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Interview with psychologist Dr. Christine Chang, Counseling Psychology PhD

by *Monica Gates*

A sunny afternoon in May, I sat down with Dr. Christine Chang, who is a licensed psychologist in Berkeley. She received her PhD in Counseling Psychology from Loyola University Chicago: starting with a Bachelor's degree in Sociology at National Taiwan University, she immigrated to the U.S. for her PhD and completed her pre-doctoral training (required of PhD students in Counseling Psychology) at Stanford University, before finishing her postdoctoral training at UC Berkeley. She now works full-time as a psychologist at UC Berkeley's Counseling Center (4 days a week, 10 hours a day, in an 8am-6pm job), and has just joined a group private practice that she works at part-time on Fridays. A warm person who is quick to enthusiasm and laughter, she easily answered my questions about what her job is like. I (Monica), am a graduate student blogging for [Beyond Academia](http://www.beyondacademia.org/) (<http://www.beyondacademia.org/>), and was excited to interview a psychologist about possible careers outside faculty positions.

— *Her job as a psychologist* (http://www.beyondacademia.org/wp-content/uploads/2018/07/353863-1046154-3_320x400.jpg)

"I'm a licensed psychologist in California," she tells me. "Right now, I have two jobs: I'm a full-time psychologist at UC Berkeley's Counseling Center, and I've started my private practice. At UC Berkeley, I serve the students and the campus. In my private practice, I work as a generalist for adults. I particularly enjoy working with people with grief, loss, trauma, relationship concerns, and cross-cultural experience.



"I think my job at UC Berkeley has fulfilled my commitment to social justice and multicultural work. At UC Berkeley, I see students from very diverse backgrounds: students from low socioeconomic status backgrounds, first generation college students, international students, children of immigrants, or minority students. UC Berkeley can be an overwhelming place and so is young adulthood. I often find myself providing a safe space for these high-achieving, intelligent students to navigate difficulties and ambiguity. I also like to focus on social and cultural considerations in therapy. It's probably because I majored in Sociology as an undergrad. I think social justice and liberation comes in different shapes and forms. There is a lot we can do as therapists in the office and outside the office. We are trained to establish relationships, alliances, and to facilitate changes and other possibilities. Another big part of my job at UC Berkeley is to provide workshops and programs, such as stress management, wellness promotion, or campus crisis debriefing.

"In my private practice, I have a bit more freedom in terms of the number and frequency of therapy sessions I offer. I also get the opportunity to see the general adult population who are not students. I feel the diversity helps enrich my thinking process and keeps me up to date."

I ask about payment across her jobs, and she tells me that at UC Berkeley she is paid a salary by the university, whereas in her private practice people pay out of pocket since she is not on an insurance panel. She also tells me that people come in for different periods of time in her private practice—sometimes they have a focal issue they work through in few sessions, and sometimes they stay on as long as they need, and as long as they want. Her colleagues have had some clients for years.

Curious, I ask what topics people cover, and she says that people bring in all kind of issues. "There is no too big or too small issue to talk about in therapy," she says.

"What's your day-to-day like?" I ask.

"Like how many people I see?" she clarifies. "For my job at UC Berkeley, I'm a full-time employee, so it's 40 hours a week, and I see three to seven people every day. Each therapy session is 45 minutes to an hour, and for me the most comfortable length of the session is 50 minutes to an hour. We also have staff meetings, consultation meetings, and projects. I'm a supervisor so I

provide supervision and am involved in our training program. Sometimes I am asked to co-lead a debrief session for campus crises, an outreach event for a specific population, or a workshop of a particular topic.”

At this point I'm amazed and a little overwhelmed by how busy Dr. Chang seems. I asked her if she was also somehow managing kids. She told me that she is not, as time and energy is something she needs to be mindful and aware of in order to balance her self-care.

I next ask her about her least favorite part of her job.

“What I don't like about my job is... well... two things, I guess. One is that I didn't know how physical this job is! Although I sit in the office the whole day, the attention and energy that I use is quite visceral and physical. I guess body and mind do connect. The other is the power dynamic or conflicts in balancing the different parts around therapy: for example, the expectations of the university, the interests of the insurance companies, the best care for the client, different clinical judgements, and professional support for the therapist. When they don't align with each other, it takes a lot to negotiate, to advocate, and to make compromises, at least for me.”

“Do you have a therapist? Do you talk to other people about this stuff?” I ask.

“I don't have a therapist right now. I talked to my therapist and my supervisor about self-care, about how to be a therapist. Peer consultation and peer support is critical. I can't emphasize enough— it's so critical to this kind of job! Having our own therapists, supervisors, peer consultation, or even just friends who can understand helps very much.”

“And your favorite part of your work?” I ask, to finish us off.

“I consider my work a mini-symphony of medicine, education, activism, and art! What I like about my job the most is the encounter. That both me and my client are willing to be together to be adventurous and vulnerable. I just find that is beautiful.”

— *Her path*

“How did you get into therapy?” I ask next.

