Postdoctoral Internships: Potential Adverse Impacts on Internships, Dissertations, and Trainees

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Increased consideration of transforming the predoctoral psychology internship into a postdoctoral training experience has resulted from changes in the training and reimbursement for psychology trainees, concerns about employment of recent graduates, and the perceived limited status of psychology interns within health care settings. Whether this fundamental shift in psychology's training paradigm could resolve any of the problems that have led to its deliberation is not known. The authors identify problems with a postdoctoral internship which may be as thorny as the problems it is intended to ameliorate. It may have unintended adverse effects (e.g., risk of reduced quality in training and dissertations, new pressures on internship programs and trainees, increased licensure quandaries). Until a highly detailed proposal is developed and its full range of potential consequences are analyzed and debated, it is premature for professional organizations to conclude whether such fundamental change should be pursued.

**KEY WORDS:** internship; postdoctoral; dissertation; training.

The predoctoral internship, the most intensive clinical training experience within psychology graduate education, dates back to the Boulder Conference (American Psychological Association [APA], Committee on Training in Clinical Psychology, 1947; Rainey, 1950). It is the cardinal clinical training experience within the scientist–practitioner training model. The optimal timing of the internship has become a matter of controversy in recent years, with renewed consideration of shifting the internship to after the award of the doctorate.

The timing of the internship has been debated in several organizations, such as the APA Council of Representatives, the APA Board of Educational Affairs (APA BEA), the APA Committee on Accreditation (APA CoA), the American Psychological Association of Graduate Students (APAGS), the Association of State and Provincial Psychology Boards (ASPPB), the Council of Counseling Psychology Training Programs (CCPTP), the National Council of Schools and Programs in Professional Psychology (NCSSPP), and the Council of Graduate Departments of Psychology (COGDP).

Some groups, such as the Association of Counseling Center Training Agencies (ACCTA) and the Board of Directors of the Association of Psychology Postdoctoral and Internship Centers (APPIC) have voted to retain the internship at the predoctoral level. Other groups, such as the Council of University Directors of Clinical Psychology (CUDCP) and the Association of Medical School Psychologists (AMSP; Daugherty, 1997) have reported that majorities of their membership favor changing the timing of the internship.

The APA BEA Working Group on the Issue of Professional Psychology Internship Training was instructed to prepare an impact analysis of a proposal to move the internship to the postdoctoral year, focusing on: (a) accreditation policy and procedure implications; (b) training funds and structure implications;
and (c) licensing implications (APA BEA, 1998). We believe that in addition to that charge it is essential to analyze the potential impact of a postdoctoral internship on the quality of doctoral training. In this paper, we review some of the hoped for benefits and discuss several caveats associated with making the internship a postdoctoral experience.

POTENTIAL BENEFITS OF POSTDOCTORAL INTERNSHIPS

Several arguments have been advanced to transform the predoctoral internship to a postdoctoral experience. Arguments favoring and opposing rescheduling of the internship based on its potential impact on a number of dimensions are summarized in Table 1.

One line of reasoning proponents of a postdoctoral internship articulate is that the changes, which have evolved within doctoral training, may render the rationale for the current timing of the internship obsolete. Programs now appear to provide trainees with more scientific and practical knowledge and proficiency than they did when the scientist-practitioner model was developed. For example, practicum experiences and the time students take to complete degrees in scientist-practitioner doctoral programs have lengthened, giving trainees more clinical experiences by the time they now begin internship. Similarly, trainees related work experiences also often provide further preinternship clinical experiences. Especially with the advent of professional schools of psychology, more training is provided by faculty members who are clinically active. Consequently, students’ clinical skills at the time of the internship may be better developed than they were decades ago, permitting programs to have greater awareness of and confidence in students’ clinical skills before they begin internship. Proponents believe that these additional practical experiences may be enough to award a degree, as is done in other disciplines, which either do not require as much clinical training (e.g., social work), or as in others such as medicine, where the residency follows the award of the degree.

A second area of potential benefit concerns how students progress through doctoral programs. The change has been hypothesized to decrease the number of students who remain “all but dissertation” (ABD). It also would relieve doctoral programs from their current awkward responsibility as outlined within the APA accreditation criteria of “requiring... completion of an internship prior to awarding the doctoral degree” (APA, Office of Program Consultation and Accreditation [OPCA], 1996, p. 5). Proponents of a postdoctoral internship criticize the current model in that the doctoral programs have relatively little control of the internship, which often takes place within institutions that are independent of the degree-granting programs.

