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This internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept or use any ranking-related information from any intern applicant.

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## Introduction

The Psychology Services Department at Federal Correctional Complex (FCC) in Butner, North Carolina, is delighted you are considering your doctoral internship with us. We hope this brochure will serve to answer some basic questions about our internship program, as well as dispel some of the more common stereotypes about working with a prison population.

This brochure will provide you with information about both the Bureau of Prisons (BOP) in general, and FCC Butner specifically. The brochure begins with an overview of the BOP as well as the roles of psychology and the Psychology Internship Program within the BOP.

The second part of this brochure provides a detailed discussion of the Psychology Internship Program at FCC Butner. Included is information about the population, intern duties, research opportunities, didactic training, supervision, and benefits. We've also included information about our Psychology staff and the local area to help you get to know us better.

The brochure concludes with a discussion of career opportunities within the BOP as well as the instructions for applying to our internship program. We encourage you to look at our [Doctoral Intern](#) and [Staff Psychologist](#) web pages to learn more about the opportunities that exist at the BOP.

For interns, the selection and location of the doctoral internship are two of the largest factors in determining subsequent career direction. We encourage you to consider the material you read in this brochure carefully. We believe our training program is of the highest quality and will both challenge and support you as you develop into a confident and knowledgeable mental health professional. We currently have seven full-time intern positions available at our site with five distinct training tracks and look forward to receiving your application.

## Overview of the Bureau of Prisons

Over the last 90 years, the BOP has established 122 institutions and currently houses approximately 153,000 incarcerated individuals. With the core values of Respect, Integrity, Courage, and Correctional Excellence, the BOP has earned the reputation as one of the most elite correctional agencies in the world.

Incarcerated individuals convicted of the most serious offenses and those whose institutional adjustment is poor are housed in high security settings, or penitentiaries. Most incarcerated individuals live in medium, low, or minimum security institutions which provide greater degrees of personal freedom. All facilities have in-house support services, including Education, Medical and Psychology Services Departments.

Although all incarcerated individuals are convicted of federal crimes and separated from the community, they each have their own needs and abilities. Many have serious mental health and behavioral disorders and require assistance to maintain psychological stability necessary to function adequately in their environment. Therefore, Psychology Services play an integral role in mental health treatment of the federal population.

The BOP provides ample resources toward reentry programming to assist those who are motivated to change maladaptive thought and behavior patterns. Through the myriad of programs developed to address criminogenic needs, the federal recidivism rate has declined to only 34%, half the rate of many large State Departments of Corrections. These reentry programs include academic and vocational programs, chaplaincy programs, and a wide range of psychological services.

## Psychology Services in the Bureau of Prisons

With a team of over 35,000 employees, including more than 600 psychologists and another 600+ clinical service providers and psychology administrative support staff, the BOP is one of the largest employers of mental health professionals in the United States. In addition to psychology technicians and mid-level provider “Treatment Specialists,” Psychology Services in the BOP employs doctoral-level clinical and counseling psychologists. Psychologists are required to be licensed or license-eligible, and are encouraged to seek further credentialing (e.g., American Board of Professional Psychology (ABPP), American Psychological Association (APA) Division Fellowship). Maintaining professional competencies is a priority and annual continuing education is provided to every BOP psychologist.

The primary mission of Psychology Services within the BOP is to provide psychological, psychoeducational, and consulting services to incarcerated individuals and staff. Psychology Services staff assess the needs of each person in custody and ensures all incarcerated individuals with mental health needs have access to the level of psychological care comparable to that available in the community. The focus of treatment varies from crisis-based interventions to the modification of deeply entrenched maladaptive patterns of thinking and behaving. Incarcerated individuals within the BOP may present with a range of diagnoses, to include psychotic disorders, personality disorders, mood disorders, substance use disorders, and/or cognitive impairment. Psychologists in the BOP engage in a wide variety of clinical activities including psychodiagnostic assessment and treatment planning, individual therapy, group therapy, suicide prevention, and self-help and supportive services. In addition, Psychology Services staff collaborate with a multidisciplinary team and provide consultation to medical, custody, and unit team staff to provide comprehensive treatment and reentry resources to incarcerated individuals in our care.

## Psychology Services at FCC Butner

Despite (or perhaps because of) movie and television depictions, the public often has inaccurate information about life inside a correctional facility. It is not surprising then, that many students may have questions about what it is like to work in a prison environment. Our facilities are clearly different from other correctional settings and are quite unique. To fully appreciate the Butner milieu, a visit to the institution complex is ideal. However, a brief historical overview may shed some light on the quality of this experience.

The Butner site was originally slated to house a facility with a unique design concept and mission that would distinguish it from other correctional institutions. Conceived in the late 1950's as a model prison psychiatric facility, the formal proposal for the "Eastern Psychiatric Institute for Federal Prisoners" was approved in 1961, and land at the current site was acquired. Over \$1 million was spent in the planning phase alone, and budgetary constraints delayed construction for over a decade. These obstacles and iterative changes in mission and programming, the institution now called Federal Correctional Institute (FCI) Butner was dedicated May 13, 1976, and was immediately dubbed "the most advanced prison facility on earth." Since that time, the institution has been at the forefront of innovative correctional mental health programs. The FCI remains a flagship facility and is frequently chosen to pilot new programs such as the Sex Offender Commitment and Treatment Program, Drug Abuse, and Step-Down programs. The FCI also serves a general population of incarcerated individuals that includes a range of clinical problems from adjustment disorders to severe mental illness with an overlay of severe personality disorders. In 2023, FCC Butner added two Forensic Postdoctoral Fellowships in the Federal Medical Center and Commitment and Treatment Program to the training program.



Due to the tremendous resources in this area and the Butner site's history of excellence, the BOP targeted the location for development as one of the first Federal Correctional Complexes. In addition to the FCI, the 770-acre reservation now includes a minimum security Satellite Camp (SCP), a Low Security Correctional Institution (LSCI), an administrative security (houses all security levels) Federal Medical Center (FMC), and another medium security facility known as FCI-II.





The LSCI, FCI-I, and FCI-II facilities serve general offender populations with appropriate security needs.

The FMC provides treatment to individuals detained both voluntarily and involuntarily with mental health needs, assists the federal court system by providing forensic evaluation services for pretrial and presentence detainees, and delivers a range of inpatient medical care specializing in oncology, diabetes, dialysis services, surgery, and evaluations for organ transplant candidates.

With a diverse mission, FCC Butner provides a wide range of psychological and rehabilitative services to a varied population including numerous special needs individuals. FMC Butner also trains and develops specialized staff for the BOP. Combined, these facilities offer an extraordinary range of internship training experiences. Given the variety of program areas at FCC Butner and the diverse backgrounds of our various populations, staff encounter a wide range of cultures and presenting issues. Currently, there are more seriously mentally ill offenders in U.S. prisons and jails than hospitals. Our populations include extreme forms of psychopathology rarely seen in any other setting and are demographically and culturally diverse. At least 40 nationalities are represented at any one time, with the largest number coming from Mexico, various Central and South American nations, West Africa, and Asia. Incarcerated individuals in the federal prison system are extremely heterogeneous not only in terms of cultural background, but also in regard to socio-economic status, education, employment, and criminal background. Visitors generally remark on the openness of the facilities and the relaxed atmosphere, as both contrast sharply with their expectations. The architecture is modern, and the facilities are meticulously clean and well-maintained. Despite inevitable pressures to house large incarcerated populations, common areas and the housing units provide ample public space and remain free from a sense of crowding. While most correctional facilities resist outside scrutiny of their operations, our facilities welcome visitors of varied types, including members of Congress, local high school students, professional staff from neighboring state institutions, federal judges, defense attorneys, and delegations from other countries interested in correctional reform.

The Complex provides a broad spectrum of services to over 5,000 adult male offenders, which includes a general population of approximately 4,000, and 300 medical and 300 psychiatric inpatient beds. Individuals across all these populations have varying mental health

needs. We also have 200 beds for two Residential Drug Abuse Treatment Programs (RDAP) units, with one offering a Dual Diagnosis treatment component: a Commitment and Treatment Program for Sexual Offenders, and Step-Down mental health unit. Psychology Services is crucial to operations in all of these areas. Interns participate in three different service areas appropriate to the emphasis of the track for which they match, as discussed later.

The Psychology Services staff at FCC Butner includes 29 doctoral-level psychologists, most with extensive experience in clinical practice. The majority reflect a cognitive-behavioral theoretical orientation. Research interests include suicide prevention, anger and violence, competency restoration, neurological disorders and deviant behavior, and cultural factors in assessment, to name a few. An interest in the social, political, and legal implications of these special interests unifies the staff. Our staff define the field of forensic psychology in a broad sense, to include traditional applications such as providing treatment to offenders or performing court ordered evaluations, but also embracing a host of other professional psychological concerns that relate to any area of the law and to public policy debate.

Psychology Services maintains offices in several areas of the complex with full-time Administrative Assistants or Secretaries working across the Complex. Offices are located in each facility to accommodate interns, and all staff and interns have computer workstations. Facilities are available for group therapy, audiotape, and videotape, and for video editing. Professional libraries are located at each institution, and Psychology Services maintains a wide variety of standardized testing materials and equipment in each Psychology area. Computer-assisted research is facilitated both by on-site staff and by the agency's central office librarians. Staff also have access to teaching aids through the Employee Services Department, which maintains a large training center with audiovisual equipment and a computer lab centrally located at the complex. Finally, EPPP materials are available to interns to assist in studying for the licensing examination.

Psychology Services and FCC Butner overall have training and staff development as key components of their overall mission. In addition to core Psychology staff, trainees have broad exposure to allied disciplines, including Psychiatry, general Medicine, Nursing, Law, and Social Work, which also support active training programs. A listing of adjunct staff is included in the Psychology Services Staff section. Psychology Interns benefit from the complex's overall



commitment to training and the ready interchange of ideas and experiences with trainees and professionals from other disciplines.

## Psychology Internship at FCC Butner

Through the combination of individual and group supervision, experiential learning elements (e.g., direct provision of mental health services), and educational activities (e.g., didactic presentations, assigned readings), interns will gain knowledge and skills in forensic psychology, clinical interventions with a diverse population to include those diagnosed with serious mental illness, substance abuse, and sex offender treatment within a correctional environment. Exposure to a correctional facility and an incarcerated population will contribute to interns being well trained for continued work within a prison setting. Perhaps the best indicator of this effort lies in the fact that, historically, about 50% of our interns are hired as Staff Psychologists within the BOP shortly after graduation. However, training is purposely tailored to be sufficiently broad so that interns are well suited for work in a wide variety of clinical settings and many interns also go on to complete formal post doctoral fellowship training in various areas (e.g., forensic psychology, serious mental illness, neuropsychology), work in private practice settings, or psychiatric hospitals.

The internship program is structured to ensure interns receive training in all aspects of the Psychology Services Department. Interns bring considerable knowledge of psychological theory and science-based practice gained in academic and practicum settings. During internship, interns are further exposed to the scientific basis of psychological practice via didactic seminars, assigned readings and supervision of clinical work. In addition, the internship program provides abundant exposure to the application of critical/scientific thinking in the understanding and treatment of individual cases through clinical training experiences and clinical supervision.



The training philosophy of the internship program emphasizes experiential learning and considers both the tremendous opportunities available within our setting and the inherent challenges of working in a prison environment. Interns will learn by providing a variety of psychological services to incarcerated individuals throughout the training year and by collaborating with staff in other disciplines. To facilitate professional independence and confidence, training experiences proceed in a sequential, cumulative, and

graded manner. For example, at the beginning of the year, interns may initially observe supervisory staff conduct rounds, perform intake interviews, and engage in crisis intervention. Interns subsequently perform these functions in the presence of supervisory staff and as interns feel more comfortable and display increased competence, they perform these tasks independently.

Through the internship training program, interns will develop a satisfying professional identity based on self-awareness and confidence in generalist assessment, intervention, and consultation skills, as well as exposure to specialty areas of professional practice in the field of corrections. Interns are challenged to participate actively in individual and group supervision, staff meetings, and didactic seminars.

### Program Aim, Competencies, and Outcomes

The aim of the Doctoral Psychology Internship Program at FCC Butner is to train entry-level professional psychologists who can also function competently in the correctional environment. This is achieved by using the following competencies as benchmarks for our training of interns:

**Competency 1: Research** – The intern will demonstrate proficiency in understanding and applying scientific research to the practice of psychology generally, and the professional practice of psychology in corrections specifically.

**Competency 2: Ethical and Legal Standards** – The intern will demonstrate proficiency practicing psychology within the boundaries of the ethical and legal principles governing professional behavior. The intern will also demonstrate a commitment to professional growth and development generally, and within the correctional environment specifically.

**Competency 3: Individual and Cultural Diversity** – The intern will demonstrate awareness of and sensitivity to cultural factors impacting clinical services with diverse individuals, groups, and communities who represent various cultural and personal backgrounds and characteristics.

**Competency 4: Professional Values and Attitudes** – The intern will demonstrate proficiency in providing psychological services that are consistent with professional values, beliefs, and practices within the field generally, and within the correctional environment specifically.

**Competency 5: Communication and Interpersonal Skills** – The intern will demonstrate proficiency in both written and verbal communication with peers, supervisors, and other staff that is timely, accurate, and jargon free.

**Competency 6: Assessment** – The intern will demonstrate proficiency in conducting screening, assessment, and diagnosis for a wide range of disorders and problems, using a multimodal approach, specific to the needs of the situation for individuals, groups, and/or organizations.

**Competency 7: Intervention** – The intern will demonstrate proficiency in planning and implementing a variety of evidence-based practices, including empirically supported treatments, to address mental health needs among individuals, groups, and organizations.

**Competency 8: Supervision** – The intern will demonstrate proficiency in understanding basic principles of clinical supervision (e.g., building supervisory alliance, providing and accepting effective summative feedback, promoting growth and self-assessment of peer/trainee, seeking consultation) and apply these principles as peer supervisors during group supervision and/or with doctoral practicum students, if available.

**Competency 9: Consultation & Interprofessional/Interdisciplinary Skills** – The intern will demonstrate proficiency in fostering and coordinating relationships with various disciplines in the correctional environment (e.g., management, correctional services, unit management and health services) by providing written and verbal communication, and professional assistance responses to client or system needs and aims.

### Internship Duties

Interns at all BOP sites begin by participating in a two-week Introduction to Correctional Techniques (ICT) training program. This program introduces the correctional environment, instructs interns in BOP policy, and familiarizes them with the roles of various departments. This is followed by a multi-day orientation to Psychology Services.

Interns are required to complete 2,000 hours of training over a 12-month period, along with identified clinical experiences and adequate ratings on intern evaluations to successfully complete the internship program. Training experiences include clinical contact, supervision, didactics, and other professional activities. Interns, like all BOP employees are considered

essential workers and are expected to report to the institution Monday through Friday (excluding federal holidays), even during COVID pandemic and other potential emergency situations. Ordinarily, interns are not permitted to work beyond normal operating hours (7:30 am – 4:00 pm) apart from clinical or institutional emergencies. The internship year begins in August and ends the following August. Please note all interns will receive generalist training working as a psychologist-in-training within a correctional environment. A basic description of additional training experiences will follow.

