CLINICAL PSYCHOLOGY HANDBOOK

HARVARD UNIVERSITY DEPARTMENT OF PSYCHOLOGY CLINICAL PSYCHOLOGY PROGRAM: PHILOSOPHY, STRUCTURE, & REQUIREMENTS

UPDATED: AUGUST 19, 2020

PURPOSE OF THIS DOCUMENT

The purpose of this document is to outline and describe the philosophy and structure of Harvard University's Clinical Psychology Program and to provide students with information about the courses, research, and clinical training required to earn a Ph.D. degree in clinical psychology.

The Department of Psychology provides a Graduate Student Handbook that describes the requirements, structure, student funding, and resources for the Department in general (see https://psychology.fas.harvard.edu/clinical-psychology-grad). The current document supplements that Handbook for students in our Clinical Psychology Program.

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HARVARD UNIVERSITY

DEPARTMENT OF PSYCHOLOGY

CLINICAL PSYCHOLOGY FACULTY

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DEPARTMENT OF PSYCHOLOGY - GENERAL ORGANIZATION

The Department provides Ph.D. training in the following areas: (1) Clinical Psychology, (2) Experimental Psychopathology, (3) Cognition, Brain, and Behavior, (4) Developmental Psychology, and (5) Social Psychology. The faculty for the Clinical Psychology program is the same as for the Experimental Psychopathology program.

CLINICAL PSYCHOLOGY TRAINING MODEL AND PROGRAM

The Clinical Psychology program adheres to a **clinical science** model of training, and is a member of the Academy of Clinical Psychological Science. We are committed to training clinical psychologists whose research advances scientific knowledge of psychopathology and its treatment, and who are capable of applying evidence-based methods of assessment and clinical intervention. The main emphasis of the program is research, especially on severe psychopathology. The program includes research, course work, and clinical practica, and a clinical internship. The curriculum meets requirements for licensure in Massachusetts, accreditation requirements of the American Psychological Association (APA), and accreditation requirements of the Psychological Clinical Science Accreditation System (PCSAS). Students typically complete assessment and treatment practica during their second and third years in the program, and they must fulfill all departmental requirements prior to beginning their one-year internship.

The program can be completed in five years (including the internship year), and at least two of these years must be in residence in the Department of Psychology at Harvard University. However, students often take five to six years to complete their course work and dissertation and an additional year to complete their clinical internship. Therefore, students take between five and seven years to complete the entire program.

Our Ph.D. program in Clinical Psychology is accredited by the American Psychological Association. [Commission on Accreditation, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242 Tel.: (202) 336-5500], and by the Psychological Clinical Science Accreditation System (PCSAS) [Psychological Clinical Science Accreditation System. 1800 Massachusetts Avenue, NW, Washington, DC 20036-1218 Tel.: (301) 455-8046].

The Director of Clinical Training (DCT) is Professor Richard J. McNally. As DCT, Professor McNally is the person students should contact with any questions about the activities, requirements, and responsibilities relating to the Clinical Psychology Program.

CURRICULAR REQUIREMENTS FOR THE PH.D. IN CLINICAL PSYCHOLOGY

Required courses and training experiences fulfill requirements for clinical psychology licensure in Massachusetts and APA criteria for accreditation of clinical psychology programs. Students in the clinical psychology program are required to take all of the following courses:

GENERAL COURSES

Psych 2010 [Proseminar] Contemporary Topics in Psychological Research Psych 3200 Research Seminar in Clinical Science (years 1-3)

ETHICS

Psych 3900 Professional Ethics

HISTORY OF PSYCHOLOGY

Psych 2050 History of Psychology

INDIVIDUAL DIFFERENCES

Psych 2040 Contemporary Topics in Psychopathology

RACIAL-ETHNIC BASIS OF BEHAVIOR

Psych 2430 Cultural and Individual Diversity

BEHAVIORAL ASSESSMENT & TREATMENT

Psych 3250 Psychological Testing

Psych 2460 Diagnostic Interviewing

Psych 2420 Cognitive-Behavioral Treatment of Psychological Disorders

Psych 2445 Psychological Treatment Research

STATISTICS AND PSYCHOMETRICS

Psych 1950 Intermediate Statistical Analysis in Psychology

Psych 1952 Multivariate Analysis in Psychology

Psych 3800 Psychometric Theory or 2070 Psychometric Theory and Method Using R

RESEARCH DESIGN AND METHODS

Psych 1952 Multivariate Analysis in Psychology (meets Department statistics requirement also, as above)