A third general area of hoped-for benefit is financial. Proponents posit that completion of the doctoral degree before internship might move up interns’ eligibility for licensure, thereby permitting them access to reimbursement by third parties, including governmental programs (e.g., Medicare). This, in turn, theoretically might increase interns’ ability to generate revenue during the internship (e.g., by helping them meet entry criteria of provider networks and qualifying them for reimbursement at relatively higher levels), as well as their marketability immediately following internship. Also, it might set the clock running earlier for new psychologists to become eligible for licensure or participation in third-party payers’ networks. Increased revenues to internships, if realized, could defray the costs of training, increase programs’ viability, and ease the imbalance between the number of intern applicants and the available training slots.

A fourth factor contributing to consideration of a postdoctoral internship is the status of trainees. The argument here is that by being “doctors” by the time of the internship, they would be accorded increased status by patients, administrators, and trainees and professionals in other disciplines. Their training would be understood better because it would more closely parallel training in medicine. Such increased status also potentially might increase the probability that interns become eligible for graduate medical education (GME) revenues through Medicare, the primary funding source for medical residents in the United States.

A fifth hypothetical benefit is that it might lower trainees’ stress related to training. For example, dissertations might be more likely to be completed while trainees were in the geographical area of their doctoral programs, rather than elsewhere while on internship, increasing their access to faculty and research facilities. Similarly, interns would be less preoccupied with completing the dissertation during the internship, so they would have greater ability to focus on their clinical training. It also is hoped that it could decrease disruption of aspects of trainees’ personal lives by lowering the probability that they would have to move back from the internship to the locale of their doctoral program to complete their dissertation.
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| Responsibilities for training for doctoral programs and internships | Doctoral programs would no longer be responsible for the internship as a degree requirement | Doctoral programs should retain some responsibility for intensive clinical training. The public has a reasonable expectation that doctoral programs have a major responsibility for ensuring the quality of graduates' preparation for practice and that award of the degree is in part a "stamp of approval."  
Doctoral programs may be less motivated to provide quality practica training as a means of helping students secure internships if they do not have a clear stake in students' completion of internships.  
Doctoral programs also have limited control over practica (i.e., not just internships) but this has never been considered a reason to delete practica from doctoral programs.  
Internships are now accredited separately from academic programs, reflecting that they already have great responsibility for applied professional training. The proposed change would actually reduce their power relative to trainees by eliminating their collaboration with doctoral programs. Also, currently most applied degrees are granted by professional schools, whose faculty, like that of internships, are likely to be more clinically focused than traditional programs. The faculty at professional schools are likely to have major interests and experience in clinical practice.  
Would complicate recruitment if trainees were required to have completed degree prior to being eligible for internship (e.g., what if they fail to complete the dissertation and defend it by the start of the internship?)  
The internship continues to be the most intensive clinical training experience, with a longstanding tradition at the predoctoral level. At the internship level, trainees and faculty recognize a need for additional intensive, supervised clinical experiences. Without the internship as a requirement for the doctorate, graduates would be less adequately trained and more narrowly trained when they completed their doctorate. The change might diminish advocacy by academic faculty on behalf of interns if there is conflict between an intern and the faculty of the internship. |
<p>| Responsibility for applied training        | Would place greater responsibility for applied professional training in the hands of psychologists whose time and experience is most heavily invested in it |                                                                                                                                   |
| Recruitment for internships               | Would increase consistency of applicants by requiring that they have completed requirements for doctoral degree prior to internship |                                                                                                                                                                                                                 |
| Training paradigm                         | The Boulder Model initially integrated practice and research when there was less practical training prior to internship and academic departments lacked training facilities. The internship now comes after trainees have already accrued considerable clinical experience, increasing trainees' readiness for graduation and entry level positions |                                                                                                                                   |
| Advocacy for interns                      |                                                                                     | (Continued)                                                                                                                                                                                                         |</p>
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<tr>
<td>Financial implications for doctoral programs</td>
<td>Would reduce administrative costs related to tracking students during internship.</td>
<td>Changes in costs and tuition revenues might affect doctoral programs. Shortfalls could require other cost adjustments to ensure programs are supported adequately. Cost structure may be adjusted to reflect actual expenses.</td>
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<td>Financial implications for internship/residency programs</td>
<td>Could result in loss of tuition revenues during internship.</td>
<td>It is not known if third-party payers would raise reimbursement rates. Third parties have financial stakes in controlling costs through low remuneration for trainees and professionals. Unless sites were reimbursed at higher rates, it is unlikely that institutions could increase stipends commensurate with other professions (e.g., medical residents).</td>
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<td>Trainees' eligibility for third-party reimbursement and participation in provider panels</td>
<td>May allow trainees to be eligible for payment by additional third-party payers.</td>