### Internship Rotations

FCC Butner offers seven full time positions each year, which provide 40 hours per week of training activities. This program began with the 1992/93 training year and was awarded accreditation effective June 25, 1993. Our most recent accreditation site visit took place in 2015, and our next review is scheduled for 2024. In applying to the internship program, applicants may indicate in the cover letter specific interest in any of the five tracks described below. Please do not rank your selections.

FCC Butner is unique among BOP internship training sites as interns match to specific tracks which will determine the major area of study during the training year. Applicants can be considered for any of the available tracks listed below. During your interview, you will learn about each of the training tracks and then be asked to rank up to three tracks to which you would like to apply during the match process. This offers the opportunity to have the ability to rank multiple tracks for FCC Butner during the match process. The specific track for which one matches determines the combination of applied activities, including a full-time, six-month major area of study in the “home” track. Those who match for the Residential Drug Abuse Program (RDAP), Commitment and Treatment Program (CTP), or Serious Mental Illness (SMI) tracks will spend six months of the internship year at the FCI-I, FCI-II, or FMC, with time devoted primarily to activities in the relevant program area. Those matching for the Inpatient Forensic track will complete a six-month rotation at the FMC, participating in activities appropriate to that track. Those matching for the Correctional Psychology track will complete a six-month rotation at the FCI-II or FCI-I. The remaining half-year is spent receiving emphasis training at one or more of the “other” facilities, where interns spend the equivalent of part-time in an activity which complements the training in the home track, and the other part-time in Correctional

Psychology activities as described above. **During internship year, each intern will have an opportunity to work in Correctional Psychology, Forensic Assessment, and a specialized treatment program, which could include Residential Drug Abuse Program, Step Down Program, Commitment and Treatment Program, or Forensic Treatment Services thus providing a diverse training year** (about one fifth of each intern's workweek is spent in didactic seminars, supervision, intern meetings, etc.). While interns are matched to tracks, should they not be scheduled to get experience in an area of interest, supervisors are generally flexible in allowing interns to receive brief training experiences in these areas.

<b>Training Track</b>	<b>Major Area of Study</b>	<b>Emphasis Training</b>
Inpatient Forensic (2 positions)	Forensic Evaluation Services (FES) Program: full-time for six months	<ul style="list-style-type: none"> <li>▪ Psychology Treatment Program: part-time for six months</li> <li>▪ Correctional Psychology: part-time for six months</li> </ul>
Serious Mental Illness (SMI) (2 positions)	SMI Program: full-time for six months in either inpatient or outpatient setting	<ul style="list-style-type: none"> <li>▪ Forensic evaluation training: part-time for six months.</li> <li>▪ Correctional Psychology: part-time for six months</li> </ul>
Residential Drug Abuse Treatment (RDAP) (1 position)	RDAP: full-time for six months	<ul style="list-style-type: none"> <li>▪ Forensic evaluation training: part-time for six months</li> <li>▪ Correctional Psychology: part-time for six months</li> </ul>
Correctional Psychology (CP) (1 position)	Correctional Psychology: full-time for six months	<ul style="list-style-type: none"> <li>▪ Psychology Treatment Program: part-time for six months</li> <li>▪ Forensic evaluation training: part-time for six months</li> </ul>
Commitment and Treatment Program (CTP) for Sexual Offenders (1 position)	CTP Program: full-time for six months	<ul style="list-style-type: none"> <li>▪ Correctional Psychology: part-time for six months</li> <li>▪ Forensic evaluation training: part-time for six months</li> </ul>

## Forensic Track



The Forensic Evaluation Service (FES) is housed at FMC Butner. The FMC accepts incarcerated individuals at the discretion of the federal courts for various pre- and post-trial forensic evaluations (e.g., competency, sanity, violence risk), for voluntary hospitalization for mental health treatment, or subject to federal quasi-criminal commitment. Given the highly charged legal atmosphere, court-ordered evaluations involve intensive psychological evaluation, understanding of legal standards and procedures, and highly refined report-writing. Staff, including interns (with supervision), provide expert testimony in federal courts throughout the United States when called upon to do so. Members of the public may be aware of Butner's forensic evaluation program by virtue of high publicity cases that attract national attention. In addition to evaluation, the inpatient treatment service involves the same skills as community psychiatric hospitals, including clinical interviewing, treatment planning, group therapy and education, and supportive, behavioral and insight-oriented individual psychotherapies. Work at the FMC involves extensive collaboration between Psychology Services, Health Services, and allied health professionals.

There is also an “outpatient” forensic evaluation mission at FCC Butner housed at FCI-I through the CTP. Interns may also have an opportunity to train in “Outpatient” Forensic Evaluation of criminal defendants at the behest of federal courts from throughout the United States. The Forensic Evaluation Service conducts psychological evaluations and provides documentation pursuant to civil commitment hearings, subsequent progress reviews, and other reports. Evaluations frequently include assessments related to competency to stand trial, mental state at the time of the offense (sanity), and risk of sexual violence.

The forensic evaluation training provides doctoral interns with exposure to a variety of clinical populations within a forensic context at a medical referral center. During the rotation, the aim of the training is to provide enhanced clinical skills relevant to forensic practice on which postdoctoral training can build. This includes having some familiarity with case law that controls and limits practice while under supervision by a licensed psychologist. Interns will have a foundational knowledge of the core principles of the application of psychology and the legal system with an understanding of the ethical issues that arise. In addition to evaluation, the inpatient treatment service involves the same skills as in community psychiatric hospitals,

including clinical interviewing, treatment planning, group therapy and education, and supportive, behavioral and insight-oriented individual psychotherapies. Interns assist with the competency restoration process through facilitating weekly groups. Forensic work is unique at FMC Butner, compared to other BOP or forensic training sites, as FCC Butner has the largest competency restoration program in the BOP. Interns will receive training in the competency restoration process and evaluation, as well as how to facilitate Competency Restoration Groups. As noted above, interns often get opportunities to complete Violence Risk Assessment, Competency Restoration, and Sanity evaluations, as well as Annual Forensic Updates for those that are civilly committed and receiving treatment at FMC Butner.

During this rotation, the full time forensic intern will complete forensic evaluation rotation (major area of study) at the FMC conducting inpatient evaluations. All other interns will complete their forensic evaluation rotation in either the inpatient or outpatient setting. All interns will receive training in criminal mental health law, particularly the federal statutes relevant to pretrial evaluations. A training emphasis is placed on the collection and organization of diverse sources of data into meaningful psychological reports. Intensive supervision is provided to assist the intern in the analysis of data and in the production of reports that are defensible in a court setting. Training will include discussion of key psychological issues to consider in forensic evaluations, such as malingering, dangerousness, and organic syndromes. Didactic training in the provision of court testimony will be supplemented with opportunities to observe expert testimony when available. Consultation with medical and Correctional staff regarding client management is also required. Interns will also work with the two Forensic Post Doctoral Fellows at FCC Butner.

### **Serious Mental Illness (SMI) Track**

Interns who match to the SMI track will receive training in either the Mental Health Step-Down Program (SDP) located at FCI-I or the Forensic Treatment Service (FTS) housed within the FMC.

The Step Down Program is a residential treatment program for incarcerated individuals with severe and persistent mental illness to include psychotic disorders, major depression, and bipolar disorder. The goal of the step-down unit is to provide treatment for chronic mental illness that is evidence-based, maximizes functioning, and minimizes relapse and hospitalization.



Interns are involved in the clinical management of cases, providing group therapy, and short-term individual therapy, and crisis intervention. Interns are also involved in teaching psycho-educational modules aimed at cognitive rehabilitation and life skills training. Interns become familiar with medications prescribed to these patients through collaboration with Psychology Services as part of an outpatient medication clinic. Consultation with other departments (e.g., Rehabilitation Services, Education, Recreation, and Religious Services) is an integral part of the program.

The Forensic Treatment Services team at FMC Butner conduct treatment for those that are involuntarily or voluntarily committed to the hospital for inpatient treatment. A majority of the individuals receiving treatment at FMC Butner are individuals civilly committed as a result of mental disease and dangerousness or due to dangerousness following a Not Guilty by Reason of Insanity finding. The current inpatient population is approximately 150 individuals diagnosed with a significant mental illness who present with varying levels of symptoms severity and insight into their mental illness and need for treatment. Interns matching with this rotation will work closely with the FTS team, which includes Psychologists and Treatment Specialists, as well as working closely with Psychiatry, Social Work, Occupational Therapy, Recreation Therapy, Social Work, Nursing, and Correctional Services staff. Interns will be involved in all aspects of clinical treatment, to include group and individual treatment provision, involuntary medication due process hearing and procedures, writing treatment summaries for forensic evaluations and crisis intervention.

Interns who match to the SMI track will be involved in all aspects of the programs, including conducting group and individual therapy sessions, completing comprehensive psychological evaluations, and participating in multi-disciplinary treatment team meetings. This rotation will also focus on helping interns become comfortable with consulting and recommending appropriate courses of action to Lieutenants and Executive Staff regarding individuals with severe mental illness. Interns involved with this rotation will become familiar with BOP policies on the use of restraints and involuntary medication.

### **Residential Drug Abuse Treatment (RDAP) Track**

The Residential Drug Abuse Treatment Program (RDAP) at FCC Butner was one of three pilot programs instituted as part of the BOP's effort to evaluate diverse treatment orientations in

an era of rising prison populations associated with drug use. RDAP at Butner has remained a flagship treatment program that is often visited by other federal and state facilities in an effort to assist other drug treatment programs. FCC Butner has two RDAPs operating at the FCI-I and FCI-II. In 2021, FCC Butner launched a dual diagnosis component to RDAP to provide treatment for individuals with comorbid mental illness. An estimated 75 percent of those incarcerated have a substance use history, many of whom participated in a range of drug treatment programming. RDAP offers some of the most effective reentry tools and services than any other treatment program in the BOP. In fact, there is a 24 percent reduction in recidivism when one successfully completes RDAP in conjunction with a GED. Under the direction of a licensed clinical psychologist, this residential treatment program involves comprehensive treatment using an integrative model that includes strong cognitive-behavioral and relapse prevention components. Participants proceed through 500 hours of a prescribed treatment program over nine months, while living in a residential setting. Implemented as a modified therapeutic community, it emphasizes personal accountability and decision-making, as well as the connection of substance use to faulty/criminal patterns of thought and action that affect other areas of participants' lives. Three phases of treatment are completed where senior members of the community play a significant role in assisting junior peers and facilitate certain facets of their own treatment. During treatment, participants learn how to confront and level with one another, in prosocial ways, common criminal thinking errors and corrections for those, and complete rational self-analyses to defend against these thinking errors in the future. Those completing the program are subject to required post-release supervision, and aftercare treatment is planned by program staff. A Drug Abuse Program Coordinator is located at every BOP institution across the country, providing many promotional opportunities to those with experience in drug treatment programming. Interns in this rotation carry an individual caseload, facilitate treatment groups, assist with community meetings, and work with a multidisciplinary team within the therapeutic community.

FCC Butner also offers Medication Assisted Treatment (MAT) in conjunction with residential and outpatient substance abuse treatment. Psychology Services staff work collaboratively with Health Services to screen incarcerated individuals for appropriateness and offer group and individual substance abuse treatment in order to address the psychological component of addiction. Interns have the opportunity to conduct biopsychosocial assessments of

incarcerated individuals for diagnostic and treatment planning for those referred for MAT as well as to facilitate treatment groups focused on mindfulness, relapse prevention, cognitive behavioral therapy, and motivational interviewing.

Interns will become acquainted with the use and interpretation of assessment instruments for the diagnosis of Substance-Related Disorders. An emphasis is also placed on intellectual screening and the assessment of personality characteristics and/or associated psychopathology that may interfere with the course of treatment. Interns typically participate as group cotherapists with an assigned Drug Treatment Specialist but should expect to lead the group independently. Individual intervention with selected cases is also required to facilitate a group process and/or address related problems. Interns provide consultation to the RDAP treatment unit team at weekly team meetings where treatment progress may be discussed with other unit staff members. Decisions regarding treatment progress may be critical in determinations regarding early release eligibility. Interns involved in these activities will acquire an understanding of BOP policy requirements regarding drug treatment programming.

### **Correctional Psychology (CP) Track**

Correctional Psychology areas are located at each facility on the complex and are most representative of the psychology functions in mainstream correctional settings. The correctional psychology tracks, both full time and half time, prepares interns for a Staff Psychologist role should they want to work for the BOP. Incarcerated individuals are served in several ways. New arrivals to the institutions participate in an Admission and Orientation Program which includes individual interview, an orientation to available services, and basic drug abuse education. Diagnostic services include clinical evaluation of highly varied mental disorders including the full range of conditions, risk assessments for suicide and danger to others, and treatment program suitability. Treatment services include crisis intervention, short and long-term individual therapy, group psychotherapy, psycho-educational groups, and counseling regarding adjustment and family issues. Psychologists also serve as members of interdisciplinary unit teams and assist in planning programs and reviewing progress of incarcerated individuals.

The goal of this rotation is to develop an understanding of the role of the psychologist in crisis intervention, suicide prevention, and management of disruptive behavior in the correctional environment. This is considered a critical function of Psychology Services in the BOP, and all

BOP facilities have psychologists who must fulfill these duties and responsibilities. Interns will become familiar with clinical standards of practice for managing crisis situations, with an emphasis on suicide risk assessment and prevention, and are involved in all phases of the management and operation of the Suicide Prevention Program. They learn clinical, legal, and ethical standards for suicide prevention in correctional settings and the applicable BOP policies and documentation requirements. Interns will also be involved in training and debriefing suicide watch observers. Interns on the Correctional Psychology rotation also function as consultants for the Special Housing Unit (SHU). SHU is a high security environment where individuals are restricted for administrative or disciplinary reasons. Since this environment can be stressful, evaluations are conducted routinely to determine ongoing psychological adjustment and overall functioning, and a self-study mental health program designed specifically for those housed in the SHU is facilitated by interns on the Correctional Psychology rotation. Receiving and Discharge (R&D) is the central processing site for individuals arriving at FCC Butner. In R&D, Psychology staff evaluate the mental status of those who are known to have a history of serious mental health problems, and we consult with staff regarding appropriate housing and other management concerns. Members of the Psychology staff screen this population to determine the need for further mental health evaluation or treatment. Interns are involved in the screening process and have numerous opportunities for crisis intervention and brief counseling with this population. Lastly, members of the Correctional staff are provided regular consultation to assist in dealing appropriately with those who pose persistent or difficult behavioral management problems. Interns are familiarized with confrontation avoidance techniques and BOP policies regarding the use of force and emergency medication.

