

1 What division do you represent?

I am the chair of the Rural and Greater Minnesota Division of MPA. Additionally, I am the lead coordinator of the Rural Behavioral Health Practice Conference committee.

2 Tell us more about you!

I grew up in Jamestown, ND, a small town that is 100 miles west of Fargo, ND. My dad was a psychiatrist and my mom was a clinical social worker. Therefore, I was genetically predetermined to be a psychologist. (Right?) I received my doctorate in psychology from the Minnesota School of Professional Psychology at Argosy in 2008. After graduating, I completed my Postdoctoral Fellowship in Rural Psychology at the Minnesota Consortium for Advanced Rural Psychology Training in 2009.

Since then, I have worked in Detroit Lakes in medical settings, initially at Essentia Health and, currently, Sanford Health. Mostly, I work in a colocated medical setting, working closely with primary care to provide behavioral health services.



Meet Dr. Jon Aligada!

RURAL AND GREATER MINNESOTA DIVISION

3 What does your division do?

With respect to the committee focused on the rural conference, we are excited to be restructuring the rural conference to provide more consistent online offerings throughout the year. I work with a great group of people to pull this together and we are looking forward to starting this in the second half of this year.

With respect to the rural division, we offer a listserv and forum for rural providers to connect and share their concerns.

4 Perks of being involved in the group?

I think the biggest perk is bringing people closer together since, as rural clinicians, our work can be lonely. Furthermore, rural practice can be a challenge since the practice demands can be very different than in urban settings. Multiple relationships are a case in point. Because of this, we strive to support rural practitioners adapt to the demands of rural practice.

When I reflect on my postdoctoral fellowship, I think that it allowed me to settle into a small town and be prepared for the realities of rural practice. Similarly, for people who grew up in or are attracted to practicing in a small town, I think that the Rural and Greater Minnesota Division and the aims of the Rural Behavioral Health Practice Conference support one's ability to practice in a place that could feel like home. While not true everywhere, the training for rural practice is not a feature of most urban training programs.

5 What is your favorite experience with the committee/division?

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My role as the rural chair is fairly new one, so I have yet to make a favorite memory. On the other hand, my favorite experience in working on the rural conference has been reuniting with fellow postdoc grads and committee members from other states. Working with smart people on a common objective is really rewarding.

“Rural...is the main course.”

6 What makes you most passionate about your division?

As I hinted at earlier, I think the real benefit of learning about rural psychology is to help people acclimate to place they want to call home. If you are from a small town or like the pace of a small town, then I learning about rural practice is really about helping you to find a sense of home while helping others.

7 Who can join the division?

Anyone who is an MPA member and is interested in rural issues.

8 How often does your group meet?

Since most of our members are spread throughout rural Minnesota, most of the connection happens throughout the listserv.

9 Self-Care tips for students?

Build your social network and deepen your friendships. It will be professionally rewarding for sure, but mostly it is just the way we work as humans. As I have grown in my profession, I have found that my interpersonal connections have become more important. While the extra clinical wisdom and insight is great, we have a special profession that largely puts the work of psychology squarely on the individual practitioner. A deepened social network allows you to stay centered and competent in your work. Furthermore, friends are cool. Especially, the cool ones.

10 If you had unlimited grant money and could pick any topic in the world to research on, what would you pick?

Unlimited? Anything?---research on bionic eyes. (hey, you asked.)

My grownup self would like to see research on distilling common treatment strategies in rural areas and the process of adapting interventions to various contexts. The reality of clinical practice in rural settings is that you are a generalist and are constantly having to think about adapting your knowledge base to various settings and situations. There can be major cultural variation from one town to the next. We may not have specialists in various areas like trauma, autism, couples counseling etc. We are also seen growing numbers of racial diversity. For instance, Pelican Rapids, MN has a significant Somali, Bosnian and Hispanic population. So it would be great to see research that supports clinicians in understanding the underlying dynamics of the cultural milieu, treatment process and how to adapt interventions that maintain clinical integrity. And then I want bionic eyes.

11 If your group was a seasoning, what would it be?

Steak. I know, not a seasoning, but neither is rural. It is the main course. A well-made steak stands on its own and doesn't need seasoning. And if you are vegetarian: tofu steak.



Contact Dr. Aligada at jonathan.Aligada@Sanfordhealth.org if you want to be involved in the rural division!