<td>There is no evidence that the change would affect reimbursement for trainees. It is not clear that third-party payers would consider a change in training sequence or the title of trainees to be sufficient reasons to allow trainees to participate in provider panels. Many third parties require a few years of postdegree experience for eligibility. Psychologists' eligibility for Medicare Graduate Medical Education (GME) funding is not dependent on whether the degree has been granted or not. Although reimbursement is a problem, changing the timing of the internship seems unlikely to solve it. Might complicate relationships between doctoral programs and internships if students have not completed requirements for doctoral degree by start date of internship. Should shift determination of need and standards for internship training from the profession to legislatures and psychology boards by removing the internship requirement from doctoral programs' purview.</td>
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<td>Relationships between doctoral programs and internships</td>
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<tr>
<td>Determination of supervised clinical experiences required for the training of psychologists</td>
<td>Licensing implications. Shifting the timing of the internship may decrease the barriers for licensure and would not eliminate internship as a necessary requirement for licensure.</td>
<td>Major efforts within psychology boards and legislatures would be needed to revise jurisdictions' licensing laws to accommodate the change. The process could jeopardize current licensure standards (e.g., championing master's level licensure) by opening it to the legislative process, especially if the change was construed as decreasing the training required for licensure. It may also create a need for provisional licensure that could confuse the public and blur differences between psychology and other professions that require less extensive training. If the profession did not maintain its control over standards for the internship.</td>
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<td>Licensure issues</td>
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<td>Determination of clinical training requirements</td>
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<td>experience through the granting of the degree and accreditation mechanisms, the clinical experiences necessary for licensure would be solely up to licensing boards and legislatures, which may lead to decreased requirements for and standards related to internship training</td>
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<td>If boards do not accept predoctoral supervised experiences (i.e., practica) there would still be a requirement for a 2nd year of supervised experience, which would then be postdegree instead of predoctoral. It is not clear whether or not there would be advantages to the change</td>
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<td>Quality of training</td>
<td></td>
<td>Internships' ability to address and remedy problems in intern performance would be weakened if the degree had already been granted</td>
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<td>May undermine the role of accreditation if trainees experiencing difficulties could arrange their own training in less well organized, nonaccredited sites, but still be recognized as graduates of doctoral programs. Circumventing accreditation of clinical training (i.e., internships) would lessen protections for the public</td>
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<td>Imposition of time limits on dissertations could sacrifice the quality, scope, and complexity of scientific training</td>
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<td>Might decrease attention to the dissertation during internship, increasing focus on clinical and experiential learning or new clinical research experiences</td>
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<td>Effects on trainees</td>
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<td>It is not known if or from where more revenues would become available to increase stipends</td>
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<td>Interns might be eligible for higher stipends if they complete doctoral degree prior to internship</td>
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<td>Lower tuition to doctoral programs for the internship year could be achieved without changing the training sequence. Tuition could be capped to reflect actual expenses for the internship year</td>
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<td>Interns may avoid paying tuition and fees to doctoral programs to cover internship year</td>
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<td>It could increase pressure to pay back student loans sooner (i.e., during internship). Student loans are generally not due to internship expenses. Internships provide stipends rather than charge tuition that necessitates loans</td>
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<td>It could decrease need for some student loans (e.g., covering internship year)</td>
<td></td>
<td>It is unclear what, if any, benefits to trainees' or programs' status would derive from this change. Trainees would continue to have a trainee status. It seems unlikely to raise the status of the profession in any way because that status is dependent on other, more salient factors</td>
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<td>Status of trainees</td>
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<td>Reducing the clinical training prior to the granting of the degree may signal that the doctoral degree itself is insufficient for practice</td>
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<td>During internship, trainees would be accorded title of &quot;doctor&quot; possibly enhancing their status, especially within medical settings</td>
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<td>&quot;All but dissertation&quot; (ABD)</td>
<td>Might reduce the prevalence of ABDs</td>
<td>The contribution of internships to the prevalence of ABDs is not clear. It is not certain that the prevalence would lower. Dissertations are a responsibility of doctoral programs, e.g., internships. It would create new problems for internships and academic departments and might create a new category: &quot;Not Qualified for Internship Because of Unfinished Doctorate&quot; (NQIBUD). NQIBUD individuals who lack both the internship and the degree may have fewer options than ABDs. Moving the internship would not address major issues affecting marketability (i.e., managed care, surplus of psychologists in health and human services), so it seems likely to have limited, if any, effect on the short-term or long-term marketability of recent graduates. A significant proportion of trainees would still experience disruption associated with moving to obtain internship training and first jobs. Social disruption is a sacrifice that trainees in many fields experience, and, albeit unfortunate, is an insufficient reason to revamp the training sequence.</td>
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<tr>
<td>Marketability of new graduates</td>
<td>Might make recent graduates more marketable upon completion of training</td>
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<tr>
<td>Social effects</td>
<td>Might reduce disruption (e.g., family, financial, environmental) by reducing the number of moves for some trainees</td>
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Although these and other potential benefits are well-intentioned objectives of advocates for shifting position of the internship within the training sequence, the likelihood of realizing any of these desirable outcomes is uncertain at best. Whether the proposed change in internship timing really would solve some of the problems in graduate education it attempts to address (e.g., the imbalance between intern applicants and available internship slots, employment difficulties of recent graduates, or third party reimbursement for interns) is unknown, but skepticism seems warranted. Moreover, the risks inherent in undertaking such change demand closer consideration.