### **Commitment and Treatment Program (CTP) Track**

The mission of the Commitment and Treatment Program (CTP) is to protect the public by reducing the incidence of sexual violence and child molestation in society. The program's implementation follows Congress's passage of the Adam Walsh Child Protection and Safety Act of 2006. The CTP fulfills this mission by confining and providing comprehensive treatment services to BOP inmates who have been certified or civilly committed as a sexually dangerous person. The primary goal of therapeutic confinement is to assist these individuals in developing effective self-management skills, and to help them prepare for productive and crime-free lives

upon conditional discharge and release to the larger community. The CTP is comprised of two essential branches of services: the Clinical Service and Forensic Evaluation Service.

The Clinical Service component of the CTP is responsible for provision of the psychological treatment of the inmate in accordance with evidence-based standards of care, execution of crisis and critical interventions to manage high-risk and treatment interfering behaviors, and coordination of the multidisciplinary treatment team. Treatment in the CTP is oriented towards the common goal of reducing the participants' risk of recidivating and promoting healthy and prosocial lifestyles in the interest of protecting the public. The CTP follows the Risk-Needs-Responsivity approach to the treatment of offenders. Criminogenic needs, individual factors, and treatment considerations are identified through personalized assessment of every participant. Utilizing this knowledge of individual risk areas and treatment needs/considerations, treatment plans are developed and executed through use of group and individual treatment interventions within a Modified Therapeutic Community model. Interventions are primarily based in Cognitive Behavioral Therapy, though other systems of psychology are intermittently utilized as appropriate based upon individual factors and evidence-based practices to address treatment needs. Within the Forensic Evaluation Service, staff conduct Pre-certification Evaluations, Sexual Dangerousness Evaluations, Annual Treatment Progress Reviews in addition to competency and responsibility evaluations for pre-trial inmates unaffiliated with the CTP. During the CTP rotation, interns work primarily within the Clinical Service component but also have opportunities within the Forensic Evaluation Service depending upon training interests. Within the Clinical Service, interns have training opportunities including the administration of testing instruments (with an emphasis on sex-offender specific psychological measures of both static and dynamic risk assessment), training on evidence-based interventions for the reduction of risk of sexual recidivism, carrying a treatment caseload of individual participants with a variety of treatment needs, experience facilitating group-based treatment aimed at addressing dynamic risk factors associated with increased sexual and general recidivism, and collaborating with a multidisciplinary treatment team to meet the treatment needs of the participants. Additionally, interns are often able to attend a hearing at the federal courthouse in Raleigh to observe forensic expert testimony and the judicial components of the civil commitment process.

### **Additional Services**

In addition to the training tracks listed above, interns may have the opportunity to provide treatment and receive experience with some of the other unique populations housed within the complex.

Treatment of Mentally Ill is designed for Care Level 3 incarcerated individuals (chronically mentally ill persons) who can function adequately on an outpatient basis and are housed throughout the complex. These incarcerated individuals receive varying levels of treatment and support from Psychology and Psychiatry staff. Individual therapy, group therapy, and ancillary treatments (e.g., reentry group) are provided under the direction of the Advanced Care Level Psychologist. As discussed on the following pages, many of these incarcerated individuals participate in the residential Step-Down Program, while others are housed in general population.

The Behavioral Medicine Program involves working with incarcerated individuals who present with psychophysiological disorders, psychological factors affecting their physical conditions, and/or physical conditions which have psychological sequelae. FMC Butner carries out the oncology mission for the BOP resulting in incarcerated individuals from across the country being sent to FMC Butner for medical treatment. Staff serve as consultants when psychological factors are adversely affecting engagement in or compliance with medical care, and work in concert with Health Services staff (physicians, physician assistants, physical therapists, nurses and social workers) to identify, diagnose and treat incarcerated individuals for whom the interplay of physical and psychological factors is significant. Staff may provide group and individual treatment for psychophysiological disorders, including hypertension, chronic pain, tension and migraine headaches, anxiety disorders, etc., and incarcerated individuals with terminal or severe diseases, such as cancer, heart disease, and AIDS.

Non-Residential Drug Abuse Treatment is a drug education program based upon a biopsychosocial model and is targeted to those with significant substance use problems but is also open to all interested incarcerated individuals. Non-residential drug abuse treatment also includes both preparatory and maintenance treatment in coordination with residential substance abuse treatment, as described above.

### Temporary Duty Assignment (TDY)

Temporary Duty Assignment (TDY) Opportunities include gaining experience at other BOP facilities, which can be a valuable training experience for interns as they are able to understand how the mission and role of psychologists can vary between institutions due to location, institution culture, security level, and institution mission. Past FCC Butner Psychology Interns have been provided with opportunities to complete a TDY at other institutions. For example, week-long TDYs have been completed at FCC Hazelton, FCC Florence, USP McCreary, FCI McDowell, and USP Big Sandy.

### Didactic Training

The didactic portion of the curriculum includes two main components. If COVID-19 precautions are required, seminars are conducted by WebEx videoconferencing technology and teleconferencing. Otherwise, seminars are held in person. The program offers a weekly Clinical Psychology Seminar for the benefit of both staff and interns from across the complex. Staff Psychologists and interns present emerging diagnostic or therapeutic dilemmas for review and feedback from the group, and diagnostic and treatment methods for various conditions or disorders are examined with an emphasis on empirically validated treatments. Interns typically take responsibility for one presentation each, which may be based upon dissertation research or another area of interest that is agreed upon in consultation with a supervisor, or a case presentation of recent clinical work such as psychotherapy or certain types of evaluations. Intern presentations serve to hone valuable skills in presenting to professional audiences and reinforce the importance of scholarship. Staff involvement includes mainly topical presentations of clinical importance and may serve to relay information obtained through continuing professional education or other sources. Outside presenters are also scheduled as part of this series of seminars. The Psychology Seminar normally meets at either the FCI or in the Complex Training Center. A copy of the schedule of Psychology Seminars for the 2022/2023 training year is included in the Appendix.

The program also includes in a Forensic Seminar series for Psychology Interns, focusing on professional, ethical, and legal issues. Seminar presentations are offered by Psychology Services staff, adjunct staff from this facility, and scholars and practitioners from the Research Triangle community. The series of presentations explores key areas in professional and ethical



issues, criminal and civil law, public policy regarding mental health and mental disabilities, scholarship and research, and forensic and correctional psychology. This program also includes Mock Testimony exercises, with each trainee assuming the role of expert witness. Mock Court is held with our staff attorneys and psychologists serving as judge and attorneys. The forensic seminars also include periodic discussion sessions focusing on landmark cases in mental health law. This portion of the program covers an extensive group of case law precedents pivotal in the evolution of mental health policy, including civil and criminal topics, juvenile and family law, civil commitment, right to treatment, informed consent and treatment refusal, disability and workplace discrimination, malpractice, and other areas of interest to clinicians. A copy of the seminar schedule with topics and presenters for the 2022/2023 training year is included in the Appendix.

The internship program encourages flexible use of other activities such as attendance at various legal proceedings in federal and local courts, preparation of publications, participation in therapy or counseling as an adjunct to training, and numerous other alternatives. Each year, the internship class goes to the local Federal Courthouse to view civil commitment hearings and have an opportunity to speak with attorneys and the Federal Judge in order to ask questions. Interns also participate in a fully funded National Internship Conference with interns for all of the BOP internship sites. The Research Triangle is a hotbed of activity for clinicians, and there are varied colloquia sponsored by local psychological associations, Duke University, North Carolina State University, the University of North Carolina, Central Regional Hospital, and numerous other groups. Interns are encouraged to avail themselves of these opportunities and leave can be granted. Psychology Services is occasionally able to provide at least partial funding for intern travel to meetings or workshops. In addition, we sponsor one or more major presentations on site each year, and share an annual learning retreat for interns and supervisors with Central Regional Hospital.

## Research

FCC Butner is primarily a service-oriented professional practice setting. Our staff has specific interests but are usually involved in practice, training, and program evaluation rather than empirical research projects. However, interns may have an opportunity to participate in some type of research activity. Interns are encouraged to engage in professional research

activities for up to two hours per week, as long as they are meeting all clinical training requirements. This time may include completion of dissertation research.

### A Day in the Life of an FCC Butner Intern

Every day at the BOP is new and exciting and will vary depending on the needs of the facility, Psychology Services Department, and incarcerated individual(s). Exposure to constant stimulation is key in the development and engagement of our interns. Recognizing that there is no “typical day” at the BOP, below is a sample of what a week could look like for an intern.

	Monday	Tuesday	Wednesday	Thursday	Friday
7:30am	staff meeting	community meetings	forensic group supervision	community meetings	staff meeting
8:30am	clinical interviews	clinical interviews	testing supervision	clinical interviews	group therapy
9:30am	intakes and screening	collateral contacts	forensic seminar	intakes and screening	collateral contacts
10:30am	notes/treatment plans	individual testing		group supervision	clinical interviews
11:30am	lunch	lunch	lunch	lunch	lunch
12:00pm	individual supervision	group supervision	group testing	individual therapy	seclusion rounds
1:00pm	individual testing	suicide risk assessment	group testing	notes/treatment plans	individual therapy
2:00pm	psychology Seminar	group therapy	individual supervision	med/education consult	notes/treatment plans
3:00pm	group multicultural Supervision	individual therapy	note entries	med/education consult	report writing

### Supervision

Interns are expected to demonstrate a reasonable degree of autonomy and independence, consistent with their transition from student to practitioner. At the same time, interns should expect sufficient oversight and supervision to ensure that they will benefit maximally from training opportunities and to ensure quality services. FCC Butner adheres to APA guidelines for supervision. These include a minimum of two hours of group supervision each week and two hours of individual supervision by a licensed psychologist. Individual supervision is tailored to the needs of each person and can include review of written notes and reports, discussion of therapy cases, review of taped sessions, and live supervision of sessions. Professional development is emphasized as well as clinical service provision. At the beginning of the training year, rotation supervisors and interns discuss personal goals interns may have related to their professional development. Every effort is made to provide learning experiences and relevant supervision to help interns achieve their desired goals and improve upon targeted competency

areas. Ample opportunity for unscheduled and less formal supervision is also afforded. Interns will also receive a significant amount of group and peer supervision through scheduled group supervision, staff meetings, formal case reviews, intern seminars, and in-house continuing education.

Interns maintain an ongoing record of the supervision they receive. Written evaluations are prepared quarterly based on feedback from supervisory staff. These are reviewed with the interns, and the middle and end of the year evaluations are copied to the relevant graduate programs. Interns also complete evaluations of the quality of training and supervision they receive, and this feedback is utilized by the staff to further enhance the program. Upon satisfactory completion of the training year, each intern will receive a certificate of participation, and notification to this effect will be forwarded to the intern's graduate program.

Interns participate in forensic group supervision during their six-month rotations through forensic evaluation services and receive group case consultation supervision when involved in treatment rotations. During the forensic evaluation rotation, interns also participate in a half-hour group supervision with the Neuropsychologist to review frequently used measures and discuss the use of psychological testing in forensic assessment. Each Monday throughout the year, all interns participate in a larger group supervision that has several components—professional development, BOP policy, cultural competency, and providing supervision. This last element involves discussion of supervision theory and practice and role playing.

Multicultural Supervision - Our training program approaches diversity from a cultural humility perspective, which encourages clinicians to work with diverse clients while maintaining an attitude of openness, acknowledging and owning one's limitations to understanding a client's cultural background and experience, and emphasizing continued growth and development over time rather than obtaining a level of multicultural competence. Given the diverse population, conversations about diversity and culture are inter-woven into our daily practice, weekly supervision with interns, and didactic learning. In addition, interns and staff participate in multicultural group supervision, which focuses specifically on multicultural issues, including clinical interventions with culturally diverse patients, personal biases or stereotypes that may influence one's clinical work, and our own cultural identities and how they may affect our treatment of patients. Interns and staff will engage in mutual self-reflection and will be expected to actively participate in this process through self-disclosure of personal identities, biases, and

reactions. As previously noted, diversity is valued at FCC Butner. You will be respected without regard to sex, race, color, ethnicity, national origin, gender identity, sexual orientation, religion, age, social class or disability. Prejudice and bigotry are not permitted and will be challenged. Harassment and discrimination are not tolerated.

Our training program approaches diversity from a cultural humility perspective, which encourages clinicians to work with diverse clients while maintaining an attitude of openness, acknowledging and owning one's limitations to understanding a client's cultural background and experience, and emphasizing continued growth and development over time rather than obtaining a level of multicultural competence. Given the diverse population, conversations about diversity and culture are inter-woven into our daily practice, weekly supervision with interns, and didactic learning. In addition, interns and staff participate in a monthly multicultural group supervision, which focuses specifically on multicultural issues, including clinical interventions with culturally diverse patients, personal biases or stereotypes that may influence one's clinical work, and our own cultural identities and how they may affect our treatment of patients. Interns and staff will engage in mutual self-reflection and will be expected to actively participate in this process through self-disclosure of personal identities, biases, and reactions.

Multicultural training is an important part of the development of interns into future psychologists. Our program does our best to provide robust training in this area through didactics and supervision, as well as providing support for diverse interns as you navigate your role in the Bureau of Prisons. In addition to local efforts, we offer a national mentorship program entirely for psychologists and psychology interns that is centered on diversity. We realize that we may not always be best suited to provide mentorship around specific diverse identities when we do not hold that same identity or have not experienced the same challenges within our agency. Due to this, we established a database of diverse psychologists across the agency who are volunteering their time to provide mentorship around topics of diversity, identity development, and working in the BOP. All BOP interns have the opportunity to be matched with a mentor within the agency. If you choose to participate in the program, you will meet either virtually or over the phone with your mentor at least once a month, unless you both agree more frequently would be beneficial.

The Internship Program Coordinator serves as a resource for interns and is responsible for the development, implementation, and evaluation of the internship program. They make

training assignments, handle clinical and administrative problems, plan the sequence of formal training experiences, prevent duplication of experiences, and maintain close contact with other supervisors.

### Intern Evaluation

Evaluation of intern progress occurs both informally and formally. Supervisors and interns are encouraged to have frequent discussions regarding strengths and areas for improvement throughout the training year. Intern progress is formally assessed at the end of each rotation with the completion of a written evaluation by the primary rotation supervisor. Each rotation has a statement of expected learning objectives, with the option of additional, individualized goals. Interns will be provided with the evaluation criteria/elements during orientation, and at the start of each rotation. Interns are evaluated using a tool common to all BOP internship training sites. The evaluation measures intern progress with regard to the following profession-wide competencies, as delineated by APA: Research; Ethical and Legal Standards; Individual and Cultural Diversity; Professional Values, Attitudes, and Behaviors; Communication and Interpersonal Skills; Assessment; Intervention; Supervision; and Consultation and Interprofessional/Interdisciplinary Skills. Supervisors complete the evaluation form and discuss the results with the intern. Signed copies of the evaluation forms are maintained in the interns' files and a copy is sent to the interns' academic Director of Training. In the event that an intern received an unsatisfactory evaluation, the supervisor and Internship Program Coordinator will identify specific areas for improvement and implement activities to foster clinical growth in that area. Additional supervision will be provided, as needed, until the intern demonstrates an acceptable level of competency. In addition to individual rotation evaluations, each intern will also receive a baseline evaluation at the start of the internship year and a final performance evaluation within the month prior to the conclusion of the training year. These measures are designed to assess progress throughout the year. Successful completion of internship will depend on the intern achieving ratings consistent with the minimum level of achievement identified on the evaluation form. The format will be consistent with evaluations utilized at other BOP internship sites.

