an emphasis on primary care settings. He received a Career Development Award (K23) from NIMH to study the use of automated text messaging to improve adherence to group cognitive behavioral therapy for depression in a primary care setting at SFGH in Spanish and English. He has also received a grant (R01) to develop an automated, personalized, texting intervention to improve physical activity and self-management of comorbid depression and diabetes. He will serve as a supervisor to fellows interested in developing and testing digital health technologies for underserved populations.

LINDSEY D. BRUETT is a licensed clinical psychologist and an Assistant Clinical Professor in the Department of Psychiatry at Langley Porter and Zuckerberg San Francisco General Hospital. She specializes in family-based therapy for eating disorders, cognitive and dialectical behavior therapy, and parent management-related interventions. Her clinical work and research focuses on children and adolescents. Dr. Bruett is committed to teaching and training in evidence-based practice. Dr. Bruett received her B.A. from Bowdoin College and her M.A. and Ph.D. in clinical psychology with an emphasis on developmental psychopathology from Temple University. She completed her predoctoral internship at the Stanford/Children's Health Council consortium program, and postdoctoral fellowship at Stanford University.

ANN CHU is an Assistant Clinical Professor at the University of California, San Francisco (UCSF) Department of Psychiatry and Associate Director of Dissemination and Research for Child-Parent Psychotherapy (CPP) at the UCSF Child Trauma Research Program based at Zuckerberg San Francisco General Hospital (ZSFGH). Dr. Chu received her PhD in Clinical Psychology from the University of Denver and completed her predoctoral

internship/post-doctoral fellowship as part of the UCSF Clinical Psychology Training Program. She is a Licensed Clinical Psychologist in California and a National Trainer in Child-Parent Psychotherapy. Her research to date has examined how trauma impacts vulnerable populations such as young children, youth in foster care, and survivors of childhood sexual abuse.

NANCY C. COMPTON is a Clinical Professor and the Director of Training in the University of California, San Francisco Child Trauma Research Program where she has worked since the program's inception in 1996 providing care for a multiethnic diverse population of caregivers and children aged birth to five who have experienced interpersonal trauma. Dr. Compton also provides psychological services to women and children at the Family Justice Center in Oakland, CA in addition to her private practice in the East Bay where she specializes in trauma and adoption. Dr. Compton is a consultant to the Global Family Village project, an initiative that establishes community based, family centered care for orphaned, abandoned and displaced children in Nepal. Previously, Dr. Compton was the Director of Research at the Whole Child Initiative, a project launched by Dr. Jane Goodall and Dr. Marion Wright Edelman with the mission of identifying and supporting model grassroots projects for women and children around the world. She has also been on the faculty at the University of California, Berkeley, worked as a Child Development Specialist at the UCSF Infant Parent Program, a Domestic Violence Specialist for the Alameda County Superior Court and District Attorney's Office, and developed a center for pregnant and parenting Puerto Rican teenagers and their children in Massachusetts. Dr. Compton coauthored *Losing a Parent to Death in the Early Years: Guidelines for the Treatment of Traumatic Bereavement in Infancy and Childhood* (Zero to Three Press, 2004), is the author of *African American Children who have Experienced Homelessness: Risk, Vulnerability and Resilience* (Garland Publishing) and senior author of a book on teenage pregnancy for the National Education Association. Dr. Compton's experience and expertise are in the areas of attachment, trauma and loss.

WHITNEY ENCE is a Clinical Associate Professor in the Department of Psychiatry and Langley Porter Hospital and Clinics (LPHC). Dr. Ence earned her B.A. degree in Psychology and Dance from the University of California, Irvine in 2005. Dr. Ence received her Ph.D. in Counseling, Clinical, and School Psychology (Clinical Emphasis) from the University of California, Santa Barbara in 2012, and completed her pre-doctoral internship at the University of North Carolina, Chapel Hill School of Medicine. She finished a two-year post-doctoral fellowship at Children's Hospital Los Angeles (CHLA) in 2014. She has advanced training in Applied Behavior Analysis, Pivotal Response Training, TEACCH, Behavior Activation, and Cognitive Behavior Therapy. She is also certified in PEERS®, an evidence-based social skills group treatment for adolescents and young adults with ASD and she is a trainer in the Autism Diagnostic Interview Schedule-2 (ADOS-2). Her research interests include investigating comprehensive behavioral interventions for ASD and evaluating best practices in parent training.

LAURIE FIELDS is Clinical Professor of Psychology in the UCSF Department of Psychiatry at the Trauma Recovery Center (TRC) of UCSF-Zuckerberg San Francisco General Hospital, where she serves as primary instructor for the Traumatic Stress Treatment Seminar and as a senior clinical supervisor. The TRC was developed as a demonstration research project to provide an alternative to care for underserved victims of violent crime, now provides mental health services to crime victims and asylum seekers/torture survivors from around the world, and is in the process of being replicated at multiple sites in California and across the U.S. Dr. Fields' research interests focus on developing assessment-guided, low-cost, accessible psychotherapies that integrate the best of evidence-based practices to address the range of simple-to-complex traumatic stress responses for public sector and ethnic minority populations. Her projects include development of a brief

assessment for complex PTSD; understanding drug-facilitated sexual assault (DFSA) and development of a specialized psychotherapy for treating DFSA in which victims have little memory of the trauma; development of an integrative approach to treat PTSD in the primary care setting; and development and evaluation of a speaker's bureau program to facilitate posttraumatic growth in survivors. Dr. Fields holds a dual doctorate in Clinical and Community Psychology from the University of South Carolina, Columbia, and completed her pre and postdoctoral fellowship training at the Department of Psychiatry, University of California, Davis. She maintains an active faculty practice in adult therapy, and has additional specialization in physician wellness, executive burnout, and vicarious traumatization that can occur in many high-stress professions.

SARAH FORSBERG is Associate Clinical Professor in the Department of Psychiatry Eating Disorders Program where she provides individual and family therapy for children, adolescents and young adults with eating disorders. She also serves as an attending psychologist on the adolescent medicine inpatient unit where individuals receive treatment for the medical complications of eating disorders. Dr. Forsberg received a B.A. in psychology from Smith College and a Psy.D. in clinical psychology from the PGSP-Stanford Consortium Program at Palo Alto University. She then completed a predoctoral internship at the Center of Excellence for Eating Disorders at the University of North Carolina, Chapel Hill, and a 2-year postdoctoral fellowship at Stanford University. Over the past decade, Dr. Forsberg has conducted research on Family-Based Treatment for eating disorders, specifically exploring mechanisms of change and predictors of treatment outcome. She most recently published a book outlining best practices in supervision and adherence to FBT interventions, *Family-Based Treatment for Restrictive Eating Disorders: A Guide for Supervision and Advanced Clinical Practice* (Forsberg, Lock and Le Grange, 2017).