Students must take at least <u>one course</u> in each of the following areas. (Note: Affective and Social Neuroscience can fulfill the requirement for either Biological Bases of Behavior or Cognitive-Affective Bases of Behavior, but not both.)

BIOLOGICAL BASES OF BEHAVIOR

PSY 1202 Modern Neuroanatomy

PSY 1352 Foundations of Cognitive Neuroscience Research

Psych 1355 The Adolescent Brain

Psych 1303 The Human Brain, Then and Now

Neuro 2000 Neurobiology

COGNITIVE-AFFECTIVE BASES OF BEHAVIOR

Psych 2400 Cognitive Psychology and Emotional Disorders

SOCIAL BASES OF BEHAVIOR

Psych 2500 Proseminar in Social Psychology

Psych 3515 Graduate Seminar in Social Psychology

Additional Training Requirements

In accordance with APA guidelines for the accreditation of clinical psychology programs, clinical students also receive training in consultation and supervision informally within the context of clinical practica in psychological assessment and treatment (e.g., Psych 3050 Clinical Practicum), and formally in Psych 2445 (Psychological Treatment Research) and Psych 3900 (Professional Ethics). Such training begins in the second semester of the first year and typically continues throughout the student's course of study in the program. Students receive broad and general training in cutting-edge developmental psychology during the first-year seminar (Psych 2010, Contemporary Topics in Psychological Research). Students also attend the twice-monthly Clinical Science "brown bag" speaker series. Finally, students complete a year-long clinical internship.

Students are responsible for ensuring that they take courses in all the relevant and required areas listed above. Students wishing to substitute one required course for another should seek advice from their advisor and from the Director of Clinical Training <u>prior</u> to registering. During the first two years, students are advised to complete as many curricular and academic requirements as possible. Many requirements can be completed before the deadlines stated below.

See page 10 for additional information about Practical Clinical Training.

Goals, Objectives, and Expected Competencies

The philosophy and training model of the program is the clinical scientist model.

Goal #1: To train clinical psychological scientists

Objectives for Goal #1: The student will successfully complete the second-year research project and the doctoral dissertation. The student will publish original scholarly work in peer-reviewed scientific journals and in edited books. The student will present research at scientific conferences. The student will secure funding for research.

Competencies Expected for these Objectives: The relevant competencies are the ability to design, conduct, and write up one's original research.

How Outcomes are Measured and Minimum Levels for Achievement (MLA) for these Objectives/Competencies: The MLA for competency in designing, conducting, and writing up one's original research is successful completion of both the written evaluation of the doctoral dissertation and the oral defense of the dissertation as evinced by all four members of the dissertation committee voting to "pass" the student's written doctoral dissertation and the student's oral defense of the dissertation. Measurable outcomes relevant to the objectives for this goal include the number of published peer-reviewed journal articles, chapters, conference presentations, external grants secured, and internal grants/fellowships earned.

Goal #2: To train competent clinical practitioners

Objectives for Goal #2: The objectives comprise: 1) acquisition of basic clinical skills, 2) ability to diagnose mental disorders, 3) ability to conduct and interpret standardized psychological tests, and 4) acquisition of psychotherapeutic knowledge and expertise.

Competencies Expected for these Objectives: 1) Exhibiting basic clinical skills essential for practice and for learning from supervision; 2) diagnostic expertise; 3) testing expertise; and 4) psychotherapeutic expertise.