Psychology Interns also complete evaluations of the quality of training and supervision they receive. Interns will complete an evaluation of the primary supervisor and their experience

on each rotation. They will also complete a final evaluation of the internship program and the overall training year. All of this feedback is shared anonymously and strongly considered when making modifications to the training program.

### Grievance Procedures

Psychology Interns have access to existing federal procedures for resolving grievances and are strongly encouraged to discuss any concerns or grievances about professional, ethical, or departmental issues. Written Grievance Process and Procedures are reviewed with Psychology Interns during orientation to the Psychology Department. Psychology Interns are provided with a written copy of these procedures. Most times, informal resolution will be successful. However, we recognize that this is not always the case. In those instances, use of the “chain of command” is warranted. In ascending order, interns should bring the matter to the attention of the rotation supervisor, Internship Program Coordinator, and Chief Psychologist. If there is still no resolution, the intern can approach the Associate Warden of Programs, and the Warden.

### Benefits

Interns will receive the following benefits:

- A GS-09, Step 1 salary of approximately \$61,488 (as of 2023)
- Paid annual and sick leave, accrued at four hours per pay period
- Paid federal holidays
- Health insurance
- For interns who require maternity or paternity leave, they will be expected to first use all accrued hours of annual and sick leave. For additional time off that is not covered by accrued leave, the intern would need to submit a request for leave without pay to the Warden. In the event of maternity or paternity leave, the Internship Program Coordinator will work closely with the intern to ensure all requirements for internship and clinical training hours are completed in a timely manner.
- Liability coverage for on-site professional activities.
- Professional development benefits, including a fully funded conference in Denver with interns across all BOP institutions.

### APA Accreditation and APPIC Membership

The FCC Butner Psychology Internship Program has received accreditation by the APA since 1992/1993 and meets all APA criteria for doctoral internships in professional psychology. FCC Butner is also a member Association of Psychology Postdoctoral and Internship Centers (APPIC).

Any questions or concerns regarding the accreditation status of the FCC Butner should be addressed to:

Office of Program Consultation and Accreditation  
American Psychological Association  
750 First Street, NE, Washington, DC 20002-4242  
**Phone:** (202) 336-5979  
**Email:** [apaaccred@apa.org](mailto:apaaccred@apa.org)  
**Web:** [www.apa.org/ed/accreditation](http://www.apa.org/ed/accreditation)

Any questions or concerns regarding the adherence of this program to the policies of the APPIC match process may be referred to:

Chair, APPIC Standards and Review Committee  
17225 El Camino Real  
Onyx One-Suite #170  
Houston, TX 77058-2748  
**Phone:** (832) 284-4080  
**Email:** [appic@appic.org](mailto:appic@appic.org)

### Frequently Asked Questions

**Q: Won't my training be too limited if I just work with incarcerated individual(s)?**

A: Virtually any mental health issue that exists among the general population of adults in our culture also exists among incarcerated individuals. There are many parallels that can be drawn between the presenting problems and client characteristics of prisons and community mental health centers. For example, there are those who use mental health services appropriately and those that may be motivated by a secondary gain, clients in crisis and those with less acute but more long-term concerns, and some with greater psychological resources than others. The benchmark study by Boothby and Clements



(2000) notes that psychologists working in correctional settings frequently treat pathology (e.g., depression, anger, psychosis, anxiety) that is nearly identical to non-correctional settings. Although some incarcerated individuals fit the popular stereotype of the hard-core criminal or repeat offender, others genuinely want to change the maladaptive behavior and thought patterns that led them to prison. Others experience serious mental illness, including schizophrenia and bipolar disorder.

**Q: How "marketable" will my internship be?**

A: Following APA guidelines for the doctoral internship experience, we seek interns who are interested in being trained as generalists. Upon completion of training, many interns accept offers of employment with the BOP. However, others assume positions in community mental health centers, private practices, hospitals, and other settings (Magaletta, Patry, & Norcross, 2012). Interns who work in correctional settings are regularly provided opportunities to strengthen their skills in the areas of crisis intervention, individual and group psychotherapy, substance treatment, psychological evaluation, diagnosis, treatment planning, and intake screenings (Magaletta & Boothby, 2003). On the basis of this exposure, former BOP Psychology Interns now hold positions not only in BOP facilities, but also VA Medical Centers, rehabilitation centers, psychiatric hospitals, community mental health centers, regional correctional facilities, academic positions, and private practices.

**Q: Is it safe to work in a prison?**

A: The safety of both staff and incarcerated individuals is the highest priority of the BOP. The BOP has implemented security procedures and installed an array of equipment to make the facilities safe for staff and incarcerated individuals alike. BOP staff are trained to address any situation with the intent to verbally de-escalate, and we have policies guiding this approach. Although it would be impossible to unconditionally guarantee anyone's safety in a correctional (or any other work) setting, the single most important skill of any mental health professional working in a correctional setting is his/her ability to listen and communicate effectively with both staff and incarcerated individuals (Magaletta & Boothby, 2003).

**Q: Do I need a certain number of clinical hours in a correctional facility to be eligible for an internship with the BOP?**

A: No. There is no specified number of direct client contact hours needed to apply. Historically, interns have had a wide range of experiences in both non-correctional and correctional settings. There are numerous settings that provide training that is relevant to a correctional setting, including but not limited to: inpatient hospitals, locked settings, exposure to serious mental illness, substance use treatment facilities, etc.

**Q: What do I need to do to complete internship?**

A: There are three aspects of training that all interns must attain to successfully complete an internship. First, interns are evaluated in each of the nine profession-wide competencies (Research, Ethical/Legal Standards, etc.) via a formal evaluation at the end of every quarter. Interns must achieve a minimum level of achievement score for all nine competencies on the final fourth quarter evaluation. Second, at the beginning of each rotation, the intern and the supervisor agree on a set of training activities that coincide with the nine profession-wide competencies that must be achieved in order to complete that specific rotation. Finally, interns are required to complete 2,000 hours of clinical training and will submit one formal psychological assessment during the internship which is an adequate reflection of their clinical abilities.

## **FCC Butner Psychologists**

**Gillespie Wadsworth, Psy.D. (she/her/hers) - Internship Program Coordinator/ Step Down Program Psychologist, FCI-I**

Psy.D. (2010) Nova Southeastern University; Internship (2009/2010) FCC Butner.

Dr. Wadsworth (she/her) currently works as the Internship Program Coordinator. She began her BOP career as a Practicum student at FDC, Miami conducting forensic evaluations. She went on to complete internship at FCC Butner. She then worked as a forensic evaluator in a private practice. Dr. Wadsworth joined the BOP as a Staff Psychologist in 2012. From 2015 to 2020, she served as a Forensic Psychologist, completing court-ordered forensic evaluations of competency, sanity, and dangerousness. With strengths in evaluation and treatment, Dr. Wadsworth was an Advanced Care Level Psychologist in the Forensic Treatment Services at the FMC and in the Step-Down Program at the FCI-1. Dr. Wadsworth is licensed in North Carolina.

**Patrick Cook, Ph.D. (he/him/his) - Commitment and Treatment Program Clinical Coordinator, FCI-I**

M.S. (2008) and Ph.D. (2010) Auburn University; Internship (2009/2010) FMC Devens (MA). Dr. Cook currently serves as the Commitment and Treatment Program (CTP) Clinical Coordinator. He began his career with the BOP as a psychology pre-doctoral intern at FMC Devens. He completed his degree at Auburn University in 2010. Prior to his current position, he served as a Sex Offender Treatment Program psychologist and later as the Sex Offender Treatment Program Coordinator at USP Marion. Next, he served as an Advanced Care Level Psychologist at USP Leavenworth prior to transferring to FCI-1 Butner. He is a licensed provider with clinical and research interests including sex offender treatment and data-informed clinical interventions.

**Tanya L. Cunic, Psy.D., (she/her/hers) - Complex Chief of Psychology, FCC**

M.S. (1995) Southwestern Oklahoma State University, and Psy.D. (2001) Central Michigan University; Internship (2000/2001) MCFP Springfield (MO); Post-Doctoral Fellowship (2001/2003) MCFP Springfield.

Dr. Cunic has served as the Complex Chief Psychologist since 2019. She started her BOP career as Pre-Doctoral Intern and then completed a Post-Doctoral Fellowship at USMCFP, Springfield. She then worked as a Forensic Unit Psychologist in the Commitment and Treatment Program where she helped develop programming and evaluation under the Adam Walsh Act. She spent a year as a Forensic Psychologist at FMC Butner before becoming the Chief Psychologist at USP, Lee.

**Lauren A. Delk, Ph.D. (she/her/hers) - Staff Psychologist, FCI-II**

M.A. (2014) Western Carolina University, and Ph.D. (2020) Virginia Polytechnic Institute and State University; Internship (2019/2020) FCC Butner.

Dr. Delk earned her doctorate from Virginia Tech (go hokies!). After internship at FCC Butner, she was fortunate to be hired as a staff psychologist and remain at the complex. She began her work at the FCI-I and is currently at the FCI-II, where she conducts individual and group therapies, screens new inmates, trains suicide watch inmate companions, and provides

psychology services for the SHU and holdover units. Her past research and current clinical interests focus on recidivism reduction, especially with the implementation of the first step act.

**Evan S. Du Bois, Psy.D. (he/him/his) - Forensic Psychologist, FMC**

M.S. (2008) and Psy.D. (2011) Nova Southeastern University; Internship (2010/2011) FCI Fort Worth (TX).

Dr. Du Bois first completed a practicum in forensic evaluations at FDC Miami in 2008. He later completed his internship at FCI Fort Worth, Texas, with a rotation in forensic evaluations at Fort Worth and an outplacement at FMC Carswell, also focused on forensic evaluations. Dr. Du Bois began working in the BOP full time at USP Pollock as a staff psychologist. He promoted to a Specialty Program Psychologist at FCC Oakdale in 2012 and activated the BOP's first Reintegration Unit. In 2014, Dr. Du Bois transferred as a Drug Abuse Program Coordinator to FCC Yazoo City, activating the USP at that complex. In March 2017, he assumed duties as a Forensic Psychologist at FMC Butner. Dr. Du Bois is licensed in North Carolina.

**Anastasia Gand, Psy.D. (she/her/hers) - Staff Psychologist, FCI-I**

M.A. (2018) and Psy.D. (2021), Spalding University; Internship (2020/2021) FCC Butner, North Carolina.

Dr. Gand completed her Pre-Doctoral Internship at FCC, Butner in 2021. Following internship, she worked in a private practice in Raleigh, NC before returning to the BOP as a Staff Psychologist in 2022. Her clinical interests include working with offenders of diverse backgrounds, treating substance use disorders, personality disorders and specifically addressing emotion regulation, anger management, and trauma. In addition, Dr. Gand maintains a small caseload of community clients through her work in a local practice, as well as completing court involved evaluations.

**Brian C. Gray, Ph.D. (he/him/his) - Advanced Care Psychologist, FCI-I**

M.A. (2000) and Ph.D. (2006) Florida State University; Internship (2002/2003) University of Wisconsin Counseling Center.

Dr. Gray joined the BOP upon completion of Internship in 2003 and worked as a Staff Psychologist at LSCI and FCI-I Butner. He was promoted to Advanced Care Level Psychologist

and currently provides outpatient treatment to individuals with serious mental illnesses in general population.

**Brianna Grover, Psy.D. (she/her/hers) - Forensic Psychologist, FMC**

Psy.D. (2012), M.B.A. (2013) and Psy.D. (2015) Wright State University, School of Professional Psychology; Internship (2014/2015) FCC Butner.

Dr. Grover Completed her doctorate degree in clinical psychology from Wright State University in Dayton, Ohio in 2015. She also earned her M.B.A. from Wright State University during her doctoral studies. She first began in the Bureau of Prisons as a Case Management Intern at Federal Correctional Institution (FCI-1) at the Federal Correctional Complex (FCC) in Butner, North Carolina in 2010. Following graduation from her doctoral program, she continued her training at FCC Butner, completing a full-time rotation conducting forensic evaluations. Shortly after, in January 2016, she was hired on as a staff psychologist at the LSCI at FCC Butner. Dr. Grover was selected as a Forensic Psychologist at the Federal Medical Center in Butner, North Carolina in 2019. She currently conducts court-ordered forensic evaluations, competency restoration treatment, and supervises doctoral level psychology interns. In addition to her forensic duties, Dr. Grover serves on the Internship Training Committee, Correction Support Team, and is a Diversity Management Instructor at FCC Butner. Dr. Grover is licensed in North Carolina.

**Jennifer L. Halbsgut, Psy.D. (she/her/hers) - Drug Abuse Treatment Program Coordinator, FCI-I**

Psy.D. (2010) The Chicago School of Professional Psychology; Internship (2009/2010) FCI Tallahassee (FL).

Dr. Halbsgut is currently employed as Drug Abuse Program Coordinator. She started her BOP career as a Staff Psychologist in 2010 at FCI Pekin and then transferred to FCI-II Butner in 2013 where she worked as Staff Psychologist. She was promoted to Forensic Psychologist in 2015. Dr. Halbsgut's clinical interests include providing structured, residential and/or non-residential drug treatment to inmates, particularly interested in incorporating trauma treatment and reentry initiatives to treatment protocols as well as criminal thinking

**Jill Haughawout, Psy.D. (she/her/hers) – Drug Abuse Program Coordinator, FCI-II**

M.A. (2004) and Psy.D (2007) Illinois School of Professional Psychology, Argosy University, Schaumburg Campus; Internship (2006) Colorado Department of Corrections; Post-Doctoral Fellowship (2007) Illinois Department of Human Services, Treatment and Detention Facility. Dr. Haughawout completed a Post-Doctoral Fellowship training at the Illinois Department of Human Services, Treatment and Detention Facility, providing clinical treatment to civilly committed sex offenders. In 2009, she started her BOP career as a staff psychologist at FCI-II Butner and promoted to the Drug Abuse Treatment Program Coordinator in 2017. She is currently the coordinator of the blended (small portion of dual diagnosis) Residential Drug Abuse Program at the FCI-II. Dr. Haughawout serves on the Internship Training Committee.

**Laura Herman, Psy.D. (she/her/hers) - Sex Offender Treatment Psychologist, FCI-I**

M.A. (2013) and Psy. D. (2016) Spalding University; Internship (2015/2016) FCC Butner. Dr. Herman completed her Doctoral Internship at FCC Butner with rotations in drug treatment, forensics, and correctional psychology from 2015-2016. She was then hired in 2016 as staff psychologist at FCC Butner where she worked at all five institutions on the complex. In 2020 Dr. Herman moved into the role of Clinical Psychologist in the CTP for sexually dangerous persons at FCI-I Butner where she has remained until present. She currently supervises the interns who match to the CTP track and is passionate about supporting emerging psychologists as they learn and expand their skills in the assessment and treatment of individuals at high risk for sexual recidivism. She also enjoys her collateral duties including being a member of the Crisis Negotiation Team, Internship Training Committee, and acting as a certified site evaluator for the accreditation of doctoral internship programs through APA.

