

Postcards from the edge: Chapter II - The halfway point of internship

Rebecca Pillai Riddell

Behavioural Medicine Intern, London Health Sciences Centre
Campus Co-ordinator, Student Section Executive

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What a weird time of the year! You can feel that winter is not yet ready to let go and yet signs of spring are popping up everywhere. It was February-March when I polled a dozen interns and, like the weather, interns also found themselves at the beginning and end of things.

DISSERTATION: WORKING HARD OR HARDLY WORKING

Despite being given no parameters about what to write about, almost every person brought up the D word. People's feelings varied from relief to terror. In September, no one had completed the university/senate defense. However, by midinternship four people had completed or scheduled their final defense. Everyone belonging to this subsample reported that their data collection, analysis plan and most of their writing was complete at the beginning of internship. Hmm...if I was a betting woman, I would think I have discovered a few sure-fire predictors of completing the dissertation on internship. On the other end of the spectrum were some interns who had given up the notion of completing their dissertation on internship and were working towards getting back some balance in their lives. Interestingly they were all students who had careers before starting anew in grad school and seemed to take a "bigger picture view" of life. The remaining interns were in different stages of the process – mainly resting in the collecting data to beginning

analyses stage. It was this latter group that expressed the most anxiety, fear and dread. As a whole, many felt too tired to come home to write yet too guilty to give up the idea that it would be done on internship. Others expressed frustration about unexpected delays that had to do with data collection. It appeared that happiness in this area relates to either relishing being done or repressing what needs to be done!

UNPOLITICAL CORRECTNESS 101: WORKING WITH OTHER DISCIPLINES

Multidisciplinary, transdisciplinary, interdisciplinary...whatever the PC term of the day is, many interns expressed opinions about working with other health professionals on internship. While positives were voiced, such as seeing the benefits of comprehensive patient care or sharpening teamwork skills, the increased exposure to other professions also provoked some concerns. Issues dealing with the medical hierarchy was mentioned, especially the downward comparison psychology interns felt when working with medical residents. Most medical residents have had as many years of university training as psychology interns (sometimes less!!), yet it felt that psychology interns do not command the same level of respect. Moreover, others discovered that allied health professionals (e.g. social workers) could actually be the main service providers in certain mental health programs. One intern expressed

disillusionment because these areas of professional overlap were potentially dangerous due to the higher cost of psychologists. She added that unique areas in the practice of psychology, such as case management, supervision, research, and program evaluation, were all areas that were distant to her desire to work one-on-one with clients. In general, interns reported developing a broader understanding of psychologists' roles in a polydisciplinary context. This more informed understanding also served as a catalyst to redefine their notions of what they want to do after internship.

WHEN I GROW UP, I WANNA BE...

Although it seemed like we had just gotten here, thoughts of post-internship jobs were already circulating. Those who wanted to be academics (post-doc or faculty positions) reported having begun the search before even getting to internship! Trying to start up a new job while simultaneously looking for a new job is most definitely a struggle – especially when you need to factor in another geographic move of yourself and/or family! The time commitment required to conduct a postdoctoral fellow/faculty position job search can be quite large. Interns that were free of their dissertations still did not have their evenings/weekends free. Instead they were spent putting together job applications, potential supervisor meetings, job talks, grant applications, and manuscripts. This was on top of their regular overflow of clinical work. Those who had not defended yet, also had their dissertation competing for their time. People who were looking at clinical positions were beginning to put their feelers out. Conferences in January-February appeared especially fruitful places to find clinical and clinical-research postdocs. For those who had hoped to work where they

interned, some were disappointed to hear that there would be no openings in September thus wrinkling their plans for a smooth transition from intern to staff member. Others reported that interviews were beginning in their training hospitals and that they hoped coming from “within” would help them obtain a spot. The value of broad clinical training on internship was also emphasized, as this made them more suited for the reality of this year's clinician job market. Overall, regardless of how we were pursuing own interpretation of scientist-practitioner, one common report was the nervous feeling about being a “real psychologist”. Many interns reported that although they were looking forward to being done with graduate school, there were feelings of apprehension about being on their own. Of note, this feeling appeared to be expressed more strongly by interns who planned to register with provincial bodies that did not require supervised post-doctoral clinical practice.

FAMILY: PAST, PRESENT & FUTURE

Although internship is a professional year, it very much impacts one's personal life. For those who had to move away from loved ones, time had invariably helped the coping process. A couple of people reported that the first few months were extremely difficult personally, but knowing that more of internship was behind them then ahead of them was cause for optimism. Another intern expressed doubts that the professional gains of moving to obtain a full-time internship was worth the personal toll it had taken on her and her family. On the other hand there were those who were interning close to family and described it as a double-edged sword. It was wonderful to be within an established support network but this was tempered with the frustration that family members did not understand why they could

not spend every weekend with them! Furthermore, due to a strong contingent of married females in the sample, the idea of starting families was at the forefront of many minds. For some interns, the time had come for them to begin starting a family. Internship was their last hurdle and the idea of being able to get pregnant “right now” and still finish the internship was exciting. Others were struggling with how to balance the demands of beginning a career with beginning a family. The old adage that “there is no perfect time” appeared to ring true for some and thoughts of family were currently backburnered. There was also another group of interns who did not mention kids or family and were trying to figure out whether to set out for adventure in a new city, return to their home university city or continue to live in the city in which they were interning.

CLOSING NOTES:

It appears that the middle of internship can be more of a limbo period than any other period during graduate psychology training.

Unlike other requirements of graduate school, the end of internship is not subject to procrastination and important decisions must be made. This has forced many interns to live in a stage that hovers between the present and the future - a stage where you must spend a lot of your present time thinking about future steps. The final chapter will be geared towards providing tips for future interns. If you have a few words of wisdom or a piece of practical advice for the new crop, please feel free to drop me a line at beccap@interchange.ubc.ca. I would like to thank the following interns for sharing their thoughts and experiences despite their very busy schedules. From coast-to-coast they were Joanne Gillespie (IWK Health Centre; Halifax), Erin Warriner, Karen Bax, Melanie Edwards, & Trish Doris (London Health Sciences Centre; London), Vaishali Raval (The Children’s Hospital; Denver, CO), Candice Murray (Alberta Children’s Hospital; Calgary) and Carmen Caelian & Tina Wang (BC Children’s Hospital; Vancouver). I would also like to thank the three other intern respondents who asked to remain anonymous.