SUSANNA FRYER is an Assistant Professor in the UCSF Department of Psychiatry and staff clinical research psychologist at the San Francisco VA Medical Center. She completed her undergraduate work at Stanford University where she first became excited about clinical neuroscience while participating in the departmental honors research program in Human Biology. She then earned her PhD from SDSU/UCSD's Joint Program in Clinical Psychology with a specialization in neuropsychology, after completing a clinical internship in psychology at the San Francisco VA Medical Center. Dr. Fryer's research, funded by the NIH and the VA, applies neuroimaging and neuropsychological methods to study brain and behavior relationships in adolescent and young adult populations at risk for developing mental illness, with an emphasis on motivated behaviors and self-regulation. Her research focuses on i) improving our understanding of the cognitive features and brain alterations that underlie risk for, and conversion to, psychopathology, and ii) the brain-based mechanisms of how that risk might be ameliorated through psychotherapeutic intervention. She is a licensed clinical psychologist specializing in cognitive-behavioral therapy (CBT) and mindfulness-based techniques, and is particularly interested in how behavioral interventions can be applied to improve aspects of affect and attentional regulation across traditional diagnostic nosologies. She supervises psychology trainees and provides evidence-based mindfulness and cognitive behavioral therapies through the San Francisco VA Medical Center's General Psychiatry Outpatient Service. Dr. Fryer co-leads the Clinical Seminar with Dr. Sarah Holley.

AMANDA GREGORY is an Assistant Clinical Professor and Attending Psychologist in the Department of Psychiatry at UCSF and a Clinical and Forensic Neuropsychologist. She completed her B.A. at the University of Wisconsin, Madison, her Ph.D. in Clinical Psychology at the University of Texas, Austin, and was a Pre and Postdoctoral Fellow at UCSF. Dr. Gregory has conducted juvenile and adult criminal forensic evaluations

throughout California and is a member of the panel of forensic evaluators for San Francisco Juvenile Court. She also conducts individual psychotherapy with adults and adolescents. Her responsibilities at UCSF have included psychological and neuropsychological evaluations on the Adult Inpatient Program, providing psychotherapy supervision to psychology fellows, teaching in the Psychiatry and the Law Program, and providing forensic evaluations for San Mateo County. Dr. Gregory has a particular interest in posttraumatic stress disorder, which has included teaching treatment interventions to graduate students and community counselors in Rwanda.

VALERIE A. GRUBER is Professor in the Department of Psychiatry at UCSF, and faculty in the Public Service and Minority Track of the UCSF Clinical Psychology Training Program, for which she received the David Rea Teaching Award in 2014. Dr. Gruber is a licensed psychologist, and holds an APA certificate in the treatment of alcohol and other substance use disorders. She completed a Ph.D. in Clinical Psychology at Kent State University, internship at the UCSF Clinical Psychology Training Program, and an M.P.H. at the University of California Berkeley. Her clinical, supervision, leadership, teaching and research efforts focus on developing clinical interventions for substance use disorders and associated medical conditions that are effective for low-income, culturally diverse substance users. Areas of expertise include trauma-informed integrated treatment of substance use health conditions in behavioral health and primary care settings. Her skills include motivational interviewing, individual, couples and group psychotherapy, psychological assessment, cultural competence, staff development, program management and clinical research. She has published research on psychosocial interventions in methadone maintenance, outpatient and residential addiction treatment, and on substance use disorders in HIV primary care.

LAUREN M. HAACK is a UCSF Department of Psychiatry Assistant Professor and attending psychologist with research and clinical interests focused on 1) cultural influences to mental health conceptualization, assessment, and treatment, and 2) accessible and culturally appropriate evidence-based services for vulnerable youth and families worldwide. She received her B.A. in Psychology and Spanish at Clemson University, her PhD in Clinical Psychology at Marquette University specializing in ADHD services for Latinx youth, and completed fellowship in UCSF's Clinical Psychology Training Program (proud alumni!). Dr. Haack then received a National Research Service Award for Individual Postdoctoral Fellows funded by the National Institute of Mental Health. This mixed-method investigation of the Collaborative Life Skills (CLS) program inspired her subsequent National Institute of Health Fogarty Global Health fellowship pilot-testing an adapted version of CLS (CLS-FUERTE) in Mexico. More recently as UCSF faculty, when not conducting clinical research, Dr. Haack splits her time between the HALP and Mood/Anxiety clinics providing behavioral/cognitive-behavioral services, supervision, and training.

SARAH HOLLEY is a Health Sciences Assistant Clinical Professor in the UCSF Department of Psychiatry and an Associate Professor at San Francisco State University. Dr. Holley is also a licensed clinical psychologist and provides counseling services at the UCSF Center for Reproductive Health. She received her B.A. from Yale University and her Ph.D. in Clinical Science from the University of California, Berkeley, and she is an alumnus of the UCSF CPTP internship and postdoctoral fellowship. Dr. Holley's research aims to better understand the connections between intimate relationship processes, emotional functioning, and mental and physical health. She is further interested the mechanisms underlying gender-associated differences within these domains. Dr. Holley co-leads the Clinical Seminar with Dr. Susanna Fryer.

WILLIAM D. HOOKER is Clinical Professor in the Department of Psychiatry and LPPI. He earned the B.A. degree in psychology from the University of California, Berkeley in 1978, the Ph.D. degree in clinical psychology from

Michigan State University in 1984, and was a postdoctoral Fellow in neuropsychology at the San Francisco VA Hospital in 1985. He is a Diplomate of the American Board of Professional Neuropsychology. His primary clinical interests are psychological and neuropsychological assessment for diagnostic and forensic purposes. Dr. Hooker has published in the areas of neuropsychology, electrophysiology, pharmacokinetics, computer assisted testing and psychological testing in the workplace.