**Kara R. Holden, Psy.D. (she/her/hers) - Drug Abuse Program Coordinator-MAT, FCI-II**

M.S. (2005) Virginia State University; Psy.D. (2011) Argosy University; Internship (2009/2010) FCC Butner.

Dr. Holden entered the BOP as a licensed psychologist in 2013 at FCI-Williamsburg. Currently, she serves as the Medication Assisted Treatment Psychologist at FCC-Butner and provides substance abuse treatment to inmates who are on medication for Opioid Use Disorder. Dr. Holden also has extensive experience working in residential sex offender treatment

programs. She has experience in the community conducting Involuntary Commitment Evaluations in hospitals and crisis centers.

**Ryan N. Koch, Psy. D. (she/her/hers) - Drug Abuse Program Coordinator, FCI-I**

M.S. (2008) and Psy. D. (2011) Nova Southeastern University; Internship (2010/2011) Florida Department of Corrections, Zephyrhills.

After completing her doctorate at Nova Southeastern University and internship in the Florida Department of Corrections, Dr. Koch started with the BOP in 2012. She worked through multiple institutions in the BOP, including Staff Psychologist and Drug Abuse Program Coordinator at FCC Pollock and Residential Drug Abuse Program Coordinator at FCC Yazoo City before transferring to FCC Butner in 2017. At Butner, she has held positions as Forensic Psychologist, Advanced Care Level Psychologist, and is currently the Drug Abuse Program Coordinator for the Residential Drug Abuse Program at FCI-I.

**Kristina P. Lloyd, Psy.D., ABPP (she/her/hers) - Forensic Psychologist, FMC**

M.S. (2002) Springfield College; Psy.D. (2010) Loyola University Maryland; Internship (2009/2010) FCC Butner; Forensic Fellowship (2010/2011) University of Massachusetts Medical School. Diplomate in Forensic Psychology, American Board of Professional Psychology.

Dr. Lloyd earned her doctorate degree in clinical psychology from Loyola University in Maryland in 2010. She completed her internship with the Federal Bureau of Prisons at the Federal Correctional Center (FCC) in Butner, North Carolina. Following graduation, she completed a Post-Doctoral Fellowship at the University of Massachusetts Medical School. She returned to the Bureau of Prisons in 2011, at the Federal Correctional Institution in Schuylkill, Pennsylvania where she worked as a Staff Psychologist and was then promoted to Chief Psychologist. Dr. Lloyd was selected as a Forensic Psychologist at the Federal Medical Center in Butner, North Carolina in 2014. Dr. Lloyd is licensed in North Carolina. She received her ABPP board certification in forensic psychology in 2016. Her clinical interests include forensic evaluation, violence risk assessment, severe mental illness, supervision, and training.



**Melanie Mivshek, Psy.D. (she/her/hers) – Advanced Care Level Psychologist, FMC**

M.S. (2015) and Psy.D. (2018) Indiana State University; Internship (2017/2018) FCC Butner. Dr. Mivshek earned her Psy.D. in Clinical Psychology from Indiana State University after completing her predoctoral internship at FCC Butner in 2017-2018. She completed practicums and/or volunteer work at FCC Terre Haute and Indiana State Department of Corrections. She was hired as a Staff Psychologist at FCC Butner following internship and was promoted to Advanced Care Level Psychologist at FCC Butner in 2022 and currently works out of the FMC. She is licensed in the state of Alabama and provides supervision for the Correctional Psychology and Serious Mental Illness tracks and facilitates group policy supervision. Her interests are treatment with incarcerated individuals with severe and persistent mental illness, personality disorders, general correctional psychology, and in policy implementation and development and clinical supervision and training. She is a member of the Internship Training Committee.

**Robert Melin, Psy.D. (he/him/his) – Step Down Program Coordinator, FCI-I**

M.S. (1999) and Psy.D. (2001) Chicago School of Professional Psychology; Internship (2000/2001) and Post-doctoral Fellowship (2001/2002) Florida Department of Corrections. Dr. Melin earned his Psy.D. in Clinical Psychology from Chicago School of Professional Psychology after completing his predoctoral internship at Florida Department of Corrections. He started his BOP career as a Staff Psychologist at FCC Butner and was promoted to CTP Psychologist and then Step Down Program Coordinator in 2008. He is licensed in the state of North Carolina and the Serious Mental Illness track. His interests include treatment with incarcerated individuals with severe and persistent mental illness.

**Tracy O'Connor Pennuto, Ph.D., J.D. (she/her/hers) - Staff Neuropsychologist, FMC**

J.D. (2003) and Ph.D. (2007) Pacific Graduate School of Psychology/Palo Alto University; Internship (2006) Eastern Virginia Medical School; Neuropsychology Fellowship (2010) Duke University Medical School.

Dr. Pennuto earned a Ph.D. in Clinical Psychology with emphases in both Neuropsychology and Forensic Psychology at Palo Alto University in 2007. Her practicum experiences included neuropsychology placements at the Palo Alto VA. She then completed the Neuropsychology Track during her predoctoral internship at Eastern Virginia Medical School, with rotations in

Physical Medicine and Rehabilitation (PM&R), and Forensic Inpatient Neuropsychology with civilly committed patients. As part of the joint program, Dr. Pennuto completed her law degree at Golden Gate University School of Law in 2003, where she completed a clinic with the Northern California Innocence Project, won awards for legal writing, and wrote and edited for the Law Review. After her doctoral studies, she completed a 2-year postdoctoral fellowship in Adult Clinical Neuropsychology at Duke University Medical Center in 2010. Dr. Pennuto was hired into the Bureau of Prisons as a Neuropsychologist in 2010 at the Federal Medical Center (FMC) Butner, where she has remained as the sole Neuropsychologist in the BOP. Her primary responsibility includes completing neuropsychological assessment consultations, primarily for forensic competency evaluation cases. She also carries a treatment caseload of patients diagnosed with neurocognitive and neurodevelopmental disorders and has experience completing forensic competency evaluations. In addition, she teaches several neuropsychology related seminars, runs a weekly Assessment Seminar, and supervises the Group Testing Clinic. Dr. Pennuto is licensed in the state of North Carolina.

**Kim O'Neal, Psy.D. (she/her/hers) - Deputy Chief of Psychology, FCI-II and LSCI**

Psy.D. (2010) California School of Professional Psychology at Alliant International University (Los Angeles); Internship (2009/2010) Whittier College Counseling Center.

Dr. O'Neal has been interested in working as a psychologist in a correctional setting since she was an undergraduate student. While in graduate school, she completed a practicum training at the California Institution for Men. Prior to joining the BOP, she worked as a Clinical Supervisor at Rikers Island Correctional Facility from 2012 to 2015. She started her BOP career as a Staff Psychologist at FCC Tucson in 2015. She was promoted to Advanced Care Level Psychologist at FCC Tucson in 2018. In 2020, she transferred to FCC Butner as Deputy Chief Psychologist. She is currently licensed in New York state.

**Justin Rigsbee, Psy.D., Ph.D. (he/him/his) - CTP Forensic Psychologist, FCI-I**

M.S (2002), Psy.D. and Ph.D. (2006) Nova Southeastern University; Internship (2005/2006) FCC Butner; Postdoctoral Residency (2006/2007) Nova Southeastern University Criminal Justice Institute.

Dr. Rigsbee started in the BOP as a Staff Psychologist at FCC Beaumont after completing his Pre-Doctoral Internship at FCC Butner. He was promoted to Drug Abuse Program Coordinator at FCI-I Butner. He is currently employed as a Forensic Psychologist where he completes court-ordered forensic evaluations for all U.S. District Courts via the outpatient forensic evaluation program at the FCI-I. Additionally, he completes pre-certification forensic evaluations (not court-ordered) for possible sexually dangerous persons (SDPs) and annual review evaluations for civilly committed SDPs. Dr. Rigsbee also serves as the mental health expert for the complex Crisis Negotiation Team (CNT).

**Almamarina Robles, Psy.D. (she/her/hers) - Specialty Program Coordinator, FMC**

M.S. (2007) and Psy.D. (2010) Florida Institute of Technology; Internship (2009/2010) FCI Tallahassee.

Dr. Robles was a Pre-Doctoral Intern at FCI/FDI Tallahassee and then moved to FCI-Danbury where she worked as a Staff Psychologist. Dr. Robles transferred to FMC Butner to work as the Specialty Program Coordinator for individuals civilly committed to the inpatient hospital for mental health treatment. Her clinical interests include Recovery oriented cognitive therapy for serious mental illness. In particular the application of this model to a modified therapeutic community within forensic settings.

**Heather Ross, Ph.D. (she/her/hers) - Forensic Postdoctoral Training Director/CTP Forensic Psychologist, FCI-I**

M.A. (1997) Hollins College; Ph.D. (2005) Sam Houston State University; Internship (2004) Wyoming State Hospital.

Dr. Ross earned her Ph.D. in clinical psychology, with a forensic emphasis, from Sam Houston State University in 2005. She completed her internship at Wyoming State Hospital, focusing on serious mental illness and forensic assessment. After internship, Dr. Ross worked at the Coastal Evaluation Center of the South Carolina Department of Juvenile Justice, completing post-adjudication evaluations of individuals involved in the juvenile justice system, including specialized evaluations such as psychosexual evaluations. She later worked as a Psychology Supervisor there, providing supervision to psychologists conducting these evaluations. In 2008, Dr. Ross moved to North Carolina and began work at Central Regional Hospital, where she

performed outpatient pre-trial forensic evaluations and provided supervision of interns for an APA-approved internship. In 2009, she joined the BOP, working as a forensic psychologist in the CTP at FCI Butner. She conducts pre-trial and pre-sentencing evaluations for the federal courts, focused on competency to stand trial, criminal responsibility, risk of re-offense, and need for hospitalization, as well as other questions asked by the Courts. Additionally, she conducts evaluations of individuals being considered for commitment as Sexually Dangerous Persons, as well as annual reviews of individuals committed to the CTP. She also provides supervision as part of FCC Butner's APA-approved internship program.

**Allyson Sharf, Ph.D. (she/her/hers) - Forensic Psychologist, FMC Butner**

Ph.D. (2019) University of North Texas; Internship (2018/2019) University of North Carolina School of Medicine; Forensic Fellowship (2019/2020) University of Massachusetts Medical School.

Dr. Sharf completed her doctorate degree in clinical psychology from University of North Texas 2019. She completed her internship with the University of North Carolina School of Medicine. Following graduation, she completed a Post-Doctoral Fellowship at the University of Massachusetts Medical School. Dr. Sharf worked in the Greater Boston Court Clinic as a forensic psychologist. She returned to the Bureau of Prisons at FMC Butner as Forensic Psychologist in 2021. Her clinical interests include forensic evaluation, violence risk assessment, severe mental illness, supervision, and training.

**Laura E. Sheras, Psy.D. (she/her/hers) - Advance Care Level Psychologist, FMC**

M.A. (2008) and Psy.D. (2011) Spalding University; Internship (2010/2011) St. Louis Internship Consortium.

Dr. Sheras started in the BOP as a Clinical Psychologist in the CTP for sexually dangerous persons at FCI-I Butner. She transferred to the role of Advanced Care Level Psychologist in 2019. Dr. Sheras is the Assistant Team Leader for Correctional Support Team and member of the Internship Training Committee.

**Trisha Rae Smithson, Psy.D. (she/her/hers) - Sex Offender Treatment Psychologist, FCI-I**  
M.A. (2003) and Psy.D. (2009) Argosy University-San Francisco Bay Area; Internship  
(2005/2006) Psychological Services Center – Oakland.

Dr. Smithson started her BOP career as a staff psychologist in Honolulu and then came to Butner to become a Sex Offender Treatment Psychologist. She has held this position for more than ten years. She is invested in understanding the best way to facilitate change in the civilly committed offenders. In the past, Dr. Smithson has studied animal assisted therapy in the forensic setting and wrote a manual to set up such a program in the halfway house setting. She has also facilitated music therapy with juveniles in the forensic setting, as well as with conditionally released NGRI and MDO patients.

**Adeirdre L. Stribling Riley, Ph.D. (she/her/hers) - Deputy Chief Psychologist of Forensic Evaluations, FMC**

M.A. (1998) University of Hartford; Ph.D. (2003) University of Tennessee; Internship  
(2002/2003) University of North Carolina/FCI Butner; Postdoctoral Fellowship (2004/2006)  
FCC Butner.

Dr. Stribling Riley earned her Ph.D. from the University of Tennessee, Knoxville in 2003. She completed Doctoral Internship in the joint clinical forensic program of the University of North Carolina School of Medicine and the Federal Medical Center (FMC) in Butner, North Carolina. After internship, Dr. Stribling Riley completed postdoctoral training at the University of North Carolina Program on Childhood Trauma and Maltreatment. She then returned to FMC Butner in 2004 and completed a two year postdoctoral fellowship in forensic psychology and behavioral medicine. Dr. Stribling Riley then performed duties of a Staff Psychologist on the complex. In 2007, she returned to the FMC as a Forensic Psychologist, with a primary focus on treatment of severe mental illness as well as assessment of competency to stand trial, criminal responsibility, and dangerousness. Since 2020, Dr. Stribling Riley has supervised the Neuropsychologist and the Forensic Psychologists in her current role as Deputy Chief Psychologist of Forensic Evaluation Services at FMC Butner. Dr. Stribling Riley is a member of the North Carolina Psychological Association Board of Directors, serving as Vice President with oversight of Regional Representatives. She serves on the Association of State and Provincial Psychology Boards (ASPPB) Item Development Committee for the EPPP Part 2. Since 2017, she has served

as an APA doctoral internship Site Visitor and Site Visit Chair with the Commission on Accreditation (CoA). In 2020, she was elected to serve as APA's Board for the Advancement of Psychology in the Public Interest (BAPPI) as a representative to the Commission for the Recognition of Specialties and Subspecialties in Professional Psychology (CRSSPP). In her current capacity as the 2022 Chair of CRSSPP, Dr. Stribling Riley has led review of specialties for new recognition and continuation. In addition, she has led stakeholder engagement with the APA Council of Specialties (CoS), Commission on Accreditation (CoA), and the American Board of Professional Psychology (ABPP) in initiatives to establish taxonomies of education and training for the field. Dr. Stribling Riley is licensed in North Carolina.

**Katherine Sunder, Psy.D. (she/her/hers) - CTP Forensic Psychologist, FCI-I**

Psy.D. (2015) Wright State University; Internship (2015/2016) Arkansas State Hospital; Postdoctoral Fellowship (2016/2020) University of Arkansas for Medical Sciences.