**POTENTIAL HAZARDS OF POSTDOCTORAL INTERNSHIPS**

Systems theory postulates that as one aspect of a system is transformed, other parts of that system are affected and new disequilibriums can emerge. We believe that anticipating the benefits described earlier may be premature and unduly optimistic. The purpose of this paper is to address how the proposal unintentionally might lead to other vexing problems. Several of the other potential effects described later might offset the benefits that may be derived or create new or yet greater challenges to the field.

**POTENTIAL EFFECTS ON INTERNSHIPS**

If the timing of the internship were delayed until after the doctorate was awarded, completion of the dissertation would perforce become a requirement for internship eligibility. The effect of this proposal on recruitment to internships has not, to our knowledge, been addressed within the literature. If completion of the degree was required for internship, when would internships actually accept the interns and when would contracts be signed? Would it be reasonable to retain the match date in February, or would that be too far in advance of internship start dates to predict which students actually would be done by the time the internship starts? Would students need to have completed their dissertation by early February—the date by which internships
and applicants submit their respective rankings? If prospective interns have not completed the dissertation by then, how could internships have adequate assurances that the dissertation would be finished by the start date of the internship typically the following Summer or Fall?

Attempting to deal with individuals who have not completed their dissertations as projected by the beginning of the internship leads to many slippery slopes. Policies would have to be developed to address such situations. If completion of the degree were a requirement, some institutions would not permit the individuals to enter the program because they would not have met the entry requirements for the position. To admit them prior to completion of the dissertation could create significant professional liability problems. Internships would be conflicted between the wish to honor offers as extended and the very real risks of matriculating (or essentially employing) technically under-qualified (or at any rate under-credentialed) individuals. Such dilemmas could create “staffing” problems for many internships. For example, programs would be less sure of how many or indeed whether any interns would arrive as planned. Such uncertainty would result in increased costs to programs (e.g., all of the administrative tasks inherent in contracting with individuals who then may not be eligible for training or supervised employment). Assignment of interns to rotations would have to be more tentative, making it more difficult for internships to commit in advance to meeting specific service demands as well as training needs. It is not clear that even the best written policies could adequately address all types of problems that might emerge as consequences of the proposed change.

Incomplete dissertations might create new pressures on internships to accept trainees even though they failed to meet the entry-level requirements. For example, there could be encouragement both from doctoral programs and from faculty or administrators within some internships to establish a provisional status to allow such trainees to function in a quasi-intern role. It is not clear whether time spent within such a status could or should qualify officially as training hours at the internship level, as for part of the time the trainee technically would not be an intern. Similarly, pressures would mount to allow some intern to start later in the year once they have completed the dissertation and been approved for graduation or have graduated. This would create still more problems for internships (e.g., unpredictable start and finish dates, multiple start dates based on different doctoral programs’ policies and calendars, uncertainty about whether accepted applicants would actually arrive to fill internship training slots), which would create potential “staffing” nightmares and probably extend them into successive training years. Because some interns might be out of sync with the internship program, the proposed change could create new problems in administering internships, including the timing and implementation of training components (e.g., duplication of orientation activities, staggered or duplicated seminars, and program evaluation activities).

Although the potential prevalence of these problems cannot be known, the 2000 APPIC Postdoctoral Membership Survey revealed that the problem already exists: 16% of postdoctoral fellows failed to complete all requirements for the doctoral degree before starting their postdoctoral training (Boggs, 2000). Programs differ in how they handle this situation. Some postdoctoral programs admitted trainees despite their failure to have completed requirements (24%). Others withdrew admission to the program (32%), delayed their start (16%), employed them in an alternative capacity until degree requirements were completed (28%), or pursued other remedies (16%; e.g., retaining them at a predoctoral level).

POTENTIAL EFFECTS ON DISSERTATIONS

The scientist-practitioner model underlying psychology graduate education links together scholarship and other professional activities, such as clinical services. This close linkage between the science and practice of psychology distinguishes psychologists from most practitioners in related disciplines. The dissertation is perhaps the clearest concrete manifestation of the linkage between scientific and other professional activities. Unlike other applied training programs in health care (e.g., medicine, dentistry) or social services (e.g., social work, marital and family therapy, chaplaincy), doctoral programs in psychology, especially PhD programs, generally require completion of the dissertation before the degree is granted.