How Outcomes are Measured and Minimum Levels for Achievement for these Objectives/Competencies: The MLA for competency #1 is a score at least a 2 (Adequate) on the 1 through 4-point Clinical Skills Evaluation Form for each of 18 criteria (Appendix C, pp. 30-31). The MLA for competency #2 is a grade of B+ in Psych 2460 (Diagnostic Interviewing). The MLA for competency #3 is a grade of SAT in Psych 3250 (Psychological Testing). The MLA for competency #4 is a grade of B+ in Psych 2420 (Cognitive-Behavioral Treatment of Psychological Disorders).

Goal #3: To train scholars knowledgeable in psychopathology and clinical science:

Objectives for Goal #3: To master the current literature in psychopathology and clinical science.

Competencies Expected for these Objectives: Students will be capable of understanding the literature in psychopathology and clinical science, and to evaluate theoretical, empirical, and clinical claims critically.

How Outcomes are Measured and Minimum Levels for Achievement for these Objectives/Competencies: The MLA for the competencies for this goal is a grade of B+ in Psych 2040 (Contemporary Topics in Psychopathology), Psych 2445 (Psychological Treatment Research), and Psych 2420 (Cognitive-Behavioral Treatment of Psychological Disorders), and passing the

and Psych 2420 (Cognitive-Behavioral Treatment of Psychological Disorders), and passing the Generals Exam at the Ph.D. level by achieving a score of "Pass Minus" on each question of the exam.

TIME-LINE OF SPECIFIC DEPARTMENTAL REQUIREMENTS FOR THE

Ph.D. in Clinical Psychology

First Year

Required Courses (B+ or above):

<u>Psych 2010</u>, Contemporary Topics in Psychological Research (Proseminar); this is a survey of the several areas of study covered by the department, team-taught by all members of the faculty.

Psych 1950, Intermediate Statistical Analysis in Psychology

First-year research project.

Students in the first year are required to select a faculty mentor who will help the student develop a research project (either part of ongoing faculty research or research initiated by the student and approved by the mentor). A proposal of the project is submitted in late fall for approval by the Committee on Higher Degrees (CHD). A scholarly report is required and will be evaluated by the mentor and completed by May of the first year.

Second Year

Required Courses (B+ or above):

Psych 1952, Multivariate Analysis in Psychology

Psych 2040, Contemporary Topics in Psychopathology (by the end of the second year).

Second-year project.

Students should begin work as early as possible under the supervision of a faculty member and second reader, assigned by the Committee on Higher Degrees, on an empirical research project of their own devising. The project must be completed and written up in the style of a journal article prior to the end

of the spring term of the second year. An oral report on the findings is presented at a meeting scheduled late in the spring of the second year, attended by all faculty members and graduate students.

General Exam.

The General Exam is a six-hour examination covering in considerable depth the fields of clinical psychology and psychopathology. Faculty members in the clinical program develop, administer, and grade the exam. The exam is administered in August before the start of the third year.

Third & Fourth Year

Doctoral Dissertation Prospectus.

By the end of the first term of the fourth year, students will complete the design for an original project (it often grows out of the second-year research study) that will culminate in the dissertation. The design is submitted to a prospectus committee, appointed by the CHD, consisting of faculty members interested in the topic. That committee must approve the plan, and its members ordinarily continue to work closely with the student. Alternatively, students may choose the three-paper option, consisting of three journal articles (published or submitted) addressing a common theme.

Fifth Year

Thesis and Oral Defense.

The completed dissertation must be prepared as described in <u>The Form of the Doctoral Thesis</u> (http://www.gsas.harvard.edu/academic/thesis.html), defended at an oral examination, and approved by the department faculty.

Clinical Internship.

Ideally, this would occur in the fifth year. However, conducting research in clinical psychology and psychopathology usually takes more time to complete than research in other areas of psychology. Accordingly, students often do their internship in either the sixth or seventh year in the program. Students are required to complete all course work and practicum training and to defend their dissertation prospectus prior to applying for internship. Students are strongly encouraged to complete all data collection for their dissertation prior to departing for internship.