Dr. Sunder received her doctorate degree in clinical psychology in 2015 from Wright State University, School of Professional Psychology. She completed her predoctoral internship at the Arkansas State Hospital. In 2016, she then completed a postdoctoral fellowship in forensic psychology from the University of Arkansas for Medical Sciences. From 2016 to 2020, Dr. Sunder worked at Central Regional Hospital in North Carolina, a state operated psychiatric facility, where she was an inpatient forensic psychologist. In that capacity, she was part of a forensic unit treatment team, completed violence risk assessments for the NGRI population, and conducted pretrial competency to stand trial evaluations. She also consulted with the adult and juvenile competency restoration programs. During her tenure at the hospital, she served as the practicum coordinator for doctoral students from local universities. In 2020, Dr. Sunder joined the BOP as a CTP Forensic Psychologist at FCI Butner, conducting competency, criminal responsibility, and sexual dangerousness evaluations. She is currently an adjunct assistant professor at the University of North Carolina at Chapel Hill, often speaking to graduate students about forensic topics. Dr. Sunder is licensed in North Carolina.

**Janelle M. Williams, Psy.D. (she/her/hers) - Deputy Chief of Psychology, FCI-I**

B.A. (2000) University of Richmond; M.A. (2003) and Psy.D. (2007) Nova Southeastern University; Internship (2006/2007) FCC Butner.

Dr. Williams started in the BOP as a Practicum Student at FCI Miami before completing her Pre-Doctoral Internship at FCC Butner. She was hired as a Staff Psychologist in 2007 and promoted to Deputy Chief of Psychology in 2016. In her role, Dr. Williams oversees Psychology Services at FCI-I.

**N. Chanell Williams, Ph.D., ABPP (she/her/hers) - Behavioral Medicine Psychologist, FMC**  
B.A. (1990) Spelman College; M.A. (1992) and Ph.D. (1996) California School of Professional Psychology (Los Angeles); Internship (1994/1995) Tripler Army Medical Center; Postdoctoral Fellowship (1999/2000) Tripler Army Medical Center. Diplomate in Clinical Psychology, American Board of Professional Psychology.

Dr. Williams works as the Behavioral Medicine Psychologist at FMC Butner.

**Joseph Zonno, Ph.D. (he/him/his) - CTP Administrator, FCI-I**

B.S. (1996) Penn State University; M.A. (2000) and Ph.D. (2003) University of Tulsa; Internship (2001/2002) FCC Butner.

Dr. Zonno began his permanent career in the Bureau of Prisons in 2004 as a Staff Psychologist at the United States Penitentiary (USP) in Florence, Colorado. In 2007, he was promoted to the position of Challenge Coordinator at USP Florence, where he oversaw a high security treatment program for inmates struggling with mental illness and substance abuse problems. In 2012, Dr. Zonno transferred into the position of Drug Abuse Program Coordinator at FCC Florence. He served in that capacity until 2015, when he accepted a Forensic Psychologist position at the Federal Medical Center (FMC) in Butner, North Carolina. From 2017 to 2020, Dr. Zonno served as the Deputy Chief Psychologist at FMC and FCI I Butner, providing clinical and administrative oversight to all mental health operations at those institutions. He served as a Deputy Chief until selected as the CTP Administrator at FCI I Butner in 2020, where he maintains responsibility for all evaluation and treatment services for the CTP and Outpatient Forensic Evaluation programs. Dr. Zonno is licensed in the state of Colorado. In addition to his primary responsibilities with the Commitment and Treatment Program for Sexually Dangerous Persons and the Outpatient Forensic Evaluation Program at FCI I Butner, he serves as the FCC Butner Mentor Program Coordinator. In addition to correctional and forensic psychology, Dr. Zonno's passions include

leadership development and improving resiliency of correctional workers and other first responders.

### **Adjunct Staff**

#### **Brandon Garrick (he/him/his) Specialty Treatment Program Specialist, FMC Butner**

M.S.W. (NC State-2020), D.S.W. (University of Kentucky -Proj.2024)

Mr. Garrick completed a Social Work Internship at FCI-1-Butner Step Down program in 2020.

He was hired as a Specialty Treatment Program Specialist at USP Thomson in 2020 and transferred to FCC Butner in 2021. He currently works on the Forensic Treatment Services team carrying a caseload of serious mentally ill detainees and facilitates treatment groups.

#### **Logan Grady, M.D. (he/him/his) - Chief Psychiatrist, FCC Butner**

M.D. (2003) University of South Florida School of Medicine; Residency (2003-2007) Duke University Medical Center. Board Certification in General Adult Psychiatry (2011); Board Certification in Addiction Medicine (2012).

Dr. Graddy is a forensic-trained psychiatrist double boarded in general psychiatry and addiction medicine. He is interested in both assessment and treatment. He has been with the BOP for seven years. In addition to being psychiatry chief of the complex he has collateral duties at the national level in transgender care and forensic psychiatry. He enjoys a healthy work-life balance with longstanding interests and hobbies with his family, spirituality, and health.

#### **Jasmine Jiggetts (she/her/hers) Specialty Treatment Program Specialist, FCI-I Butner**

Ms. Jiggetts started her career in corrections in 2015. She holds a Bachelor of Arts in Political Science and a minor in Sociology from Norfolk State University. In 2017 she received her Master's degree in Forensic Psychology from Walden University. She joined the BOP in 2022 as the Step Down Program Treatment Specialist. She enjoys providing treatment to the SMI population and finds overcoming the challenges that may present exceedingly rewarding.

#### **Christina Kelley, J.D. (she/her/hers) - Staff Attorney-Advisor, FCC Butner**

M.P.A. (1999) North Carolina State University; J.D. (2005) North Carolina Central University School of Law.



Since 2007, Christy has worked as an attorney with the Butner Legal Center at Federal Correctional Complex in Butner, North Carolina. In addition to working as an in-house counsel for staff at FCC Butner and FCC Petersburg, she is designated as a Special Assistant United States Attorney in the Eastern District of North Carolina. In this capacity, she handles a variety of civil litigation representing the government and FCC Butner staff and assists in representing the government in civil commitment hearings brought pursuant to the federal civil commitment statutes.

**Jaquain Leycock (he/him/his) - Specialty Treatment Program Specialist, FMC Butner**

Mr. Leycock started his career as a correctional officer in 2020, transitioned into his current role as a Specialty Treatment Specialist in 2022 and currently works out of the FMC. He has earned his master's in social work from Widener University after completing his internship at FCC Butner in 2021. He is a Licensed Clinical Social Worker Associate and a Licensed Clinical Addiction Specialist Associate in the state of North Carolina. His interests are treatment with incarcerated and outpatient individuals with substance use disorders, mental illness, financial social work and training.

**Genna Petre, J.D. (she/her/hers) Senior Attorney/Special Assistant United States Attorney, FCC Butner**

J.D. (2015) Elon University School of Law.

M.s Petre is the Senior Attorney at FCC Butner. She specializes in Mental Health/Adam Walsh Act litigation

**Holly Pratesi, J.D. (she/her/hers) - Staff Attorney-Advisor, FCC Butner**

J.D. (2016) Brooklyn Law School.

**Mallory Storus, J.D. (she/her/hers) Staff Attorney-Advisor, FCC Butner**

J.D. (2013) American University Washington College of Law.

Ms. Storus oversees the criminal prosecutions of inmates that arise complex-wide, in addition to our normal civil litigation.

## Surrounding Area and Local Points of Interest

While some staff choose to live in the town of Butner (population 5000), most, including interns, choose to live in one of the cities comprising The Research Triangle. This area, defined by Durham (and Duke University), Chapel Hill (the University of North Carolina), and Raleigh (North Carolina State University), offers a unique combination of southern hospitality, academic stimulation, and cosmopolitan cultural opportunities. In addition to teaching institutions, the intellectual climate is influenced by the presence of the Research Triangle Park, which includes a number of high-tech companies specializing in biotechnology, pharmaceuticals, software development, computers, and robotics, as well as the National Humanities Center and the National Institute for Environmental Health Sciences. It is hardly surprising, then, that the Triangle lays claim to the highest per capita proportion of PhDs and MDs in the country. People come from all over the world to study or work in the Triangle, and the community exhibits remarkable cultural, social, and political diversity. Aside from visiting students and professionals, approximately half of residents are not originally from North Carolina.



The Triangle isn't all business, and as a counterpoint the surrounding areas of the state remain largely rural and scenic, and outdoor activities abound. The climate is temperate but mild, with more than 230 sunshine days each year and an average of seven inches of snow to accentuate the brief winters. Spring and fall temperatures average a perfect 72 degrees, and winter daytime temperatures usually hover around 50. A leisurely afternoon drive to the East leads to the pristine wilderness beaches of the Outer Banks, while the more developed resort beaches near Wilmington and Morehead City/Beaufort are about two hours away. Winter skiing or summer hiking and climbing in the Great Smokies are an easy drive to the west. Water skiing, fishing, canoeing, and kayaking are popular diversions, and there are several recreational lakes close to the facility. Golf, tennis, running, and cycling are also popular activities. Regional metropolitan centers like Charlotte, Washington, and Atlanta are an afternoon's drive away.

The Complex is in the Carolina Piedmont, which separates the mountains from the coastal plain. Fortune magazine has repeatedly recognized the triangle as one of the best areas

for business in the U.S., and Money magazine surveys consistently rank the Raleigh/Durham/Chapel Hill area among the “Best Places to Live in America.” All three



Triangle communities offer sophisticated entertainment, including the Broadway at Duke series, a lively jazz scene; the Bull Durham Blues Festival; the American Dance Festival; the Rewind Film Festival, and symphony and chamber orchestra groups.

“Tobacco Road” is home to the best in college basketball and soccer, including perennial contenders for NCAA men and women basketball championships from both Duke and UNC, and the women’s college soccer dynasty at UNC. Raleigh is home to the Carolina Hurricanes, winners of the 2006 Stanley Cup. The Durham Bulls are the AAA affiliate of the Tampa Bay Rays. Local restaurants serve cuisine that spans the globe and routinely receive national awards and recognition.

## Career Opportunities at the Bureau of Prisons

The BOP has relied on the Psychology Doctoral Internship Program to recruit a large proportion of entry-level clinical and counseling psychologists needed to meet our staffing needs. Many of the psychologists currently employed by the BOP began their careers after completing their BOP Internship. While we do not promise jobs to those who are accepted into the internship program, we see benefits in hiring people who have already proven themselves to be competent practitioners in correctional environments. Therefore, we often look to our intern classes when making employment offers. Please refer to the table in the Appendix for initial post-internship placements of our previous three intern classes.

Newly selected staff generally start at the GS-11 level, and upon successful completion of their first year, psychologists are automatically upgraded to the GS-12 level (current salary ranges can be found on the [Office of Personnel Management \(OPM\) website](#)). Salaries are somewhat higher in geographical areas with higher costs of living. Further upgrades to the GS-13 and GS-14 levels are possible with increases in clinical and administrative responsibilities. Student loan repayment opportunities are available at most facilities.

Psychologists enjoy a great deal of professional autonomy in the BOP as the main providers of mental health services and there are numerous opportunities to advance your career.

The BOP values continuing education of psychologists. Many psychologists attend seminars, workshops, and/or national conventions. Funding for outside training may be available and varies from year to year based on the federal budget. Psychologists have the opportunity to choose the part of the country (given the availability of positions) and the type of facility (high, medium, low or minimum security) in which they wish to work. BOP psychologists may also engage in outside employment, such as private practice or teaching.

As permanent federal employees, all psychologists are covered by the Federal Employee Retirement System, a pension plan which includes several attractive options for tax-deferred savings similar to a 401(k) plan. BOP employees may retire after 20 years, provided they have reached the age of 50, and receive a full pension. The BOP is an equal opportunity employer.

## How to Apply

The application for all BOP psychology internships is a three-step process, and you can reference [this helpful one-page guide](#) of the process and the associated timeline on the BOP Internship web page.

An in-person interview is preferred due to the unique nature of a correctional setting. The BOP has received positive feedback from applicants regarding the in-person interview format, as it provides applicants with the opportunity to better assess their compatibility with the correctional environment, culture, and the multidisciplinary treatment approach. Applicants also expressed appreciation for being able to meet potential colleagues in person and the benefits of seeing the nuances of individual institutions. FCC Butner utilizes a structured interview process, standardized interview questions, and a consistent candidate evaluation rubric to ensure an equitable evaluation of all applicants.

## Eligibility Requirements

The Psychology Internship Program at FCC Butner is open to doctoral students enrolled in APA-accredited clinical and counseling psychology degree programs. Applicants must have completed three years of doctoral training and have successfully proposed their dissertation.

Intern selection is based largely on breadth and quality of clinical experience, demonstrated academic achievement and consistency of interests with the training goals of the program, personal integrity, and maturity. Selections and the offer of positions at each site are

made in strict accordance with the policies of APPIC's Internship Matching Program. FCC Butner agrees to abide by the APPIC policy that no person at these training facilities will solicit, accept, or use any ranking-related information from any intern applicant.

Applicants for the BOP's internship positions should be aware they are applying for a position in a federal law enforcement agency. Therefore, selection entails not only demonstration of exceptional qualifications as an advanced graduate student and psychologist in training, but also suitability for work in a position of public trust. BOP employees, including Psychology Interns, are held to a high standard of personal conduct and responsibility, and are expected to be law-abiding citizens who can serve as strong role models for the incarcerated population. Applicants must also be U.S. citizens who have lived in the U.S. for the past three out of five years. Additionally, please note that all individuals residing in the immediate household of the applicant must be residing in the U.S. legally.

Applicants should understand that the BOP is also bound by the specifications of the Pathways Program. The Pathways Program is designed to provide students with the opportunity to explore federal careers while still in school. While the Pathways Program is a specific process for verifying eligibility for the Doctoral Intern position, the application process is totally separate from the APPIC process and procedures. Accordingly, applicants must submit an application through the USAJobs website to verify eligibility for temporary federal employment (internship). You will receive additional information on the USAJobs application process after your APPIC Application for Psychology Internships (AAPI) online application has been reviewed.

### **Application Process and Deadlines**

Outlined below is the standard BOP internship application process and timeline that applies to all BOP sites. Some sites have additional requirements for their applications, so please be sure to read this section carefully for each BOP site you are interested in to ensure you meet the requirements of individual internship sites.

#### **1. November 1: AAPI**

- a. Submit your AAPI online application on the APPIC website for each BOP site that you're interested in. Applications are reviewed separately by each site, so it is important that you apply individually to each site of interest and check for any additional application requirements for each site.

- b. Be sure to include:
  - A copy of your vitae
  - Graduate transcripts
  - 3 letters of reference
  - **Additional Requirement:** In addition to the AAPI online application, our site requires a writing sample.
- c. All AAPI application materials must be submitted online by 11:59pm on November 1<sup>st</sup>.