Dissertations are lengthy, complex undertakings that generally are considered to partially fulfill the requirements for the doctorate. Although APA accreditation criteria (APAOPCA, 1996) do not specify that a dissertation per se is required for program accreditation, generally, some type of significant scholarly or research endeavor is required to demonstrate students’ understanding of and facility with the scientific foundations for practice and scholarly
inquiry. Predicting when a dissertation (or other complex scholarly project) will be completed is inherently imprecise. Circumstances beyond the control of students and faculty (e.g., arrival of funding, deliberations of internal review boards, delays in accrual of subjects, unanticipated but critical secondary data analyses, computer problems), as well as those related to the individuals involved (e.g., "writer's block," emotional challenges, competing responsibilities, illness, sabbaticals, intervening life events, etc.) may interfere with progress. Delays in reaching milestones are commonplace, rendering flexibility essential in scheduling dissertation-related activities up until the date of completion.

Although adding more time pressures to complete dissertations because of internship start dates could enhance students' motivation to progress efficiently through their dissertations and graduate programs, such benefits are speculative and not guaranteed. Indeed, for some students the increased stress derived from added time pressures to complete the dissertation might be overwhelming and paradoxically retard progress. Although finding appropriate ways of reducing the incidence of "all but dissertation" (ABD) is a worthy goal, it is not at all certain that an internship-imposed deadline would hasten individuals' progress, or that it would decrease the incidence of ABDs. After all, faculty already commonly set target dates for completing aspects of dissertations, which students at times fail to achieve, resulting in slow progress through their dissertations. Eligibility for internship might provide no greater leverage in encouraging progress through dissertations than does the award of the degree (or threat of further tuition payments) in the current training paradigm. Indeed, it would seem that for most aspiring psychologists, completing the degree and the dissertation are superordinate goals and higher priorities than being eligible for an internship. Under the proposed system, students who slowly progress through the dissertation actually may be required to go through the internship application more times than they currently do.

Despite the uncertainty that hoped-for positive effects on dissertations would be realized, a number of adverse consequences may occur. For example, the proposed change could place blatant, or merely subtle, pressures on faculty at doctoral programs to downgrade standards for dissertations and scholarly projects. There would be pressures to make rapid decisions, accept cursory literature reviews, minimize editorial guidance, approve hurried projects, accept smaller sample sizes (increasing the risk of drawing erroneous conclusions due to Type 2 errors), and circumvent intellectually stimulating or scholarly aspects of projects in order to meet abbreviated time frames created by the proposed change. Faculty might have less time to detect potential problems in dissertation drafts (e.g., clarity and completeness, conformity with APA publication standards, plagiarism).

Placing greater time pressures on completing dissertations would inevitably exert downward pressure on the quality of dissertations, trending toward a "dumbing down" of the dissertation process. Students and faculty alike would feel conflicted between the pursuit of excellence and of expedience, even more than they do under current conditions. Imposing deadlines for completion would transform time into a fixed variable in the dissertation process, leading students to negotiate around other aspects of the process so as to meet unchangeable deadlines. This would lead to altered expectations for quality, and create additional pressures on the dissertation process. Presumably the proposed change would reduce attention, time, and effort in developing scholarship, critical thinking, and top-notch research skills. Such pressures might shift some training to the professional school model, which has generally placed less emphasis on dissertations, and de-emphasized the "science" in scientist-practitioner training.

Such pressures would be inconsistent with promoting quality standards within the scientist-practitioner or scholar-practitioner models of training. It would be a disservice to the profession for concerns about late dissertations to result in relative advantages in internship recruitment rankings to applicants from those doctoral programs that have relatively more modest research requirements (e.g., some professional schools) over those programs that maintain substantive standards for dissertations. In addition, the proposed change would undermine the flexibility inherent in the Boulder Model that allows for ideas for clinically relevant dissertations to emerge from experiences obtained during the predoctoral internship.

**POTENTIAL EFFECTS ON THE RELATIONSHIP BETWEEN DOCTORAL PROGRAMS AND INTERNSHIPS**

Historically, APA has encouraged close working relationships between doctoral programs and
internships (APA, 1986). The scenarios presented earlier set the stage for a conflict of interest or even antagonism between internships and doctoral programs. Letters of endorsement from doctoral program training directors and other supervisors, which mistakenly predict a students' readiness for internship would be embarrassing if students were not, in fact, ready by the start of the internship. Internships would become reluctant to trust such statements in future years. Although faculty descriptions of intern applicants often seem to be exaggerated (Robiner, Saltzman, Hoberman, Semrud-Clikeman, & Schirvar, 1997), empty assurances about dissertation completion would readily be exposed each time a dissertation was not completed by the start of an internship. Such erroneous predictions would bring into question other doctoral faculty statements about applicants.