“How did I get into this field? I studied Sociology in college because I had an idea about making the world a better place. I wanted to learn and do something related to social justice, equity, and inclusivity. Thinking back, it was a naïve thought that didn't incorporate the historical context, power dynamics, and complexity of socialization. I had a great time in Sociology, as I was fascinated by the theories, discourses, and analyses. I also knew I was interested in topics related to mental health, mental illness, and culture toward the end of my undergrad. So I was thinking, what about Psychology? What about Anthropology? Around undergrad and my Master's degree, I was still exploring which academic discipline I wanted to commit to. I thought I could do research about the

relationships between a certain kind of mental disorder and how society shapes how we see that, how we interact with people who are suffering, or cultural stigma, or how society institutionalizes people who are being categorized as abnormal or deviant. I knew I needed some internship or hands-on experience directly interacting with people. But I didn't know how much I would like it! I really enjoy the moment-by-moment tracking on the micro level of interaction with people. I found being with people gave me more energy than being with literature. That's why I applied to the PhD in Counseling Psychology.

"And then I think in my doctoral program, my advisor *strongly* encouraged me to be a faculty or researcher. I really appreciate the potential she saw in me, although I had a little bit of a hard time telling her that my heart goes to the clinical practice, whether it's in the hospital or in the university or even private practice. I thought that of course she would understand and support me, but I could FEEL the pressure. But ...I just found what I liked through experience."

Curious, I asked her about the pressure she faced in a Counseling Psychology PhD program to go into academia. "In counseling psychology, is it expected that most people in counseling psychology go into clinical practice or faculty positions?"

"Half and half," she says.

"Half and half of faculty and...?!" I exclaim, incredulous.

"Yeah."

"Whoa," I breathe. The reason this was so absurd to me is that for most people with PhDs, somewhere around 10% end up going into faculty positions. In academia, there is heavy pressure to continue on in academia as faculty, but there aren't enough positions available, which is why the discrepancy between expectations and actual job placement is so high. Something as high as 50% placement rate felt incredible in today's job market.

Realizing why I was confused, Dr. Chang clarified. "This was a very small program, especially the program that I went to, Loyola University Chicago. We only had four people; in my cohort, only three. I think, looking at the previous cohort, it was half and half. Half the people became faculty, and the other half went to work in the university counseling center, or hospital, or private practice or, for example, participated in legislation for mental health bills. We had people doing all kinds of things with this degree."

"Was it a degree where you do some research, some clinical practice, and some teaching?" I ask.

"Yeah. It was a very intense program and I graduated in five years. The first four years I was taking classes, teaching classes, and doing practicum, like a sort of part-time internship, and then doing research for my advisor, and for myself! So, the first four years felt like, *oh my*, just every semester it's like this. Then the last year I did a full-time internship at Stanford and finished my dissertation ...and simultaneously applied to postdocs. It was really intense." I nod, impressed.

“Normally, people have different interests. If they want to do the faculty route, they will prioritize their time [in the PhD program] doing research. But I was still somehow debating [between the faculty and clinical practice routes], even though I knew where I got a greater sense of fulfillment and satisfaction, but there was pressure from other people... so I felt like— let me try to do *everything*, first, and then I’ll decide. And then I realized I just have to go where my heart goes!”

She laughs. “But I enjoy teaching and training a lot. I taught several classes at Loyola and then at Stanford and Berkeley; I have a lot of experience doing guest lectures and providing workshops. I just love that! Right now, I’m not an adjunct faculty, and I don’t have built-in teaching opportunities in either of my jobs, but I can see myself developing something like that in the future.”

I ask some more about teaching. “For people who want to teach,” she says, “they can either become a faculty member, or they can do part-time, like adjunct faculty. I could do it in addition to another job, if I had time. Let’s say I had the time... there are some professional psychology schools around here. They are very often looking for qualified professionals who can teach a specific kind of course like “basic counseling skills”, “research methods”, “quantitative studies”, “qualitative surveys” or specific kinds of therapeutic approaches like working with multicultural populations. If I had the time, I would love to do that!”

— *Pressures within academia, and what you can do with a PhD in Counseling Psychology*

“I really liked the [Beyond Academia blog \(http://www.beyondacademia.org/articles/\)](http://www.beyondacademia.org/articles/)!” Dr. Chang tells me, as she recalls the difficulty of choosing a career outside academia. “I was reading the blog and I find it so meaningful. Each interview is different. Having this blog is so useful and validating. When I applied to graduate school, I had some research experience and some clinical experience. My goal was to bridge the gap between research and clinical. I wanted to understand how to conduct research and statistical analyses that were applicable and informative to clinical practice. I also wanted to deepen my experience in various clinical settings to really get a sense of what was needed in sessions. When I was in my graduate program, because my advisors hoped that I would go a certain route, it somehow felt almost like a taboo to talk about careers outside academia. I was grateful that my research skills were recognized and valued by my advisors. However, I think that this was also part of my struggle to figure out my source of motivation and my values in my career choices. I think this blog is so meaningful in the way of... saying that [pursuing careers outside academia] is *talkable*. That this is what students have been thinking, that it’s okay to have different ideas. And that there are a lot of other places that we can apply our skills and knowledge. There are possibilities.”