Students in the Clinical Program must successfully complete internship before being granted their doctoral degree. For example, students who complete their internship in June or July will be eligible to receive their doctoral degree the following November (provided they have successfully defended their dissertation and completed all other degree requirements).

Master's Degree

Students may be recommended for the non-terminal degree of Master of Arts upon completion of the relevant GSAS residence requirements and satisfaction of the degree requirements detailed above for the first two years of graduate study (e.g., completion of the Second-Year Project). Celia Raia typically contacts students when they are eligible to petition for this degree. However, it is the student's responsibility to initiate and complete this process.

PRACTICAL CLINICAL TRAINING

Students in the Clinical Psychology Program are required to register for and complete <u>six</u> semesters of practical clinical training (e.g., <u>PSY 3050</u> Clinical Practicum, <u>PSY 3080</u> Practicum in Neuropsychological Assessment). This typically begins in the second semester of the first year and continues through the third (and sometimes fourth) year. Most students elect to enroll in practica each semester; however, this is not required. Students may refrain from clinical practica during one or more semesters to focus more intensively on their research. This is not at all discouraged; however, such an arrangement requires permission from one's primary advisor.

Clinical practicum placements typically begin each July (or September) and are made in direct consultation with the Director of Clinical Training (DCT). Placements are made based on students' clinical training goals, current level of experience, quality of the training site, and students' current standing in the program (e.g., students who have failed to satisfy academic requirements will be advised to satisfy them before receiving a practicum placement). Students enroll in the "observational" practicum in the spring semester of their first year, and this occurs at Cambridge Hospital. Beginning in the summer after their first year, or the fall semester of their second year, students enroll in their first clinical practicum. More advanced clinical practica, including assessment/testing practica, typically occur in the third year and beyond.

Students should inform the DCT in writing each February 1st which practicum placement best suits their interests and skill level, plus two others should their first choice be unavailable. The purpose of this process is to ensure that all students receive adequate guidance on obtaining the placement that best matches their qualifications and will best prepare them to meet their intended goals.

Clinical practicum placements should meet the following criteria:

- (1) Provide 4+ hours of direct, practical training in evidence-based assessment and treatment procedures (engagement in more than 8 hours of clinical work per week must be approved by the DCT). This may involve:
 - o Observing clinical assessments or treatments
 - o Attending case conference and didactic sessions
 - o Conducting diagnostic assessments
 - o Performing psychological testing and report writing
 - o Providing individual, group, or family therapy
- (2) Provide <u>at least</u> 1 hour of supervision for every 4 hours of direct client contact (a ratio of 1-to-1 is preferred). Sites must agree to provide:
 - o At least 1 consistent supervisor to the student for the duration of the placement
 - o A written evaluation of the student's performance at the conclusion of the placement
- (3) Provide training for at least one semester (1-year placements are preferred)

Please see **Appendix A** for a list of practicum placements in which our students have trained in previous years.

Please see **Appendix B** for the Clinical Skills Evaluation Form completed by each student's practicum supervisor at the end of the practicum.

Focus on Clinical Science

Given the clinical science orientation of our program, we are committed to ensuring that students receive training in a range of evidence-based assessment and treatment practica. In addition, students are encouraged to seek out and develop opportunities to incorporate research experiences as part of their practicum training. This may take many different forms, depending on the training site, training faculty, and the individual student. Examples include:

Participating in program/treatment evaluation (including data analysis, manuscript preparation)

Conducting a single-case experimental study of treatment provided (appropriate in all settings)

Development of manualized assessment or treatment guidelines

Policy on Voluntary Clinical Experiences

In addition to the recommended six semesters of practicum training, students may also engage in short-term voluntary clinical experiences as they arise (e.g., conducting assessments or interventions on a time-limited project). Students should receive DCT consultation and approval before engaging in such experiences.