In addition, doctoral programs and internships would be challenged to develop processes for dealing with students who fail to complete their doctoral training (including dissertation), but who had been accepted into internships. Issues such as responsibility, liability, funding, and process would need to be addressed. At the extreme, internships might consider legal or regulatory remedies for broken contracts if individuals were ineligible for internship by the start date because they had not completed their dissertation or doctoral programs according to schedule. It is unclear to whom legal liability ultimately would befall, but it would necessarily prove expensive and highly aggravating to individuals and programs if such approaches were pursued.

POTENTIAL EFFECTS ON STUDENTS

The proposed change might be predicted to introduce additional strain into faculty relationships with trainees because of pressure to meet strict time limits in what has been an open-ended process. Doctoral faculty might refuse to write (or so threaten), recommendations in successive years for students who had not met dissertation-related deadlines as planned. Students who fail to complete their doctorates by the start of the internship ultimately would be compelled to disclose such problems to the director and faculty of internships, which may complicate relationships at a formative stage in their development.

Such adverse, albeit unintended, consequences of changing the sequence of dissertations and internships could create additional, avoidable pressure on students throughout the already anxiety-arousing experiences of writing dissertations, applying to internships, and starting internships.

POTENTIAL EFFECTS ON QUALITY ASSURANCE MECHANISMS

The most serious concern about the proposed change is that the profession would lose a fundamental quality control mechanism. If the degree is granted prior to the internship, individuals would graduate before their suitability for clinical work had fully been established. Even under the current paradigm, only 35% of internship directors consider most of their interns to be ready to practice competently by completion of the internship (Goldberg, 2000). Once an individual had been awarded a degree, internships' ability to address quality control issues in a meaningful administrative manner would be at best compromised, if not effectively eliminated. The shared responsibility and added leverage, which doctoral programs now can bring to bear on resolving performance or quality control issues would be lost. Although the decreased quality assurance would presumably have a major impact with only a few trainees per year, the costs to the institutions and profession (e.g., legal costs, professional liability costs) might not be trivial. Dealing with even a single unprepared, impaired, or incompetent trainee can consume enormous resources.

If internships were postdoctoral, graduates of doctoral programs might feel freer to arrange alternative, less well organized internship experiences. They might feel less compelled to seek training in programs that are APA accredited or APPIC members. When interns did not perform satisfactorily within organized internships it could become easier and hence more tempting to arrange training outside of organized programs in settings where training standards might be less stringent, or nonexistent. This would decrease the probability that poor performance issues would be dealt with appropriately.

Already, there are hints that some trainees and graduate programs are looking toward circumventing accreditation mechanisms for internship-level training because of the increased probability of failing to secure accredited internships (Holaday, Glidewell, & Brandon, 1997). If the internship becomes postdoctoral, graduates may be less likely to appreciate remaining inadequacies in their training and therefore may be willing to settle for less intensive training than they might otherwise obtain. Not all employers are
sophisticated enough about psychology training to recognize limitations in such applicants' abbreviated training experiences.

It is problematic for the profession for psychologists to be trained in programs that are not externally reviewed. Accreditation, despite any drawbacks of flawed criteria or processes, is essential to the profession's stature and credibility (Robiner, Arbisi, & Edwall, 1994). The easier it becomes for trainees to obtain training which skirts accreditation review, the greater the damage to the integrity of the field because accreditation is the profession's central quality assurance mechanism. Lessening the importance of the internship by deleting it as a requirement for the doctorate could subvert training and ultimately degrade the quality of services provided by psychologists. Ultimately, it could erode the public's expectations for psychologists' qualifications and diminish confidence in the profession.

If individuals do not secure internships under the proposed change, it might be considered less of a "problem" for their doctoral programs because technically they would no longer be considered students within the programs. Doctoral programs would "sign off" on the individual's suitability for the field by awarding degrees prior to individuals' entry into the most comprehensive, demanding, and rigorous component of their clinical training. Although solving doctoral programs of their current responsibilities about internship placement might relieve doctoral programs of some awkward burdens, it could prove detrimental to their graduates, internships, and the profession.