## 2. Mid-November: USAJobs

- a. Upon AAPI review, the sites that would like to interview you will send you an email with an invitation and instructions for applying on USAJobs.
- b. Please read the USAJobs application carefully to ensure you understand all requirements for applying. We see qualified candidates removed from the process every year for not completing this step of the process accurately. To address this, we have created a USAJobs reference guide that details each step of the process, provides samples of required documents, and addresses common errors to help you complete this process successfully. This reference guide will be attached to the email you receive from the internship sites, and we strongly encourage you to use it as you complete and submit your USAJobs application.
- c. Submit all required documentation, including:
  1. Resume
    - In order to receive credit for experience contained in an uploaded resume, your employment history must be documented in month/year (MM/YYYY) format, reflecting starting date and ending date and include the number of hours worked per week. Failure to follow this format may result in disqualification.
    - We recommend using the resume builder within USAJobs to ensure all information is captured accurately.
  2. Transcript verifying current enrollment in a doctoral program
    - Your transcript must include the School Name, Student Name, Degree and Date Awarded. You can use either an unofficial or official copy from the Office of the Registrar.
    - **Please note:** If the transcript you are uploading does not **explicitly state that you are currently enrolled** in your doctoral program, you should upload an additional document that verifies current

enrollment. This may be a Current Enrollment Verification Certificate, statement of current enrollment or acceptance letter.

3. Evidence that you are registered for the Match
  - This could be in the form of one of the following:
    - A copy of your APPIC Match purchase receipt
    - A copy of the email receipt of the APPIC application e-submission
    - A letter from your Director of Clinical Training stating that you have completed the AAPI and are registered for the APPIC Match
- d. During the USAJobs application process, applicants must respond to a series of assessment questions about their experience. Your responses determine category placement (e.g., Best Qualified, Highly Qualified, Qualified).
- e. After closure of the USAJobs application, only applicants that are assessed as qualified, and included in the Best Qualified category, will be considered for an interview. Please note that all candidates (those being asked to interview and those no longer being considered) will receive a Notification of Results by December 15. Therefore, even if you have applied to numerous BOP internship sites using the AAPI online, category placement and assessment of eligibility through the USAJobs application process plays a vital role in the certification of an applicant to one or all sites.

### **3. December – January: Interviews**

- a. In early December, Internship Program Coordinators from each applicable internship site will contact eligible applicants to schedule an in-person interview. Once invited to interview, applicants are asked to fill out a National Crime Information Center (NCIC) form and a form agreeing to a credit check.
- b. Interviews consist of:
  1. The BOP's Core Values Assessment (CVA), which is used to determine if new BOP employees possess the core values and behaviors required for success at BOP
  2. Integrity interview, which addresses issues of personal conduct
  3. Panel interview, during which you will be asked to respond to a number of scenarios that could arise in a correctional facility
  4. Subject matter expert interview

- c. If applying to more than one BOP internship site, applicants only need to complete the CVA and security clearance procedures one time, as results can be shared with other BOP sites for convenience.

### Additional Information

Offers of internship positions resulting from the computer match are strictly contingent upon satisfactory completion of the background investigation process. For individuals selected through the matching process, a field investigation will follow to verify the information provided in interviews and required forms is accurate. During the background investigation, you will be required to disclose any medical or mental health diagnoses and treatment. Additionally, the BOP is a drug free workplace, which includes recreational or medicinal marijuana use. Failure to complete this process or a finding that an applicant is outside the guidelines for employment in a sensitive position would preclude participation in the internship program. Once hired, interns must comply with the BOP's Program Statement on Standards of Employee Conduct. This information is not intended to discourage applications, but to ensure applicants are aware of the additional federal requirements that will be imposed should they wish to pursue a BOP internship position.

### Contact Information

FCC Butner is excited about the internship program, and we appreciate your interest. For any questions regarding the application procedures, brochure, or any other information pertaining to the internship at FCC Butner, please contact:

Gillespie S. Wadsworth, Psy.D.  
FCC Butner  
Old NC Highway 75 • Butner, NC • 27509-1600  
Phone: (919) 575-4866 • Fax: (919) 575-4541 x3567  
Email: [gwadsworth@bop.gov](mailto:gwadsworth@bop.gov)



## Appendix

### Internship Admissions, Support, and Initial Placement Data

Program tables updated: 04/09/23

#### Program Disclosures

Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution's affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, provide website link (or content from brochure) where this specific information is presented: <b>N/A</b>	

### Internship Program Admissions

<p><b>Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on intern selection and practicum and academic preparation requirements:</b></p>
<p>Applications are accepted from students enrolled in APA accredited doctoral programs in clinical and counseling psychology. To be internship eligible, students must have successfully completed at least three years of graduate school, and all doctoral course work, other than the dissertation, by the beginning of the internship. Applicants must have completed a minimum of 1,000 hours of total supervised practical experience (This can include intervention, assessment, supervision, and administrative duties) prior to the ranking deadline. Prior work experience in a correctional setting is not required, but training and experiences indicative of appropriate interest are important considerations in selections. The BOP is an Equal Opportunity Employer. In addition to demonstrating excellence in scholarship, strong applicants typically have a breadth of experiences in different settings and activities with adults and/or juveniles, along with at least some forensic and/or correctional training (practicum placement, courses, research). Testing, assessment, and diagnosis are important activities during the forensic rotation at FCC Butner. Intervention skills, especially group treatments, are particularly relevant in the other rotations. Therefore, one with training and skills in both intervention and assessment will fit well into our program. FCC Butner is a male correctional facility that maintains a population of approximately 5,000 incarcerated individual(s) from all security levels.</p>
<p><b>Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:</b></p>
<p>Total Direct Contact Intervention Hours:    N <input checked="" type="radio"/> Y Amount: 400          Total Direct Contact Assessment Hours:    N <input checked="" type="radio"/> Y Amount: 100</p>
<p><b>Describe any other required minimum criteria used to screen applicants:</b></p>
<p>During the selection process, applicants must satisfactorily pass a security clearance procedure that includes an interview, a background investigation, and a drug test. The dissertation must be successfully proposed at the time the APPIC application is submitted. Applicants must first go through the USAJobs.gov application process for a Psychology Intern as a qualification step to be selected for an interview.</p> <p>*Due to the nature of the BOP's hiring process, you will need to complete an in-person Core Values Assessment and a pre-employment integrity interview. The interview may take at least 2 to 3 hours so plan accordingly. A psychology-related interview will be conducted in-person and on-site at FCC Butner.</p> <p>If matched with a BOP internship site, you will be considered an essential worker and will report daily to the institution.</p>

**Financial and Other Benefit Support for Upcoming Training Year**

Annual Stipend/Salary for Full-time Interns	\$58,858	
Annual Stipend/Salary for Part-time Interns	N/A	
Program provides access to medical insurance for intern?	<input checked="" type="radio"/> Yes	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	<input checked="" type="radio"/> Yes	No
Coverage of family member(s) available?	<input checked="" type="radio"/> Yes	No
Coverage of legally married partner available?	<input checked="" type="radio"/> Yes	No
Coverage of domestic partner available?	<input checked="" type="radio"/> Yes	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	4 hrs every 2 weeks (104 total hours annually)	
Hours of Annual Paid Sick Leave	4 hrs every 2 weeks (104 total hours annually)	
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="radio"/> Yes	No
Other benefits (please describe):		
Interns receive paid federal holidays, liability coverage for on-site professional activities, and can choose from a variety of health insurance plans.		

\*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.

**Initial Post-Internship Positions**

	<b>2019-2022</b>	
Total # of interns who were in the 3 cohorts	20	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	<b>PD</b>	<b>EP</b>
Community mental health center	1	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	1	1
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	0	0
Psychiatric hospital	1	1
Academic university/department	6	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	5
School district/system	0	0
Independent practice setting	3	1
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

\* PD = Post-doctoral residency position

EP = Employed Position

## Sample Didactic Schedule

### 2022-2023 FORENSIC SEMINAR SCHEDULE<sup>1</sup>

DATE	Speaker(s)	SEMINAR TITLE & READINGS
09/07/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Professional Ethics</b> <i>American Psychological Association's Ethical Principles of Psychologists and Code of Conduct</i> <i>Specialty Guidelines for Forensic Psychologists</i> <i>Guidelines for Forensic Psychiatrists</i>
09/14/22 Wednesday 10:00	Brianna Grover, Psy.D.	<b>Competency to Stand Trial</b> Textbook: <i>Psychological Evaluations for the Courts</i> , 4 <sup>th</sup> Ed. (Chapters 6 and 7)  Grisso, T. (2014). <i>Competence to stand trial evaluations: Just the basics</i> . Sarasota, FL: Professional Resource Press.
09/21/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.  Genna Petre, J.D.	<b>Introduction and Overview: Role and Responsibilities of Practitioners in Forensic setting and Introduction to Legal Research</b> Textbook: <i>Psychological Evaluations for the Courts</i> , 4 <sup>th</sup> Ed. (Chapters 1 and 2)  Title 18, United States Code, Sections 4241-4248.
09/28/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Criminal Competencies</b> Dusky v. U.S., 362 U.S. 402 (1960) Wilson v. U.S., 391 F. 2d. 460 (D.C. Cir. 1968) Jackson v. Indiana, 406 US 715 (1972) Estelle v. Smith, 451 U.S. 454 (1981) Colorado v. Connelly, 479 U.S. 157 (1986) Godinez v. Moran, 113 S.Ct. 2680 (1993) U.S. v. Duhon, 104 F. Supp 2d 663 (W.D.La., 2000) Indiana v. Edwards, 554 U.S. 208 (2008)

<sup>1</sup> Seminars are held in person when institution is operating at **Green** and **Yellow** levels and transition to WebEx when operating at **Red** level.

DATE	Speaker(s)	SEMINAR TITLE & READINGS
10/05/22 Wednesday 10:00	Rhett Landis, Ph.D., ABPP	<b>Criminal Responsibility Evaluations</b> <i>Psychological Evaluations for the Courts</i> , 4 <sup>th</sup> Ed. (Chapter 8). Borum, R. and Fulero, S. (1999) Empirical research on the insanity defense and attempted reforms: Evidence toward informed policy. <i>Law and Human Behavior</i> , 23(1), 117-136.
10/12/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Mental State Defenses</b> Daniel McNaughten's Case, 8 Eng. Rep. 718 (1843) Durham v. U. S. 214 F.2d 862 (D.C. Cir., 1954) U.S. v. Brawner, 471 F. 2d 969 (D.C. Cir., 1972) Frendak v. U.S., 408 A.2d 364 (1979) Ibn-Tamas v. U.S., 407 A.2d 626 (1979) Montana v. Egelhoff, 116 S.Ct. 2013 (1996) Clark v. Arizona, 126 S. Ct. 2709 (2006) Kansas v. Cheever, 571 U.S. 87 (2013) Kahler v. Kansas, 140 S. Ct. 1021 (2020)
10/19/22 Wednesday 10:00	Kristina Lloyd, Psy.D., ABPP	<b>Assessment of Dangerousness – Part I</b>  Singh, J.P., & Fazel, S (2010). Forensic risk assessment: A meta review. <u>Criminal Justice &amp; Behavior</u> , 37, 965-988.  Scott, C.L., & Resnick, P.J. (2006). Violence Risk Assessment in Persons with Mental Illness. <u>Aggression and Violent Behavior</u> , Volume 11 (6), p. 598-611.
10/26/22 Wednesday 10:00	Kristina Lloyd, Psy.D., ABPP	<b>Assessment of Dangerousness – Part II</b>
11/02/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Protection of Third Parties</b> Tarasoff v. Board of Regents of the Univ. of California, 17 Cal. 3d 415; 551 P. 2d 334, 131 Cal. Rptr. 14 (1976) Lipari v. Sears Roebuck, 497 F.Supp. 185 (1980) Jablonski v. U.S., 712 F. 2d 391 (9th Cir. 1983) Hedlund v. Sup. Court of Orange County, 669 P.2d. 41 (1983) Brady v. Hopper, 570 F.Supp. 1333 (1983)

DATE	Speaker(s)	SEMINAR TITLE & READINGS
11/09/22 Wednesday 10:00	Rhett Landis, Ph.D., ABPP	<b>Forensic Report Writing</b>  Landis, E. Forensic Report Writing at FCC Butner. unpublished monograph. Grisso, T. (2010) Guidance for Improving Forensic Reports: A Review of Common Errors. Open Access Journal of Forensic Psychology, 2, 02-115. <a href="http://www.forensicpsychologyunbound.ws/">http://www.forensicpsychologyunbound.ws/</a> – 2010.2: 102-115)
11/16/22 Wednesday 10:00	Bob Cochrane, Psy.D., ABPP	<b>Malingering, Deception and Dissimulation</b>  Rogers, R., & Bender, S. (2013). Evaluation of Malingering and related response styles. In R.K. Otto (Ed.), Forensic psychology (pp. 517-540). Vol. 11 in I. B. Weiner (Editor-In-Chief). Handbook of psychology (2 <sup>nd</sup> ed.). Hoboken, NJ: John Wiley & Sons.  Assessment of malingering in correctional settings. Handbook of correctional mental health (2nd ed.). Vitacco, Michael J.; Rogers, Richard Scott, Charles L. (Ed), (2010). Handbook of correctional mental health (2nd ed.), (pp. 255-276). Arlington, VA, US: American Psychiatric Publishing, Inc., xix, 626 pp.  Slick, D.J., & Sherman, E.M.S. (2013). Differential diagnosis of malingering. In D.A. Carone & S.S. Bush (Eds.), <i>Mild traumatic brain injury: System validity assessment and malingering</i> (pp. 57-72). New York: Springer.
11/23/22 Wednesday 10:00	Matthew McNally, Ph.D.	<b>Review &amp; Use of Capacity to Proceed Measures in CST Evaluations &amp; Testimony</b>  ILK 2010, FIR R 2006, ECST-R 2004, MacCatCa 1999, GCCT-T 1992, CAST-MR 1992
11/30/22 Wednesday 10:00	Margot Williams, Ph.D.	<b>Multicultural Considerations in Forensic Interviewing and Assessment</b>
12/07/22 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Quasi-Criminal Commitment</b>  Vitek v. Jones, 445 U.S. 480 (1980) Jones v. U.S., 463 U.S. 354 , 103 S.Ct. 3043 (1983) Washington v. Harper, 494 U.S. 210 (1990) Foucha v. Louisiana, 504 U.S. 71 (1992) Kansas v. Hendricks, 117 S.Ct. 2072 (1997) Kansas v. Crane, 534 U.S. 407 (2002) Sell v. U.S., 539 U.S. 166 (2003)