JESSICA KEYSER is an Associate Clinical Professor in the Department of Psychiatry at the University of California, San Francisco. She received her B.A. in psychology from UC Berkeley and a Ph.D. in clinical psychology, with an emphasis in developmental psychopathology, from Temple University. She completed a clinical internship and postdoctoral fellowship at the San Francisco Veterans Affairs Medical Center (SFVAMC). Following this, she served first as a staff psychologist and then as Clinical Director of the Intensive Outpatient Program for addiction treatment at the SFVAMC. There, she provided evidence-based treatment to veterans with substance use and co-occurring disorders, conducted psychological evaluations for bariatric surgery patients, served as a therapist on a clinical trial testing a novel CBT treatment for the impact of killing in war, and supervised psychology and psychiatry trainees. Currently, Dr. Keyser works in UCSF's Eating Disorders Program conducting assessments and providing evidence-based individual and family treatment to youth with eating disorders. Additionally, she co-facilitates UCSF's Intensive Family Treatment Program for Eating Disorders and supervises psychiatry and psychology trainees.

JOEL KRAMER is a Professor in the Departments of Neurology, Psychiatry and Pediatrics, and directs the neuropsychology program at the UCSF Memory and Aging Center. He received a Psy.D. from Baylor University in 1982 and completed a post-doctoral fellowship in Neuropsychology at the V.A. Medical Center in Martinez. He is an ABPP diplomate in Clinical Neuropsychology. Current NIH-funded research activities include studies of the biological underpinnings of cognitive aging, and the behavioral and cognitive changes associated with neurodegeneration and cerebrovascular disease. Dr. Kramer has also been active in the development of neuropsychological measures of executive functioning and memory.

DANIEL LE GRANGE is a UCSF Benioff Professor in Children's Health in the Department of Psychiatry at UCSF where he also is the Eating Disorders Director. Dr. Le Grange also is Emeritus Professor of Psychiatry and Behavioral Neuroscience at The University of Chicago. Dr. Le Grange received his doctoral education at the Institute of Psychiatry, the University of London, and completed postdoctoral training at the University of London and at Stanford University School of Medicine, CA. Dr. Le Grange's research interests focuses primarily on treatment trials for adolescents with eating disorders. He has authored or co-authored more than 500 manuscripts, books, book chapters, and abstracts, and more than 200 presentations for national and international scientific meetings. Dr. Le Grange is a Fellow of the Academy for Eating Disorders, a Member of the Eating Disorders Research Society, Associate Editor for the *Journal of Eating Disorders* and *European Eating Disorders Review*, past Associate Editor of *BMC Psychiatry*, and serves on the Editorial Boards of *Eating Behaviours* and the *International Journal of Eating Disorders*. Over the past 17 years, Dr. Le Grange's research has been supported by the NIH, the National Health and Medical Research Council of Australia, as well as private foundation funding. He has been a Principal Investigator on several NIMH-funded treatment studies in the United States, and Australia, where he most recently completed a 6-year treatment study funded by the Baker Foundation in the Department of Pediatrics at the University of Melbourne, Australia. Currently, Dr. Le Grange is conducting two effectiveness studies for adolescents with eating disorders, as well as Site PI on another NIMH-funded multi-site treatment study. He was the 2013- 2014 recipient of the Presidential Chair

Award at UCSF, and the 2014 recipient of the Academy for Eating Disorders Leadership in Research Award, and the 2017 recipient of the *Eating Disorder Recovery Support* Hall of Fame Award for Research.

BEVERLY K. LEHR is Clinical Professor of Psychology in the Department of Psychiatry at UCSF and is a staff neuropsychologist in the LPPI Adult Psychiatry Clinic, where she coordinates training in Cognitive Behavior Therapy. She received her Ph.D. from the University of Wisconsin - Milwaukee in 1986, completed her clinical internship at the Palo Alto V.A. Medical Center, and a two-year postdoctoral fellowship at Rush-Presbyterian, St. Luke's Medical Center in Chicago, Illinois.

YAN LEYKIN is an Associate Professor at Palo Alto University, and an Assistant Clinical Professor in the Department of Psychiatry at the University of California, San Francisco. He received his B.A. in Psychology from University of California, Berkeley, and his M.A. and his Ph.D. in Clinical Psychology from the University of Pennsylvania. He completed his pre-doctoral psychology internship at the VA Palo Alto Health Care System, and a Postdoctoral Fellowship in the UCSF Psychology and Medicine Training Program. His two main research areas are: 1. depressive decision-making, including the manner in which depressed individuals make decisions and ways to improve decision-making of depressed persons, and 2. using information technology to offer access to empirically supported treatment options and other resources for individuals with depression. Dr. Leykin co-leads the Research Seminar with Dr. Janice Tsoh.

ALLISON LIBBY is a licensed clinical psychologist and an Assistant Professor in the Department of Psychiatry, University of California, San Francisco (UCSF). Dr. Libby provides individual, group, and family therapy to children and adolescents with anxiety, OCD spectrum disorders, and tic disorders. She teaches and supervises CPTP fellows and psychiatry residents and fellows in the areas of CBT and providing treatment to children and adolescents. Dr. Libby received her BA in Psychology from UCLA and her PsyD from PGSP-Stanford PsyD Consortium. Her interests are in the areas of evidence-based practices, exposure therapies, and culturally-informed treatments.

ALICIA F. LIEBERMAN holds the Irving B. Harris Endowed Chair of Infant Mental Health at the UCSF Department of Psychiatry, where she is Professor and Vice Chair for Faculty Development. She is Director of the Child Trauma Research Program at UCSF-Zuckerberg San Francisco General Hospital. She is also clinical consultant with the San Francisco Department of Human Services. She is the Director of the Early Trauma Treatment Network, a four-university national collaborative that is one of the centers of the SAMHSA-funded National Child Traumatic Stress Network. Dr. Lieberman received her BA from the Hebrew University of Jerusalem and Ph.D. from the John Hopkins University. Active in major national organizations involved with mental health in infancy and early childhood, she is on the board of directors and past President of Zero to Three: National Center for Infants, Toddlers and Families, and on the board of trustees of the Irving Harris Foundation. Dr. Lieberman has served on peer review panels of the National Institute of Mental Health. She is the author of *The Emotional World of the Toddler* (The Free Press, 1993/2018), which has been translated to several languages, and senior author of *Losing a Parent to Death in the Early Years: Treating Traumatic Bereavement in Infancy and Early Childhood* (Zero to Three Press, 2004), *Don't Hit My Mommy!: A Manual for Child-Parent Psychotherapy* (2015), and *Psychotherapy with Infants and Young Children: Repairing the Effect of Stress and Trauma on Early Attachment* (Guilford Press, 2008). She is the recipient of numerous awards, and most recently received the 2016 Rene Spitz Lifetime Achievement Award from the World Association of Infant Mental Health and the 2017 Whole Child Award from the Simms Mann Institute for her contributions to the treatment of traumatized young children and their families.