REQUIREMENTS FOR INTERNSHIP TRAINING

Regardless of the timing of the internship, APA presumably will continue to conceptualize it as a fundamental component of the education and training of psychologists. There might be different terminology if the year were postgraduate rather than part of graduate education. If internships were no longer part of doctoral programs' requirements, it is not entirely clear what organization would have the interest in and the authority for enforcement of training standards for the internship year (i.e., requiring that individuals would be compelled to complete internships). If completion of internship was reconfigured as a postdoctoral experience, there is no guarantee that state and provincial psychology boards or legislatures would assume the responsibility of requiring internships for licensure eligibility in the same way that doctoral programs and professional associations currently do. Psychologists retain control over the educational requirements (including internships) for programs accredited by APA, but do not control whether legislatures would deem it their responsibility to adopt such standards. It is now a requirement for licensure in many jurisdictions principally because it is currently embedded within the training sequence toward the doctoral degree in accredited programs rather than because it is a separate, explicit requirement. If the current structure were to be dismantled, the regulatory standing of internships would be uncertain: Internships could be construed as an option rather than a required experience. Currently, many legislatures authorize licensure of master's level individuals who lack training equivalent to the current internship (e.g., as psychological assistants, or professional counselors). This suggests that legislators are not as committed to requiring and overseeing year-long internships to the extent that APA has through its accreditation of doctoral programs (APA OPCA, 1996, p. 5) and internships.

POTENTIAL EFFECTS ON INTERNS’ REVENUE GENERATION AND EARNINGS

Although there are currently problems with interns' ability to generate revenues (Robiner, 1999), the effect of the proposed change on reimbursement for interns’ services and on their earnings is not known. Currently, many managed care organizations (MCOs) do not consider it within their mission to fund training in psychology. MCOs oppose reimbursing services rendered by trainees at any level (e.g., practicum students, interns, or postdoctoral fellows). In a survey of internship directors, 46% indicated that managed care had affected the types of services interns could provide (Constantine & Gloria, 1996). At one community mental health center, interns could see that managed care decreased the percentage of patients from 100% to about 44% in just 3 years (Rohrs, 1996).

Not only do MCOs often require that providers be licensed, but many require a specified number of years of successful, unblemished records of postgraduate experience (e.g., 3–5 years) before individuals are eligible for reimbursement as service providers. Anecdotally, the first author estimates that in the high HMO-penetration environment of Minneapolis, current postdoctoral fellows are eligible to see only
approximately 40% of referred patients at an academic health center because of reimbursement policies of governmental (i.e., Medicare) and certain private third-party payers.

It may be unduly optimistic to conclude that the proposed change of timing for internships would make substantial differences in MCOs' or other third parties' willingness to reimburse services provided by trainees or other trainees to provider networks. Indeed, the lengthy application process for provider panels, which can include substantial delays, might merely replace current attitudinal barriers with logistical barriers. Even if a hoped-for sea change in third party payers' attitudes, policies, and reimbursement rates were to occur, reimbursement patterns for trainees may not improve because the time frame for credentialing trainees may consume a significant portion of or even exceed the period of internship training. Prior to banking on potential financial boons, it would be prudent to survey third party payers about the likelihood of reaping such benefits for postdoctoral interns.

Similarly, it is not evident that Medicare would begin to reimburse trainees even if they had completed their degree or become licensed. Currently, Medicare does not provide reimbursement for services rendered by licensed resident physicians, unless the attending physician is present for substantial elements of those services. This is because residents' stipends are supported largely by Medicare through GME. It is redundant or "double dipping" to reimburse residents (or their programs) also for the services that they provide. In the near term, Medicare does not seem likely to develop more generous policies for reimbursing psychology trainees than for physicians, especially given that the program has never remunerated services provided by psychology trainees (with the possible exception of bundleing for certain services). Currently, Medicare is in the process of cutting back on GME payments for existing medical and surgical residencies as a result of the Balanced Budget Act of 1997. This is seriously jeopardizing the future of medical training at academic health centers and teaching hospitals around the country. Given the current trend reducing GME training dollars, the prospect for major new Medicare revenue streams for psychology trainees is uncertain. If GME funding is granted, it seems unlikely to hinge on the placement of internship in the training sequence.

There is no assurance that psychology internship training programs would have any greater success deriving clinical revenues for postdegree trainees than for predoctoral trainees. There is similarly no shred of evidence to suggest that third parties would be more willing to reimburse at higher rates for services provided by trainees if the internship was shifted to a postdoctoral year. Third-party payers are sophisticated and would readily recognize that although the timing of internship might have shifted, trainees would still essentially be novices who would presumably not warrant higher levels of reimbursement than they have been able to garner in the past.

Some psychologists are hopeful that moving the internship to after the granting of the doctoral degree would place recent graduates in better positions for employment eligibility immediately after the internship. Unfortunately, there is no evidence that the proposed change actually would provide greater employment opportunities for most trainees. In fact, the unintended result of shifting the internship for some trainees might be that they would actually have to delay their internship for nearly a whole academic year, creating a period in which they might not be readily employable based on their level of clinical skill. Some trainees might end up waiting for sizable portions of academic years for internship following completion of the dissertation. For example, individuals who defend dissertations in the fall, or after Match Day, might not be able to work within the profession at wages commensurate with their degree, at intern level wages, or at all, for considerable time periods. Under the current system, it has been possible for many interns to complete dissertations while on internship. Progress on the dissertation can occur simultaneously with internship matriculation. Under the proposed system, there might be enforced periods of relatively lower earning potential or productivity prior to the start of the internship.