DATE	Speaker(s)	SEMINAR TITLE & READINGS
12/14/22  Wednesday 10:00	Tracy Pennuto, J.D., Ph.D	<p><b>Neuropsychological Assessment in Forensic Cases</b></p> <p>National Academy of Neuropsychology (2000). Presence of third-party observers during neuropsychological testing: Official statement of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 15 (5), 379-380.</p> <p>National Academy of Neuropsychology (2000). Test security: Official position statement of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 15 (5), 383-386.</p> <p>Bush, S.S., et. al (2009). Secretive recording of neuropsychological testing and interviewing: Official Position of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 24, 1-2.</p> <p>The Role of the Neuropsychologist in Selecting Neuropsychological Tests in a Forensic Evaluation. <i>A Position Statement by the National Academy of Neuropsychology Policy &amp; Planning Committee</i> <i>Approved by the Board of Directors 02/15/2018</i></p>
12/21//22	Radiology Tech and  Tracey Pennuto, J.D., PhD	<b>Use of Neuroimaging in the Evaluation of Criminal Cases</b>
<b>12/28/22</b>	<b>NO SEMINAR</b>	
01/04/23  Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<p><b>Landmark Cases - Informed Consent</b></p> <p>Canterbury v. Spence 464 F.2d. 772, 782 D.C. Cir. (1972)  Caesar v. Mountanos, 542 F. 2d 1064 (9<sup>th</sup> Cir., 1976)  Rennie v. Klein 653 F.2d 836 )3d Cir. 1981) (later proceeding 720 F.2d 266 (1983)  Rogers v. Okin, 638 F. Supp 934 (D. Mass 1986)  Zinermom v. Burch, 494 U.S. 113 (1990)  <a href="#">Coombs v. Florio</a> 450 Mass. 182 (2007)</p>



DATE	Speaker(s)	SEMINAR TITLE & READINGS
01/11/23 Wednesday 10:00	Adeirdre Stribling Riley, Ph.D.	<b>Right to Receive Treatment, Right to Refuse Treatment</b>  <i>Principles and Practice of Forensic Psychiatry</i> (Chapter 17), pp. 111 - 117. Drogin, E.Y. & Barrett, C.L. (2003). Substituted judgment: Roles for the forensic psychologist. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 301-312). New York: Wiley  Grisso, T. (2002). Competence to consent to treatment. In T. Grisso, <i>Evaluating competencies: Forensic assessments and instruments</i> . (pp.391-460). New York: Kluwer.
01/18/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Confidentiality and Privilege</b>  In re: Lifschutz, 2 Cal.3d 415, 467 P.2d 557 (1970) State v. Andring, 342 N.W. 2d 128 (Minn. 1984) Commonwealth v. Kobrin, 395 Mass. 284 (1985) Jaffee v. Redmond, 135 L.Ed. 2d 337 (1996) Deatherage v. Examining Board of Psychology, 948 P.2d 828 (Wash. 1997)
01/25/23 Wednesday 10:00	CRH Psychiatry Fellow	<b>Psychopharmacology for Psychologists</b>
02/01/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Civil Commitment</b>  O'Connor v. Donaldson, 422 U.S. 563 (1975) Wyatt v. Stickney, 344 F. Supp. 387 (M.D. Ala. 1972) Lessard v. Schmidt, 349 F.Supp. 1078 (E.D. Wis. 1972) Addington v. Texas, 441 U.S. 418 (1979) Parham v. J.R., 99 S.Ct. 2493 (1979) Youngberg v. Romeo, 457 U.S. 307 (1982) Heller v. Doe, 113 S.Ct. 2637 (1993)
02/08/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.  and Genna Petre, J.D.	<b>Mock Demonstration (Voir Dire with Interns)</b>

DATE	Speaker(s)	SEMINAR TITLE & READINGS
02/15/23 Wednesday 10:00	Mark Hazelrigg, PhD, ABPP	<b>Diminished Capacity</b>
02/20/23 Monday 02:00 pm	Adeirdre Stribling Riley, Ph.D.	<b>PCL-R Scoring Training</b>
02/22/23 Wednesday 10:00	Adeirdre Stribling Riley, Ph.D.	<b>FCC - PCL-R Use in Court</b> <i>The Mask of Sanity, Hervey Cleckley, 1988</i>
03/01/23 Wednesday 10:00	Evan Dubois, Psy.D.	<b>Antisocial Personality Disorder: Forensic and Correctional Implications</b>
03/08/23 Wednesday 10:00	Mallory Storus, J.D.	<b>Presentencing Evaluations</b> <i>Psychological Evaluations for the Courts, 4<sup>th</sup> Ed. . (Chapter 9)</i>
03/15/23 Wednesday 10:00	Teri Wise, Ph.D.	<b>Evaluation of Persons with IDD</b>
03/23/23 Wednesday 10:00	Susan Hurt, PhD and Nancy Laney, PhD	<b>Practitioner as an Expert Witness</b> <i>Principles and Practice of Forensic Psychiatry (Chapters 4 and 5)</i> <i>Psychological Evaluations for the Courts, 4<sup>th</sup> Ed. (Chapter 18)</i>
03/29/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Expertise and Evidence</b> Frye v. U.S., 295 F. 1013 (D.C. Cir. 1923) Jenkins v. U.S., 307 F.2d 637 (D.C. Cir. 1961) Daubert v. Merrell Dow Pharm., 113 S.Ct. 2786 (1993) General Electric Co. v. Joiner, 522 U.S. 136 (1997) Kumho Tire v. Carmichael, 526 U.S. 137 (1999)

DATE	Speaker(s)	SEMINAR TITLE & READINGS
04/05/23 Wednesday 10:00	George Corvin, M.D.	<b>Malpractice &amp; Professional Liability</b> <i>Principles and Practice of Forensic Psychiatry</i> , Ch. 28 (pp 249-259)
04/12/23 Wednesday 10:00	Intern/Attorney	<b>Mock 1</b>
04/19/23 Wednesday 10:00	Intern/Attorney	<b>Mock 2</b>
04/26/23 Wednesday 10:00	Holly Pratesi, J.D.	<b>Personal Injury and Tort Litigation</b> <i>Principles and Practice of Forensic Psychiatry</i> (Chapters 32 & 33)  Greenberg, S. (2003). Personal injury examinations in torts for emotional distress. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 233-256). New York: Wiley
05/03/23 Wednesday 10:00	Intern/Attorney	<b>Mock 3</b>
05/10/23 Wednesday 10:00	Cynthia Sortisio, PhD	<b>Children and Families/Custody Evaluations</b>
05/17/23 Wednesday 10:00	Intern/Attorney	<b>Mock 4</b>
05/24/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Child Custody Law</b>  Painter v. Bannister, 358 Iowa 1390, 140 N.W. 2d. 152 (1966) Lassiter v. Department of Social Services, 452 U.S. 18 (1981) Santosky v. Kramer, 455 U.S. 745 (1982) Pennsylvania v. Richie, 480 U.S. 39 (1987) DeShaney v. Winnebago County Department of Social Services, 489 U.S. 189 (1989) Troxel v. Granville, 530 U.S. 57 (2000)

<b>DATE</b>	<b>Speaker(s)</b>	<b>SEMINAR TITLE &amp; READINGS</b>
05/31/23 Wednesday 10:00	Intern/Attorney	<b>Mock 5</b>
06/07/23 Wednesday 10:00	Cindy Cottle, Ph.D.	<b>Juvenile Justice</b>
06/14/23 Wednesday 10:00	Intern/Attorney	<b>Mock 6</b>
06/21/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Juvenile Law</b>  Fare v. Michael C., 442 U.S. 707 (1979) Kent v. U.S., 383 U.S. 541 (1966) In re Gault, 387 U.S. 1 (1967) Thompson v. Oklahoma, 487 U.S. 815 (1988) Roper v. Simmons 543 U.S. 551 (2005) Graham v. Florida, 130 S. Ct. 2011 (2010) Miller v. Alabama, 132 S. Ct. 2455 (2012)
06/28/23 Wednesday 10:00	Intern/Attorney	<b>Mock 7</b>
07/01/23	Psychiatry Fellows start new training year	
07/05/23 Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Employment/Disability, Worker's Comp, ADA</b>  Carter v. General Motors, 106 N.W. 2d. 105 (1961) Dillon v. Legg, 441 P.2d. 912 (1968) Gough v. Natural Gas Pipeline Co. of America, U.S.C.A., 5 <sup>th</sup> Cir. (1993) Bragdon v. Abbott, 118 S.Ct. 2196 (1998) Olmstead et.al. v. L.C. by Zimring, 119 S.Ct. 2176 (1999)

<b>DATE</b>	<b>Speaker(s)</b>	<b>SEMINAR TITLE &amp; READINGS</b>
07/12/23  Wednesday 10:00	Amy Leeper, Ph.D., ABPP	<b>VA Compensation &amp; Pension Evaluations</b>
07/19/23  Wednesday 10:00	Jill Grant, Ph.D. and  Angela Lassiter, J.D.	<b>Guardianship &amp; Testamentary Capacity Evaluations</b>
07/26/23  Wednesday 10:00	Susan Hurt, Ph.D.	<b>Topics in Police and Public Safety Psychology</b>
08/02/23  Wednesday 10:00	Kristina Lloyd, Psy.D., ABPP	<b>Death Penalty Issues</b>  Cunningham, M. & Goldstein, A. M. (2003). Sentencing determinations in death penalty cases. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 407-436). New York: Wiley  Heilbrun, K., Marczyk, G., & DeMatteo, D. (2002). Competence to be executed. In K. Heilbrun, G. Marczyk, and D. DeMatteo (Eds.) <i>Forensic mental health assessment: A casebook</i> (pp. 96-115). New York: Oxford.  <i>Psychological Evaluations for the Courts</i> , 4th Ed. (Chapters 9, pp. 285-293).
08/09/23  Wednesday 10:00	Gillespie Wadsworth, Psy.D.	<b>Landmark Cases - Death Penalty</b> Furman v. Georgia, 408 U.S. 238 (1972) Gregg v. Georgia, 428 U.S. 153 (1976) Barefoot v. Estelle, 463 U.S. 880 (1983) Ake v. Oklahoma, 470 U.S. 68 (1985) Ford v. Wainwright, 477 U.S. 199 (1986) Atkins v. Virginia, 536 U.S. 304 (2002) Panetti v. Quarterman, 549 U.S. 1106 (2007) Hall v. Florida, 572 U.S. 701 (2014)

**FEDERAL CORRECTIONAL COMPLEX  
BUTNER, NORTH CAROLINA**

**PSYCHOLOGY SEMINAR SERIES 2022/2023**

<b>PRESENTER</b>	<b>TITLE/TOPIC</b>	<b>DATE</b>
Intern Orientation	SHU Reviews & Inmate Data Tracking Systems: PDS/ BEMR, Sentry, and Insight, Suicide Risk Assessments	8-29-22*
Intern Orientation	Complex orientation, Paperwork, T&A,	8-30-22*
Lauren Delk, Psy.D.	Review Systems/ First Step Act	9-12-22
Brandi Reynolds and Diana Hamilton, Ph.D.	VTC - Suicide Prevention 1-3pm TUESDAY	9-20-22*
Melanie Mivshek, Psy.D.	Self-Care in a Correctional Environment	9-26-22
Ryan Koch, Psy.D, Evan Dubois, Psy.D., Jennifer Halbsgut, Psy.D., Alma Robles, Psy.D.	BOP Careers: An Overview and Q&A	10-3-22
Jill Haughawout, Psy.D.	Residential Drug Abuse Program	10-12-22*
	Internship Conference in Denver	10-17-22
Justin Rigsbee, Psy.D., Ph.D.	Sex Offender Risk Assessment	10-24-22
Adeirdre Stribling Riley, Ph.D	Multicultural Assessment and Treatment	10-31-22
Jill Roth, Psy.D.	PREA TUESDAY 1-3	11-01-22
Tracy O'Connor-Pennuto, JD, Ph.D.	Neuropsychological Assessment (Combined with CRH)	11-7-22
Jay Gregg, Ph.D.	Treating Combat and Military Trauma	11-14-22
Justin Rigsbee, Ph.D., Psy.D.	Understanding Biases in Forensic Assessment	11-21-22
Joseph Zonno, Ph.D.	Mental Health Issues in Restrictive Housing	11-28-22
Robert Melin, Psy.D.	CBT for Psychosis (Part I)	12-5-22
Robert Melin, Psy.D.	CBT for Psychosis (Part II)	12-12-22
Melanie Mivshek, Psy.D. and Estefania Masias, Psy.D.	Dialectical Behavior Therapy with Inmates	12-19-22
Justin Rigsbee, Ph.D., Psy.D.	Hostage Negotiation	12-20-21
HOLIDAY		12-26-22

FCC Butner Psychology Doctoral Internship

HOLIDAY		01-02-23
Adeirdre Stribling Riley, Ph.D	PCL-R Scoring Training	1-9-23
Karl Leukefeld, Tamara Klein and Brandi Reynolds	Women and Special Populations – VTC 1-3 pm TUESDAY	1-17-23*
Laura Herman, Psy.D.	PTSD in Corrections	1-23-23
Patrick Cook, Psy.D.	Adam Walsh Act	1-30-23
N. Chanell Williams, Ph.D., ABPP	Behavioral Medicine: End of Life Issues (FMC, 4 <sup>th</sup> Fl.)	2-6-23
Intern Presentation 1-		2-13-23
Laura Herman, Psy.D.	Motivational Interviewing	2-27-23
Tanya Cunic, Psy.D.	TBD	3-6-23
Intern Presentation 2-		3-13-23
Kate Morris, Ericka Schmitt. Christine Anthony and Diana Hamilton	Psychology Treatment Programs in the BOP – VTC 1-3 pm TUESDAY	3-14-23*
Lauren Delk, Psy.D.	Risk Needs Responsibility	3-20-23
Heather Ross, Ph.D.	Evaluating Sovereign Citizens	03-27-22
Melanie Mivshek, Psy.D. Brittany Bate, Psy.D.	Working with Transgender Inmates	4-3-23
Intern Presentation 3-		4-10-22
Kara Holden, Psy.D.	Medication-Assisted Treatment with Substance Use Disorders	4-17-23
Intern Presentation 4-		4-24-23
Gillespie Wadsworth, Psy.D.	TBD	5-5-23* Retreat Location
Alma Robles, Psy.D.	Recovery Oriented Cognitive Therapy	5-8-23
Intern Presentation 5-		5-15-23
Dr. Gillespie and Dr. Wheat	EAP and Self-Care	5-23-23

FCC Butner Psychology Doctoral Internship

Katherine Sunder, Psy.D.	Working in Inpatient Hospital Setting	6-5-23
INTERN MOCK		6-12-23*
Rhett Landis, Ph.D., ABPP	Licensure and Related Credentialing	6-26-23
Intern Presentation 6-		6-3-23
INTERN MOCK #6		6-26-23*
Manuel Gutierrez, Psy.D.	Witsec Program	7-3-23
Heather Ross, Ph.D.	Characteristics of Stalkers	7-10-23
Intern Presentation 7-		7-17-23
Marina Mukhin, Psy.D.	Student Loan Repayment/Financial Planning	7-24-23
	Make-Up	7-31-23
	Make-Up	8-7-23



## References

- Boothby, J. L., & Clements, C. B. (2000). A national survey of correctional psychologists. *Criminal Justice and Behavior*, 27, 716-732.
- Magaletta, P.R., & Boothby, J. (2003). Correctional mental health professionals. In T.J. Fagan & R. K. Ax (Eds.) *Correctional Mental Health Handbook* (pp.21-38). Thousand Oaks, CA: Sage
- Magaletta, P. R., Patry, M. W., & Norcross, J.C. (2012). Who is training behind the wall? Twenty-five years of psychology interns in corrections. *Criminal Justice and Behavior*, 39, 1403-1418.