CHRISTIE ENJAY LIN is a Clinical Psychologist and Associate Clinical Professor at the UCSF STAR Center. She completed her clinical psychology doctorate at UC Santa Barbara, her clinical psychology pre-doctoral internship at Lucille Packard Children's Hospital/Children's Health Council, and her postdoctoral fellowship at UCLA. She also has doctoral training in the principals of applied behavior analysis; she is a certified behavior analyst. Her clinical and research interests are in the assessment and treatment of people with autism spectrum disorder (ASD) and other neurodevelopmental disorder (NDDs), including the overlap between core ASD features and co-occurring psychiatric conditions such as anxiety.

RACHEL LOEWY is an Associate Professor in the Department of Psychiatry at the University of California, San Francisco and a licensed clinical psychologist. She co-directs the Prodrome Assessment, Research and Treatment (PART) program, an early psychosis clinical research program. She also serves as an Associate Director of the NIMH-funded Clinical Services Research Training Program and Project Supervisor for the Public Psychiatry Fellowship at Zuckerberg San Francisco General Hospital. She received her B.A. in Psychology from Emory University, her M.A. in Psychology from the University of Pennsylvania, and her Ph.D. in Clinical Psychology from UCLA. She completed her pre-doctoral psychology internship at the Sepulveda VA (APA-accredited) and a Postdoctoral Fellowship in the UCSF Clinical Psychology Training Program. She joined the UCSF Department of Psychiatry faculty in 2006. Her NIH- and foundation-funded research focuses on early identification and intervention in psychotic disorders, etiology and pathophysiology of schizophrenia, and mental health services research in early psychosis treatment. Former fellows in Dr. Loewy's lab have obtained research faculty and clinical psychologist positions in academic psychiatry departments.

JENNIFER LY is an Assistant Professor and Attending Psychologist in the Hyperactivity, Attention, and Learning Problems (HALP) Clinic. She completed her undergraduate training at UCLA and received her doctorate in clinical science from UC Berkeley. She has extensive training and experience in screening, evaluating, and treating children and adolescents with developmental delays and behavioral or emotional difficulties. Dr. Ly's research and clinical interests are in the development and dissemination of evidence-based and culturally-sensitive treatments for youth who are at high risk for negative developmental outcomes due to factors such as prenatal substance exposure, disrupted attachment relationships, impoverished environments, and developmental disabilities. In the HALP Clinic, Dr. Ly has a variety of clinical, teaching, and supervision responsibilities

SCOTT MACKIN is a Clinical Neuropsychologist and Adjunct Professor in the UCSF Department of Psychiatry. Dr. Mackin received his PhD in clinical psychology at the Pennsylvania State University, completed his internship training in clinical neuropsychology at the Medical University of South Carolina, and completed his post-doctoral residency training in clinical neuropsychology at the at the University of California, Davis Alzheimer's Disease Center. Dr. Mackin's program of research is focused on delineating the relative contributions of cognitive impairment, structural brain abnormalities, and depression severity on disability in late life depression. Dr. Mackin's research is funded by the National Institute of Mental Health.

ASHLEY MALIKEN is a licensed clinical psychologist and Assistant Clinical Professor in the Department of Psychiatry at the University of California, San Francisco (UCSF). She also holds an appointment UC Berkeley. Dr. Maliken does evidence based treatment with teens, young adults and families in the Mood and Anxiety Program. She practices Dialectical Behavioral Therapy (DBT) with teens and young adults with chronic emotion dysregulation and suicidal behavior, and Cognitive Behavioral Therapy (CBT) for those with depression, anxiety and other mood disorders. She also teaches and supervises psychiatry and psychology trainees and

fellows and community clinicians in the broader Bay Area. Dr. Maliken attended college at Bucknell University and earned her PhD at the University of Washington. She completed her internship and postdoctoral fellowship at the University of Washington. Dr. Maliken is a strong supporter of work-life balance, and loves traveling, spending time with friends and family, and making her son laugh.

WILLIAM MARTINEZ is an Assistant Professor in the Division of Infant, Child, and Adolescent Psychiatry, Department of Psychiatry at the University of California, San Francisco. He is also the Director of Child and Adolescent Services (<https://psych.ucsf.edu/zsfg/cas>) at Zuckerberg San Francisco General Hospital. He received a dual B.A. in Psychology and Sociology from Drew University, a M.A. in Forensic Psychology from the City University of New York – John Jay College, and his Ph.D. in Clinical-Child Psychology from DePaul University in 2014. He completed his internship through the APA-accredited Multicultural Clinical Training Program at UCSF/Zuckerberg San Francisco General Hospital. He then completed a National Institute on Drug Abuse funded postdoctoral fellowship in the School of Public Health at the University of California, Berkeley through the Center for Environmental Research and Children’s Health. Dr. Martinez is a bilingual (Spanish) and bicultural licensed psychologist. Dr. Martinez’s primary clinical interests and expertise include bilingual psychological and psychoeducational evaluations, as well as the evidence-based assessment and treatment of traumatic stress, anxiety, and depressive disorders, particularly among immigrant and second-generation Latinx youth. His research interests include examining how social determinants of health (e.g., neighborhood characteristics, cultural factors) impact the mental health and risk-taking behaviors of immigrant and ethnic minority youth to inform implementation science efforts to reduce behavioral health disparities in these populations.

KEITH McBURNETT is a Professor in Psychiatry at LPPI. He trained in child clinical psychology at The University of Georgia and as a rehabilitation psychology intern (neuropsychology) at New York University Medical Center, graduating in 1989. He held a faculty appointment in Pediatrics at University of California at Irvine from 1990 to 1997. From 1997 through 2001, he held a faculty appointment in Child Psychiatry at the University of Chicago. He came to LPPI in 2001 to launch research and clinical programs in disruptive behavior disorders (ADHD, ODD, CD), in collaboration with Linda Pfiffner, Ph.D. Dr. McBurnett maintains an active clinical research program (multiple grants and clinical pharmacology trials; over 100 scientific publications), focusing on diagnostic categorization, treatment outcome, and biological factors (endocrine, neurocognitive) factors in child externalizing psychopathology. From 2003 through 2006, he served as Associate Editor of the *Journal of Abnormal Child Psychology*. He and Dr. Pfiffner edited a text, *Attention Deficit Hyperactivity Disorder: Concepts, Controversies, New Directions*, which was published in 2008. Dr. McBurnett’s most recent NIH grant investigates the relations among ADHD symptoms and Sluggish Cognitive Tempo.