Clinical Internship

Students in the Clinical Psychology Program must complete a one-year clinical internship. This occurs following the completion of all academic and training requirements, typically during students' fifth or sixth year of graduate study. Students must have defended their dissertation proposal successfully prior to applying for internship. Students should endeavor to collect all their dissertation data, if possible, prior to commencing their internship. Clinical internships provide students with an intensive, supervised clinical training experience and always occur outside the Department of Psychology. There is a formal application process (akin to applying to graduate programs) that is managed by the Association of Psychology Postdoctoral and Internship Centers (APPIC). Detailed information about internship programs and the application process can be found at www.appic.org. The DCT and other faculty work closely with students to help prepare for clinical internship. Students are encouraged to speak with the DCT and other clinical faculty if they have any questions about preparing for internship (as well as post-docs and faculty positions).

STUDENT PROGRESS REVIEWS

At the end of each academic year, students provide their primary advisor with a review of their progress for that graduate year, including information about academic requirements satisfied, research productivity, teaching, clinical experiences, current and future funding arrangements, and a self-revaluation of basic competencies relevant for clinical practice (see **Appendix C**). Advisors provide students written feedback on their progress as well as guidance for future advancement in the program (**Appendix D**). The purpose of this process is to ensure that all students have ongoing feedback about their progress and that they receive continuous guidance regarding satisfaction of program requirements and steady progression of research, academic, and clinical development.

DUE PROCESS AND GRIEVANCE PROCEDURE

If a graduate student has a grievance with their advisor or other faculty, they should address that grievance as follows. Minor grievances are expected to be discussed maturely, and ideally resolved, with the "offending" parties. To address a major grievance, which includes sexual harassment and instances of unprofessional conduct (e.g., stealing or "fudging" data), graduate students should first talk either with the DGS (Head of CHD) [Director of Graduate Studies = Head of the Committee on Higher Degrees] or with one of the GSAS [Graduate School of Arts and Sciences] Deans (Garth McCavana or Margot Gill). These officers will discuss options and procedures with the graduate student. Graduate students will likely be encouraged toward informal discussion and mediation with confidential officers, especially if the complaint is of moderate seriousness and it is believed to be in the best interest of the student to resolve the issue informally. A formal complaint involves signing and filing a petition. This petition will be shown to the accused person who will file a written response, in turn shown to the complainant. FAS [Faculty of Arts and Sciences] states in writing that such an internal hearing procedure does not foreclose subsequent legal action, and that every effort will be made to protect the individual bringing the complaint from reprisals and to protect the respondent from irresponsible complaints. For more information about the time table and specific process for lodging a formal complaint, talk with the DGS or GSAS Deans.

POLICIES REGARDING CONTINUANCE AND TERMINATION

Each student's advisor provides one-on-one mentoring and guidance regarding research, course work, teaching, and clinical activities throughout the year. At the end of each academic year, the student completes an Annual Report describing his or her achievements and progress in the program. This report provides the basis for a discussion between the student and the advisor with regard to the student's progress and plans for the upcoming year. Satisfactory progress enables the student to continue in the program. The report and this discussion also provides the basis for identifying any problems that may have arisen in course work, research progress, or provides the basis for discussion of progress with the student's advisor. The advisor, in consultation with the Academic Director of the Clinical Program and the Director of Clinical Training (DCT), will specify in writing a timetable of what the student needs to do to rectify the problem and return to good standing (e.g., retaking a course, finishing course work to remove an Incomplete grade). Written feedback regarding the student's success (or lack thereof) in meeting this objectives is provided by the advisor.

Practicum supervisors provide written feedback and evaluation of students on practicum and they mail these reports to the Director of Clinical Training (DCT). If problems are identified, the DCT will inform the advisor of these difficulties. The advisor, the DCT, or both will meet to discuss the problem with the student and ascertain what needs to be done to rectify it. A plan to rectify matters will be put in writing, and written feedback regarding whether matters were rectified will be provided to the student.

Students who fail to achieve satisfactory grades in courses (UNSAT, B or lower, Incomplete), fail to make progress in research (e.g., not completing the Second-Year Project in a timely manner), fail to pass the Generals Exam at the Ph.D. level, or fail to receive satisfactory practicum evaluations are subject to termination from the program. Termination, however, occurs only after the student has been provided written feedback on what he or she needs to do in order to return to good standing, and has failed to achieve these objectives by the deadlines specified. The Department of Psychology's Committee on Higher Degrees (CHD) is alerted to students who are having academic difficulties, and

the Head of the CHD is consulted with regard to plans either to rectify the problem or to terminate the student from the program. Termination must be authorized via the CHD.

