
AP-LS Student Committee

Career Corner

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The Career Corner is intended to highlight the individuals who work at the intersection of law and psychology, where they come from, how they got there, and how their experiences influence their research, teaching, and/or practice. This edition of Career Corner profiles Virginia Barber-Rioja, Ph.D., the Clinical Director of Mental Health at Correctional Health Services/NYC Health + Hospitals. In this role, Dr. Barber-Rioja is responsible for clinical oversight of mental health and reentry services in the New York City jail system (the second-largest jail system in the nation), including those on Riker's Island. Dr. Barber-Rioja also serves as a Clinical Professor of Psychiatry at New York University School of Medicine and as an adjunct Assistant Professor at New York University's forensic psychology master's program. Haley Potts, 2nd year Ph.D. student at the University of Alabama and the 2018-2019 Student Committee Clinical Liaison, interviewed Dr. Barber-Rioja.

AP-LS Student Committee: How did you become interested in law and psychology?

Dr. Barber-Rioja: My earliest interest in psychology (even though I did not know it at the time) was when I was in elementary school. On a street corner close to my school, I remember a small group of individuals who were using heroin. This was in Spain, where I am from, during the heroin crisis. I grew up on one of the Canary Islands, a place with not much happening. However, my mother recalls that this group of people really caught my attention. I was curious about why they were sleeping on the streets and why they had needles. I wanted to understand their behavior. I decided to study clinical psychology in Madrid. Forensic psychology was not part of my training as an undergraduate; it was a relatively new field in Spain at the time. However, when I was nearing my graduation, I visited a jail on the outskirts of the city and was struck by how many people appeared to have a mental illness. My curiosity grew and I spoke with some of the lawyers who were visiting their clients at the jail. I was stunned to see that so few of the lawyers knew anything about their clients' psychiatric conditions and how to use that in court. I found myself wanting to educate them on mental health issues. That was the first time I became interested in using psychological science to aid the courts in making legal decisions. I spoke with a professor about this and remember very clearly when he said to me: It sounds like what you want to study is forensic psychology.

AP-LS Student Committee: Can you please describe your academic and clinical training, starting with your time as an undergraduate?

Dr. Barber-Rioja: I studied clinical psychology in Spain and moved to New York with the intention of learning English. As my interest in forensic psychology continued to grow, I completed a Master's in Forensic Psychology at John Jay College of Criminal Justice at the City University of New York. After graduating, I got a job as a forensic case manager in an alternative to incarceration program in Brooklyn, carrying a large caseload of individuals with serious mental illness who had been diverted to

the community in lieu of incarceration. During that time, I became interested in the concept of therapeutic jurisprudence, in special jurisdiction courts, violence risk assessment, and forensic assessment in general. Not long after, I returned to John Jay College to pursue a Ph.D. in Forensic Psychology. The program was brand new; in fact, I was part of the first graduating cohort. The excitement of helping to shape the program from inception was incredibly appealing. Inspired by my work as a case manager, my doctoral research focused primarily on identifying clinical and criminogenic factors that contribute to success versus failure in court mandated treatment. With the goal of further developing my clinical skills, I selected externships that did not necessarily have a forensic focus, in the areas of both treatment and assessment. Finally, I completed an internship at Bellevue Hospital Center/NYU School of Medicine, in the forensic track. This experience provided me the opportunity to work in the inpatient forensic unit, where I learned about treatment with incarcerated individuals experiencing acute psychiatric symptoms. The internship also included rotations in a forensic hospital for individuals who have been found incompetent to stand trial, or not responsible by reason of mental disease or defect. During this year I also had the opportunity of gaining more experience in forensic assessment.

AP-LS Student Committee: Have you faced any major obstacles in your career? If so, what were they and how did you overcome them?

Dr. Barber-Rioja: At times throughout my career, the taxing and emotional nature of this work had a direct impact on my psychological well-being. Working with justice-involved individuals, whether in the context of treatment or assessment, can expose one to injustice, discrimination, trauma, and violence. Likewise, some patients/examinees had special and profound impacts on me. That theme of processing those experiences as a new psychologist is something that I believe should be discussed more throughout doctoral education and clinical training. I believe it is important to be aware of how it can affect our neutrality when forming clinical/forensic opinions, and it can also lead to burnout. In my own experiences in these situations, I have often relied on mentors, colleagues or supervisors for guidance.

AP-LS Student Committee: What is it like to work as the Clinical Director of Mental Health for Riker's Island? What are the most satisfying and challenging parts of the job?

Dr. Barber-Rioja: Over three years ago, New York City transferred the responsibility of providing mental health care in city jails from a largely private corporation to NYC Health + Hospitals, the largest provider of public health in the U.S. Following this transfer, the Division of Correctional Health Services implemented a number of reforms to the jail's mental health service, including the expansion of the role of psychology. Probably the most satisfying part about my job has been to be part of this transition and to have the opportunity to create and implement several programs to improve mental health and reentry services. During my tenure, I was also fortunate to recruit a large number of psychologists until the service was doubled. They play leadership roles, and it has been very gratifying to help define and expand the contributions of correctional psychology to one of the largest jails in the country. For example, we created a psychological assessment service, which, through psychological testing and assessment, has improved our ability to provide accurate diagnoses and to better identify individuals with neurodevelopmental disorders. Finally, I truly enjoy teaching and supervising trainees and postdoctoral psychologists.

However, the role is not without its challenges. Working in a jail and managing such a large team was new and, at times, overwhelming. Providing mental health treatment and assessment in jails can be challenging because the number of daily intakes and discharges is very high, which can make

continuity of care difficult. In addition, the goals of security/safety and treatment/rehabilitation can at times conflict with each other. Jails are by definition chaotic places and providing evidence-based interventions is complex. Finally, working in correctional settings, psychologists face a number of ethical challenges for which professional organizations need to provide more guidance.

AP-LS Student Committee: From your perspective, what are the biggest challenges facing the field of forensic psychology today? How can students address those challenges?

Dr. Barber-Rioja: Bridging the gap between research and practice. I often encounter practitioners who are not informed about the most updated research in their areas of practice, and researchers/academics who do not understand the realities of clinical forensic practice and therefore do not know how to make their research applicable. In addition, although there are already some initiatives in this direction, we have to continue efforts to make forensic psychological science more accessible to policy-makers, lawyers, judges, law enforcement members, and other behavioral health providers of justice-involved individuals. One way in which students could address these challenges is by getting out there and providing teaching and training to these types of audiences. This will provide them with experience on how to communicate forensic psychological knowledge in a way that is reachable for non-psychologists, and it will also be of help if they end up testifying in court.

AP-LS Student Committee: Do you have any advice to give students who are considering careers as clinicians in forensic psychology? What sorts of training experiences do you suggest that they prioritize?

Dr. Barber-Rioja: I believe that to be a good forensic psychologist it is essential to have a strong clinical foundation. I encourage students to seek out clinical training opportunities that will provide them with experience both in treatment interventions and psychological testing/assessment. I encourage them to be exposed to different types of psychopathology (psychiatric emergency rooms are a good place for this), to work in inpatient and outpatient settings, and to work with patients/clients throughout different developmental stages. Training in a correctional setting is also something I recommend, even if that is not what the student wants to pursue in the long term. It does help understand the challenges people face when incarcerated, and also understand the jail/prison culture, which can be very helpful when conducting forensic assessments. Furthermore, I encourage all forensic clinicians to be up to date on the research. But most importantly, to end up choosing the area of practice they feel most passionate about.