COMPARISON WITH CURRENT POSTDOCTORAL TRAINING

Some psychologists might consider our concerns to be exaggerated. After all, postdoctoral programs have dealt with late completion of degrees without major problems for years. Why would the proposed change pose greater problems for internships? The reason is that there are major differences between postdoctoral programs and internships. The sheer magnitude of training at internship and postdoctoral levels is not comparable. More than 500 internships are listed with APPIC in contrast to only about 75 postdoctoral training programs. There are far fewer trainees within organized postdoctoral
programs because postdoctoral training has been on a voluntary rather than a mandatory basis. Relative to postdoctoral programs, internships often are larger, more organized, and have required greater bureaucratic formality, stability of revenue streams, and overall consistency over time.

Until recently there were no criteria for accrediting postdoctoral programs. Currently there are only a handful of accredited postdoctoral programs. A majority of a postdoctoral programs do not intend to seek APA accreditation (Boggs, 2000). The lack of accreditation at the postdoctoral level has allowed flexibility in determining all aspects of training at the postdoctoral level, including start and end dates, responsibilities, remuneration, grant funding, and organizational demands, than has been true for internships.

The current APA (APA OPCA 1996) postdoctoral residency accreditation criteria includes the following: “The program has postdoctoral psychology residents who...have completed appropriate postdoctoral education and training in professional psychology...” (Domain C, 4b, p. 20). We presume this means that the dissertation or scholarly project has been completed and that the degree requirements have been fulfilled. If the internship moved to the postdoctoral level, presumably comparable language would be incorporated in the accreditation criteria for internships. The question then is would internship programs be willing to risk their accreditation status by admitting individuals who had not met entry-level criteria (i.e., trainees who have not completed their dissertations or fulfilled all degree requirements)? Such a prerequisite would pose serious problems for internships and students who have not yet completed their degree requirements.

That the “late dissertation completion” dilemma may not have been a major problem within postdoctoral programs in the past does not mean that it would not become a major headache in the future if the internship became a postdoctoral experience. If the frequency of the problem was multiplied, and if there was less flexibility within programs (e.g., because of needs to meet accreditation criteria or fulfill institutions’ strict personnel/training policies), there could be major administrative problems for internships. The fundamental differences between training at these two levels make it premature to make positive predictions for the proposed postdoctoral internships based on historical experiences of postdoctoral training programs. Internships should be reluctant to inherit such potential problems from doctoral programs because of the range of negative consequences the internships might risk. The new category “Not Qualified for Internship Because of Unfinished Doctorate” (NQIBUD) would not appear to be an improvement over ABD status.

CONCLUDING REMARKS

The saying “the devil is in the details” is pertinent to the debate of the position of the internship within the training sequence. There are bedeviling details. Before APA or other psychology organizations advocate for or initiate changing the timing of the internship, more precise plans for implementing a postdoctoral internship need to be developed and reviewed so that psychologists and educators have a clearer picture of the implications and potential consequences of the change. The potential impact on various elements of training and practice, including quality of training and dissertations, need fuller delineation. Psychologists and educators should be given ample opportunity to inspect the full details of a plan before deciding whether the new problems that might be created would be preferable to the problems currently faced. Realistic (i.e., not oversimplified) plans need to be developed to address a transitional period to guard against the potential misadventure of causing even larger cohorts of applicants to fail to secure internships or suffer new, but not better, types of financial hardships as a consequence of the proposed change.

Unfortunately, psychology faces many challenges (e.g., see Robiner & Crew, 2000). Simply shifting aspects of training or practice, rather than addressing the root cause of the problems affecting training and the employment of recent graduates (i.e., the practice of psychology in an era of managed care and the imbalance between the supply of psychologists and demand for their services) is not likely to resolve anything satisfactorily. In fact, it simply may drain the profession’s will and resources for addressing the key problems.

Until it is possible to study and debate the potential and foreseeable consequences of shifting the timing of the internship, we believe that votes about it should be interpreted cautiously as an acknowledgement of current problems rather than as informed endorsements of the postdoctoral internship. A prudent step before endorsing changes could be to rigorously monitor and assess the experiences of current postdoctoral fellows or the outcomes of pilot programs that might experimentally incorporate the proposed change. Embarking on a journey according to an as
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yet poorly sketched map could lead to even more treacherous landscapes, without resolving the problems that brought psychologists to consider changes in the first place. We doubt that the proposed postdoctoral internship would be an effective remedy for the current challenges to training or employment in professional psychology. We are very alarmed by the potential damage it could wreak, even though adverse effects are not intended.

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