DALE E. McNIEL is Professor of Clinical Psychology in the UCSF Department of Psychiatry and Chief Psychologist at LPPI. He earned the B.A. degree from Lewis and Clark College, and completed the Ph.D. in clinical psychology with a minor in neuropsychology at the University of Arizona. He completed a postdoctoral fellowship in the Department of Psychiatry at UCSF, and is Board Certified in both Clinical Neuropsychology and Forensic Psychology by the American Board of Professional Psychology (ABPP). He is a Fellow of the American Psychological Association (Divisions of Clinical Psychology and Psychology and Law), and is a former President of the Section on Clinical Emergencies and Crises in the APA’s Division of Clinical Psychology. His research interests focus primarily on violence and mental disorder, including issues such as the assessment of violence

potential, mental health courts, family violence and victims of violence, and enhancing clinical decision-making in the treatment of patients at risk for violence to self or others.

JOHN McQUAID is Professor of Clinical Psychiatry and Vice Chair for Adult Psychology in the Department of Psychiatry at UCSF. He is the Associate Chief of Staff for Mental Health at the San Francisco VA Health Care System. He completed his Ph.D. at the University of Oregon, and is an alumnus of the CPTP internship and postdoctoral fellowship. Dr. McQuaid's clinical expertise is in the use of cognitive-behavioral interventions for mood disorders, anxiety, and psychotic disorders. His research interests focus on the development of CBT interventions for psychiatric disorders as well as health behaviors and pain management. He recurrently serves as site investigator for a multisite study comparing prolonged exposure and cognitive processing therapy.

SARAH METZ is Health Sciences Assistant Clinical Professor in the Department of Psychiatry at UCSF. She completed the Psy.D. at Pepperdine University in 2009. Dr. Metz has extensive experience working with survivors of trauma, substance use disorders, combat Veterans, victims of violent crime, and complex PTSD. She has worked with both survivors and perpetrators of violence in a variety of settings, including outpatient clinics, prisons, and civil commitment facilities. Prior to coming to UCSF, Dr. Metz worked for the VA Palo Alto Healthcare System at the National Center for PTSD and the Homeless Veterans Rehabilitation Program, a residential treatment program for homeless Veterans. Dr. Metz has since joined the team at the UCSF-Trauma Recovery Center where she has worked as a staff psychologist, the Clinical Coordinator, and now the Acting Division Director of Trauma Recovery Services.

STUART B. MURRAY is an Assistant Professor in the Department of Psychiatry at UCSF, and is a licensed clinical psychologist. He received his Doctorate of Clinical Psychology and Ph.D from the University of Sydney, and completed a postdoctoral fellowship at the University of California, San Diego. Dr. Murray currently directs the UCSF Eating Disorder Program's Intensive Family Therapy program, and also serves as the Co-Director for the National Association for Males with Eating Disorders, and as Co-Chair for the Academy of Eating Disorders Special Interest Group on Male Eating Disorders. Dr. Murray is an active clinical researcher, and has published over 60 scientific articles relating to the treatment of eating disorders. In particular, Dr. Murray's research interests have been oriented towards eating disorders in males, and more broadly, towards elucidating treatment mechanisms and developing novel treatments for anorexia nervosa.

EDDIE ONG is a Clinical Professor of Psychology at the University of California, San Francisco, at the Zuckerberg San Francisco General Hospital campus (a UCSF teaching facility). He has been an Attending Psychologist in the inpatient service at San Francisco General Hospital since 1993 and has also been in charge of the Forensic Unit, 7L when the Unit Chief is absent. He earned his B.S. from Arizona State University in 1977 and his Ph.D. in clinical psychology from Oklahoma State University in 1984. Dr. Ong worked at the Richmond Area Multi-services Center (RAMS) in San Francisco, from 1984-1993, an APA-approved community training site for psychology interns. His last position was Chief Psychologist at RAMS. Dr. Ong also worked as the Summer Training Director at the Sunset Day Treatment Center from 1990 through 1993. His special interests include working with the chronically mentally ill Asian population and their families. He is fluent in both written and spoken Chinese. Dr. Ong supervises the inpatient rotation at SFGH, with strong emphasis on work with Asian patients.

MINA PARK is a licensed clinical psychologist and an Assistant Clinical Professor in the Department of Psychiatry the University of California, San Francisco. She is also a board certified behavior analyst (BCBA-D). Dr. Park earned her BA degree in psychology with a minor in Asian American Studies from the University of California, Los Angeles (UCLA). She earned her PhD from UC Santa Barbara before returning to UCLA to complete her internship and post-doctoral fellowship. Through the UCSF STAR Center for ASD and NDDs, Dr. Park provides comprehensive diagnostic evaluations and evidence-informed treatments. Her interests are in assessment and treatment of psychiatric comorbidities, social competence, and emotion dysregulation in ASD and NDDs.

AURAN PIATIGORSKY is a licensed clinical psychologist, and an Assistant Clinical Professor in the Department of Psychiatry, University of California, San Francisco (UCSF) as well as in the Department of Psychology, University of California, Berkeley. Dr. Piatigorsky treats and researches teens and young adults with emotion dysregulation and suicidal behavior in the Dialectical Behavior Therapy (DBT) clinic. He also teaches and supervises DBT/CBT to graduate students and fellows. Dr. Piatigorsky attended college at the University of Colorado, Boulder, he earned his MA and PhD at the University of California, Berkeley, and he completed his internship and postdoctoral fellowship in the Clinical Psychology Training Program (CPTP) at UCSF. Dr. Piatigorsky is also interested in sport psychology, and participating in outdoor sports.