Dr. Chang then went on to describe some careers she’s seen examples of, starting from a PhD in counseling psychology.

“I know clinical or counseling psychologists who are working at big tech firms as consultants, providing educational training in minority communities, leading various workshops in non-profit

organizations, or participating in developing mental-health apps. Like I mentioned, psychologists also do advocacy work and offer research evidence and professional suggestions for changes on a larger scale, such as gun control, school policies on sexual assault, or mental health resource allocation. There are many ways we apply our skills and knowledge, not necessarily in therapy.”

“Tell me more about freelance workshop development?” I ask.

“For example, providing workshops on the emotional development of children or adolescents for parents, or leading support groups for trans-identified individuals, especially in current political atmosphere, or groups for women in tech, especially in the Bay Area. There are a lot of creative things we can do [job-wise], but I happen to do the most conventional one here.”

— *Advantages and disadvantages of faculty vs. clinical practice*

“I was looking at the blog and I think it’s for PhDs thinking about jobs outside academia. I can share something personal with you about my decision-making process. For me, in addition to how much I enjoy clinical work I had two other concerns when I chose my path. First, for most of the faculty jobs, usually you can’t really choose the location. I know people who are productive and fascinated researchers who started their career in places I’d never heard of. But I knew it would be very difficult for me.

“As a former international student and now an immigrant, I came to the States for education. It was already a foreign place to me and it would have been very difficult for me to move someplace where I knew no one, really no one, not even remotely. I had a hard time even imagining it. So for me, choosing an urban environment that was similar to where I’m from has been important to me. So far, I feel blessed that I have lived in Boston, Chicago, and the Bay Area.

“The second consideration was that I think most research jobs are a 24/7 thing. I know myself as someone who has difficulty setting up boundaries between my personal life and my professional work. I am also someone who enjoys the energy and passion of career. It’s difficult for me to set internal boundaries, so I want to have external help for boundary-setting. With clinical work, I find it’s easier for me to dive in during the sessions with my clients, and refocus on other aspects of my life when I leave my office. Even though I help my friends or use my personal time to study new therapy approaches, I find it’s easier to compartmentalize my personal life and professional work.

“I think those two are the things that, when I decided to go into clinical work, played a critical role as well.”

“But now you get weekends off and evenings, right?” I clarify.

“I find myself reading a lot of books or articles related to psychology or therapy,” she says, describing her weekend activities. “Or going to seminars or workshops, to inform and improve my work. I feel rejuvenated and fulfilled doing so because that’s what I want to do. I want to be the one”

who takes initiative with this kind of learning, and that feels more satisfying and empowering.”

— *Therapy as a job market*

“Just to get a scope on the field,” I ask, “I know that when people go into clinical practice, they sometimes get PsyDs, rather than PhDs. What’s the difference?”

“PsyDs and PhDs,” she muses. “For both degrees, students need to do several practicums, write a dissertation, and complete an internship before graduation. But the PhD has a stronger emphasis on empirical research in the training, whether qualitative, quantitative, or community research. The philosophy is different behind these two models. For the PhDs, it’s called the scientist-practitioner model. The practice is expected to be based on — if we can say this simply— based on the scientific study results. So we do clinical and empirical research and then, based on the research results, we figure out the therapeutic principles and practices that would be the best for the clients.

The model with PsyDs is a bit different. It is called the scholar-practitioner model. It is for people who primarily want to become clinicians. My understanding is that PsyDs’ training is grounded in both theory and research, it is more value-driven, and more focused on hands-on clinical activities. But eventually when people graduate and pass the licensing exams, we’re all licensed psychologists.”

“Excellent,” I acknowledge, before switching gears slightly. “So there are psychologists, and I think there are counselors, and psychiatrists? Are those the types of practitioners?”

“In the counseling center at UC Berkeley for example, we have psychologists, psychiatrists, clinical social workers, and marriage and family therapists (MFT). In other states, mental health practitioners also include licensed professional counselors (LPC).

“MFTs / counselors and social workers are Masters-level practitioners. Usually the training is two years, and then they get tons of post-graduation training, like 3000 hours.

“PhDs need to have a doctoral degree. And then a pre-doctoral internship, which I did at Stanford, then a postdoctoral fellowship, which I did at UC Berkeley. Then we need to pass two exams, the national exam and the state exam. It’s a multiple choice written exam, with all sorts of questions in California. In Texas I know they have a panel of supervisors asking questions, so every state is a bit different. PsyDs are similar. The whole process is six, seven years.

“Psychiatrists’ training is in medical school. For some psychiatrists, they have less interest in talk therapy with patients or clients. They prescribe medication and focus on managing the effects and side effects: figuring out what works best for patients. Clients go to psychologists to refer them to psychiatrists, or the psychiatrists find people to refer to us as well.”

“It’s interesting,” I say. “I had no idea there was so much education involved in all of this!”

She laughs, and I thank her for her time as we wrap up.

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I had a wonderful time talking to Dr. Chang, and am very grateful to her for answering my questions and describing what her job and path have been like! Thank you Dr. Chang!



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