LINDA PFIFFNER is a Professor in Residence in the Department of Psychiatry at LPPI and is a licensed Clinical Psychologist. She received her B.A. from UCLA and her Ph.D. from the State University of New York at Stony Brook. Prior to joining UCSF in 2001, she held academic appointments at UC Irvine and the University of Chicago. Her research and clinical interests are in the development of multi-targeted psychosocial treatments for ADHD, and in how psychosocial factors (especially family factors) predict the development of impairment and comorbid psychopathology in children with ADHD. She developed an integrated multicomponent behavioral intervention for the inattentive presentation of ADHD (Child Life and Attention Skills, CLAS) through funding from NIMH. Components of the intervention include parent and child skills groups and school-based intervention. She completed a 5-year NIMH-funded dual-site (with UC Berkeley) randomized controlled trial of the intervention and has since published a number of papers supporting the efficacy of the intervention. Dr. Piffner has adapted the clinic-based behavioral treatment model for delivery by school-based mental health professionals with students having attention and behavioral problems. With funding from the Institute of Education Sciences (IES)/US Department of Education, she completed a 4-year cluster randomized controlled trial of the intervention (Collaborative Life Skills Program). The project includes training local public school district mental health providers to implement the intervention in their schools. She is currently conducting a 4-year development grant from IES to develop a web-based, remote training program for school mental health providers in implementation of CLS. She is also beginning work on a project to develop a mobile health application to improve parent adherence to behavioral treatment. Her work in the area of developmental psychopathology includes publications examining parent psychopathology, parenting practices and social factors predictive of impairment and comorbid internalizing and externalizing disorders among children with ADHD.

JASON M. SATTERFIELD is Professor of Clinical Medicine, Director of Social and Behavioral Sciences, and Director of Behavioral Medicine in the Division of General Internal Medicine at the University of California San Francisco. He received his Ph.D. in clinical psychology from the University of Pennsylvania where he worked with Drs. Martin Seligman and Aaron T. Beck on cognitive models of bias, risk taking, depression, and

aggression. Dr. Satterfield's work has included adaptations to cognitive-behavioral therapy groups for LGBTI and other underserved, medically-ill populations and CBT interventions for patients at the "beginning of the end of life." Dr. Satterfield's current interests include the integration of behavioral science in medical education, dissemination and implementation of evidence-based behavioral practices, and educational strategies to address health care disparities. His current projects include integrated behavioral health models for primary care, screening and brief interventions for substance abuse, and the integration of social and behavioral sciences in medical school and residency curricula. He is currently a member of the NIH Social and Behavioral Sciences Curriculum Consortium and the NIH Evidence-Based Practice Training Council. He co-authored the AAMC Behavioral Science report and serves on the behavioral science subcommittee for MCAT revisions. He evenly divides his time between ongoing patient care, teaching, and clinical research.

ESME A.L. SHALLER is a licensed clinical psychologist and the Clinical Director of outpatient services for Child and Adolescent Psychiatry at Langley Porter. She is also the Director of the Dialectical Behavior Therapy program. Dr. Shaller received her B.A. in Psychology from U.C. Berkeley and her Ph.D. in clinical psychology from the State University of New York, Stony Brook. She completed her psychology internship at the Zucker Hillside Hospital at Long Island Jewish Medical Center in Queens. In both her research and clinical work, Dr. Shaller has specialized in adolescence. She has worked with teens in a variety of settings, including inpatient, residential care, and an alternative high school. Her expertise in working with acute and multi-stressed teens has enabled Dr. Shaller to study the way in which their relationships impact psychopathology and vice versa. Dr. Shaller is trained in cognitive and dialectical behavior therapy, structural family therapy, and theories of psychotherapy integration. She is especially interested in bridging the gap between research and clinical practice; Dr. Shaller is deeply committed to teaching and training and has won several teaching awards. She is an Associate Clinical Professor in Psychiatry at Langley Porter and in Psychology at UC Berkeley.

DIANNE SHUMAY is Associate Director of Psycho-oncology at the University of California at San Francisco Helen Diller Family Comprehensive Cancer Center and a Health Sciences Clinical Assistant Professor in the Department of Psychiatry. Dr. Shumay is a clinical health psychologist whose research and clinical work is focused on helping people with cancer and medical illness. She is a specialist in physiological self-regulation and mind/body approaches, and much of her work targets the psychological and physical symptoms of cancer and cancer treatment, such as anxiety, depression, insomnia, pain, fatigue and other symptoms with behavioral approaches including CBT, ACT and mindfulness. She received her M.A. from Stanford University and Ph.D. in clinical psychology from the University of Hawaii at Manoa. She completed a pre-doctoral internship with an emphasis in medical health psychology at the University of Florida and was a visiting scholar at Manchester College Oxford University, UK. She also completed a post-doctoral fellowship in palliative care and hospice at the VA Palo Alto. Her current research activities include studies in anxiety and fear of recurrence for cancer survivors, evidence-based methods for screening and intervening in cancer-related distress; and developing novel interventions for cancer patients and their families.

MARTHA SHUMWAY is Associate Professor in Residence in the UCSF Department of Psychiatry. She holds a Ph.D. in quantitative psychology from the University of California, Berkeley. She conducts research on the outcomes and costs of health and mental health services with emphases on methodology and underserved populations. Dr. Shumway has played a central role in the development and conduct of research at the UCSF/ZSFG Trauma Recovery Center since its inception in 2001 and has received funding from a UCSF Hellman Family Award and the National Institute of Mental Health for methodological research related to posttraumatic

stress disorder. Dr. Shumway is co-author of the textbook *Cost-Outcome Methods for Mental Health* and serves as a regular grant reviewer for the National Institutes of Health and the National Institute on Disability and Rehabilitation Research. She recently completed a term of service as Associate Statistical Editor for the *Journal of Traumatic Stress* and is a member of the Department of Psychiatry's Biostatistics Consultation Core.

JAMES L. SORENSEN is Professor in the UCSF Department of Psychiatry at Zuckerberg San Francisco General Hospital (ZSFG). He earned the Ph.D. in clinical psychology at the University of Rochester in 1975. For three years he was assistant professor in the clinical psychology training program at Bowling Green State University, after which he took a National Research Service Award postdoctoral traineeship at UCSF. He served as Chief of Substance Abuse Services at SFGH for 13 years. His research has focused on developing better treatments to help people with substance use disorders, with increasing attention to the ethical issues facing clinicians treating substance use disorders. Dr. Sorensen is a past member of the NIH National Advisory Council on Drug Abuse, has chaired the Services Research Review Committee at National Institute on Drug Abuse, and is currently a member of the Behavioral and Social Consequences of HIV/AIDS Study Section NIH. He serves on the editorial board of *Drug and Alcohol Dependence*, *Journal of Substance Abuse Treatment*, and *Addiction Science & Clinical Practice*. He is senior author of *A Family Like Yours: Breaking the Patterns of Drug Abuse* (Harper & Row), *Preventing AIDS in Drug Users and Their Sexual Partners* (Guilford), and senior editor of *Drug Abuse Treatment Through Collaboration: Practice and Research Partnerships That Work* (American Psychological Association). Dr. Sorensen is active in teaching with several programs in addition to the CPTP, including leadership of the Drug Abuse Treatment and Services Research Postdoctoral Training Program, co-leading the Center for AIDS Prevention Studies Visiting Professor Program as well as the Learning for Early Careers in Addiction and Diversity (LEAD) research education training program. In 2015 Dr. Sorensen received the Miracles Tribute Award for Lifetime Achievement and Outstanding Service in Addiction and Co-Occurring Disorders from Constellation Behavioral Health. Recently Dr. Sorensen has focused on understanding how front-line staff cope with ethical issues as they treat substance use disorders. In 2018-19 he gained an international perspective on these issues as a Fulbright Fellow at University of Calgary in Alberta Canada.

MARINA TOLOU-SHAMS is a Professor In Residence, Director of the Division of Infant, Child and Adolescent Psychiatry, Deputy Vice Chair for Research and Chief Psychologist in the Department of Psychiatry at Zuckerberg San Francisco General Hospital. She received her B.A. in Psychology and French Literature at the University of California, San Diego and her Ph.D. in Clinical Psychology at the University of Illinois at Chicago. Prior to joining the faculty at UC San Francisco, she completed her pre and postdoctoral training through the Brown University Psychology Training Consortium and was on the Alpert Medical School of Brown University faculty in the Department of Psychiatry and Human Behavior since 2006. She is trained as a pediatric and forensic psychologist and has many years of clinical experience with assessing and treating high-risk adolescents and their families. Dr. Tolou-Shams' research interests focus on the intersection of juvenile justice and behavioral health. More specifically, her studies aim to understand more about efficacious ways to improve psychiatric, substance use, HIV/sexual health and legal outcomes for court-involved, non-incarcerated youth. Her program of research seeks to contribute to direct clinical practice as well as structural-level intervention and public policy to improve health outcomes for underserved youth and families. Her funded studies involve: 1) a two- year longitudinal assessment of behavioral health and legal outcomes for a cohort of 400 first-time juvenile offenders; 2) an efficacy trial of a gender-responsive trauma-informed drug use treatment for juvenile justice girls; and 3) a family-based telehealth intervention for system-involved youth in

out-of-home placement. Other collaborations include studying mHealth intervention for treatment engagement among youth on probation and dating violence prevention for justice-involved girls.

D. ANDREW TOMPKINS is an Associate Clinical Professor, Director of the Division of Substance Abuse and Addiction Medicine in the Department of Psychiatry at Zuckerberg San Francisco General Hospital. He received his BS in Biology and English at Emory University, his MD at New York Medical College in Valhalla, NY, and an MHS in Clinical Investigation from The Johns Hopkins Bloomberg School of Public Health. He completed his general psychiatric residency training and post-doctoral fellowship in behavioral pharmacology / addictions at Johns Hopkins University. Dr. Tompkins has over 10 years' experience treating patients with substance use disorders and co-occurring psychiatric and medical conditions. His research interests are at the intersection of pain and addiction. His studies aim to improve opioid use disorder (OUD) treatment as well as acute and chronic pain treatment in patients with OUD. He has active SAMHSA funding examining the use of patient navigators and contingency management for improving linkage to community based treatment providers in patients initiating medication assisted treatment while hospitalized. He also has NIDA funding as the site PI in a randomized controlled multi-site clinical trial of two buprenorphine formulations on maternal and infant outcomes in pregnant women with OUD. Lastly, he has ongoing pilot studies using Departmental funds investigating the effect of yoga on chronic pain in patients enrolled in an opioid treatment program and using quantitative sensory testing to evaluate acute analgesia and abuse liability in patients on buprenorphine exposed to hydromorphone and ketamine combinations.

JANICE Y. TSOH is Professor in Residence in the Department of Psychiatry at LPPI and a licensed clinical psychologist. She received her B.A. from the State University of New York at Binghamton in 1990 and her Ph.D. in clinical psychology from the University of Rhode Island in 1995. She completed her clinical internship at the University of Mississippi Medical Center/VA Medical Center Consortium specializing in behavioral medicine. She completed a postdoctoral fellowship in cancer prevention at the MD Anderson Cancer Center in Houston, Texas and a fellowship in substance abuse treatment research at UCSF. Dr. Tsoh's research program has been supported by the National Institute on Drug Abuse (NIDA), the American Cancer Society (ACS) and the California Tobacco Related Disease Research Program. Her research focuses on nicotine dependence and depression, and smoking cessation treatment in special populations including Asian Americans in community and primary care settings, depressed patients, and smokers in drug abuse treatment. Dr. Tsoh co-leads the Research Seminar with Dr. Yan Leykin.

CHRISTINA WEYER JAMORA is Health Sciences Assistant Clinical Professor in the UCSF Dept. of Psychiatry, and is a licensed psychologist. She is the director of the SFGH Neuropsychology Service. Dr. Weyer Jamora received her B.S. in Nursing with a minor in Psychology from Indiana University-Southeast and her Ph.D. in Clinical Psychology from the California School of Professional Psychology-San Francisco. She completed her psychology internship at the Jersey Shore University Medical Center in Neptune, New Jersey. She completed a 2 year postdoctoral fellowship in clinical neuropsychology at San Francisco General Hospital and San Francisco Clinical Neurosciences. In both her research and clinical work, Dr. Weyer Jamora has specialized in traumatic brain injury and health psychology. She has worked in a variety of settings, including inpatient, outpatient, SFGH department of neurosurgery, private practice, and SFGH primary care. Her expertise in working with the traumatically injured and other medical illnesses has enabled Dr. Weyer Jamora to study the way in which their recovery and disease management are impacted by issues of emotional distress and decisional capacity. Dr.

Weyer Jamora is trained in cognitive behavioral therapy, acceptance and commitment therapy, neurological rehabilitation, and theories of motivational interviewing.

CHRISTINE A. ZALECKI is an Associate Clinical Professor in the Department of Psychiatry and Director of Clinical Services in the Hyperactivity, Attention, and Learning Problems (HALP) Clinic at UCSF. She is a licensed clinical psychologist who specializes in diagnostic assessment of ADHD and learning disorders, and psychosocial treatment of children and adolescents with ADHD and behavior disorders. Dr. Zalecki conducts diagnostic evaluations, leads parent management training groups and child skills groups, and also provides individual and family therapy services and school consultation. She provides clinical supervision and training for trainees in the Clinical Psychology Training Program (CPTP) and the psychiatry fellowship program. Dr. Zalecki received her BA in psychology from UC Berkeley and her PhD in clinical science from UC Berkeley. She subsequently completed her pre-doctoral internship and post-doctoral fellowship at UCSF in the CPTP.

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: 7/31/2019

Internship Program Admissions

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:

The UCSF Clinical Psychology Training Program offers a two-year full time fellowship comprised of a one-year general clinical psychology internship (APA-accredited) and a one-year postdoctoral clinical and clinical research fellowship, based on the scientist-practitioner model. Graduates are expected to pursue careers emphasizing research and training in academic and academic/research settings, including those affiliated with health and mental health service systems. Over the last ten years, 90% of our graduates have obtained research or academic positions upon leaving our program.

The program is designed to train clinical psychologists who are committed to an academic and/or research career, have a strong record of both clinical and research experience, and are research oriented and want to work sensitively and competently with underserved and vulnerable populations.

The program offers training in health service delivery in a wide variety of clinical settings. In addition, the program provides specialized research training with a faculty mentor in areas including violence and trauma in adults and children, ADHD/behavior disorders, eating disorders, juvenile justice and behavioral health, neuropsychology, posttraumatic stress disorder, and substance use disorders treatment research and research-practice linkages.

In addition to our standard two-year full time pre/postdoctoral fellowship, we have added a half-time internship track through a partial affiliation with the Clinical Science Program in the Dept. of Psychology at the University of California Berkeley (UCB). Please note: only UCB applicants are eligible for this internship-only two-year half time track.

Does the program require that applicants have received a minimum number of hours of the following at time of application? No

If Yes, indicate how many: (minimum of 400 total intervention and/or assessment practicum hours)

Total Direct Contact Intervention Hours	No	Amount: not applicable
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Total Direct Contact Assessment Hours	No	Amount: not applicable
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Describe any other required minimum criteria used to screen applicants:

Application Requirements

- a minimum of 400 practicum hours (intervention and/or assessment)
- comprehensive exams passed
- dissertation proposal approved
- a minimum of three years of graduate training
- doctoral degree program must be APA-accredited in Clinical Psychology
- submission of official graduate degree(s) transcripts

Each applicant is evaluated in the following areas:

- clinical training, including experience in assessment and psychotherapy
- research interest as documented by training obtained and productivity (especially presentations, publications, and grants)
- overall excellence as a psychologist as shown by breadth and depth of experiences and letters of recommendation
- appropriateness for faculty research mentor(s) chosen by applicant, as shown by work done relevant to the mentor's research area and familiarity and fit with the mentor's work
- progress toward dissertation completion
- evidence of accomplishments indicating commitment to an academic and/or research career

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	\$32,480	
Annual Stipend/Salary for Half-time Interns	\$16,240	
Program provides access to medical insurance for intern?	Yes	
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	
Coverage of family member(s) available?	Yes	
Coverage of legally married partner available?	Yes	
Coverage of domestic partner available?	Yes	
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	160	
Hours of Annual Paid Sick Leave	96	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes	
Other Benefits (please describe): 40 hours of annual professional leave.		
*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table		

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2015-2018	
Total # of interns who were in the 3 cohorts	15	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	0	0
Military health center	0	0
Academic health center	14	0
Other medical center or hospital	0	0
Psychiatric hospital	0	0
Academic university/department	0	1
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

Note: "PD" = Post-doctoral residency position; "EP" = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.

APPIC MATCH POLICIES

In order for everyone to have access to the most current Match Policies, APPIC has asked that training programs no longer list them, instead please visit APPIC's website for up-to-date information. This 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 internship applicant.

<https://www.appic.org/internships/Match/Match-Policies>

UCSF NON-DISCRIMINATION POLICY

It is the policy of the University not to engage in discrimination against or harassment of any person employed or seeking employment with the University of California on the basis of race, color, national origin, religion, sex, gender, gender expression, gender identity, pregnancy, physical or mental disability, medical condition (cancer-related or genetic characteristics), genetic information (including family medical history), ancestry, marital status, age, sexual orientation, citizenship, or service in the uniformed services. This policy applies to all employment practices, including recruitment, selection, promotion, transfer, merit increase, salary, training and development, demotion, and separation. This policy is intended to be consistent with the provisions of applicable state and federal laws and University policies.

University policy also prohibits retaliation against any employee or person seeking employment for bringing a complaint of discrimination or harassment pursuant to this policy. This policy also prohibits retaliation against a person who assists someone with a complaint of discrimination or harassment, or participates in any manner in an investigation or resolution of a complaint of discrimination or harassment. Retaliation includes threats, intimidation, reprisals, and/or adverse actions related to employment Nondiscrimination and Affirmative Action Policy Regarding Academic and Staff Employment.

In addition, it is the policy of the University to undertake affirmative action, consistent with its obligations as a Federal contractor, for minorities and women, for persons with disabilities, and for covered veterans. The University commits itself to apply every good faith effort to achieve prompt and full utilization of minorities and women in all segments of its workforce where deficiencies exist. These efforts conform to all current legal and regulatory requirements, and are consistent with University standards of quality and excellence.

In conformance with Federal regulations, written affirmative action plans shall be prepared and maintained by each campus of the University, by the Lawrence Berkeley National Laboratory, by the Office of the President, and by the Division of Agriculture and Natural Resources. Such plans shall be reviewed and approved by the Office of the President and the Office of the General Counsel before they are officially promulgated.

Inquiries regarding the University of California, San Francisco's equal opportunity policies may be directed to:

Nyoki Sacramento, JD
Assistant Vice-Chancellor & Director
Office of Diversity and Outreach
3333 California Street Suite S-16
San Francisco, CA 94143-1249
415-476-7700
DiversityOutreach@ucsf.edu

INTERNSHIP ACCREDITATION

The UCSF Clinical Psychology Training Program Doctoral Internship Year has earned APA accreditation through 2027. For more information regarding our accreditation, please contact:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
Phone: 202-336-5979
Fax: 202-336-5978
TDD/TTY: 202-336-6123

Web: www.apa.org