Assessing Students in the Clinical Science Program

I. General Departmental Requirements

All students must be in academic good standing, according to the standards applied to all other students in the department.

II. Clinical Science Requirements

The Clinical Science Program has an obligation to provide society with intellectually, emotionally, socially, and morally aware psychologists who are prepared to serve society by caring for and improving the condition of others. In keeping with the APA's Ethical Principles of Psychologists and Code of Conduct, including the cornerstone principle that psychologists must strive to benefit those with whom they work and take care to do no harm, the program has adopted the following requirements:

A. To work effectively with all patient populations, students must be competent in the following foundational capacities (based on those recommended by Kaslow et al., 2007, Journal of Consulting and Clinical Psychology):

- 1. critical thinking
- 2. judgment
- 3. ethical behavior
- 4. professionalism
- 5. maintaining appropriate boundaries
- 6. interacting effectively with others
- 7. self-awareness regarding areas of weakness
- 8. ability to respond to feedback
- 9. ability to work effectively with others
- 10. citizenship
- 11. ability to regulate negative emotions (e.g., anger, anxiety)
- 12. honesty and integrity
- 13. emotional maturity
- 14. ability to resolve conflict
- 15. respect for and tolerance of diversity (racial, ethnic, religious, social or political)
- 16. willingness to learn and grow as a professional

B. In the event that faculty members have serious concerns about deficiencies in a student's foundational competencies, the following procedure will be followed:

- 1. The faculty member would raise the concerns in a formal meeting with the student.
- 2. If there is no forthcoming evidence of clear and marked improvement, the faculty member would raise the concerns in a meeting of the clinical science faculty.

- 3. The clinical science faculty would make suggestions about how to help the student, and the faculty member would try to implement these suggestions. Suggestions may include mentoring, tutoring, referral for counseling, recommendations for a leave of absence, or other forms of assistance designed to remediate difficulties and foster competency.
- 4. If after a reasonable period of time there is no evidence that the student has improved, the faculty member would report this back to a meeting of the clinical faculty.
- 5. Two or more of the clinical faculty would discuss the situation with the student, and report this discussion to the clinical science faculty.
- 6. The clinical faculty will discuss whether the student is likely to be able to improve in the relevant foundational competencies. If they decide that this is not likely, they will formally vote whether to ask the student to leave the clinical program. Prior to a faculty vote on dismissal from the program, it is advisable that the student be notified in writing of the concerns of the clinical faculty and have an opportunity to respond to those concerns.
- 7. If the majority of the clinical faculty members vote to terminate a student from the clinical program on grounds of inadequate foundational competencies, the student will receive a letter signed by the head of the clinical area and the director of clinical training. The CHD will also be notified of the decision.
- 8. Termination from the clinical program because of deficiencies in foundational skills does not necessarily mean that the student is terminated from the department; that is up to the CHD. Students who are terminated from the clinical program are free to engage in graduate work in other areas if they are willing and able to do so.

STUDENT ADMISSIONS, OUTCOMES, AND OTHER DATA

1. Time to Completion

Time to Completion for all students entering the program

	Year in which Degrees were Conferred																					
Outcome	2010-	-2011	2011-	-2012	2012	-2013	2013-	-2014	2014	-2015	2015-	2016	2016-	2017	2017-	2018	2018-	2019	2019-	-2020	To	tal
Total number of students with doctoral degree conferred on transcript	3	3	2	1		1	3	3	()	2	1	3	3	2	1	(5	3	3	3	1
Mean number of years to complete the program	6	33	6.3	25		6	6.0	67	()	6.	75	7.3	33	7.	.5	6.	17	6.3	33	6	.5
Median number of years to complete the program	(5	(5	(6	7	7	()	- 1	7	7	7	7.	.5	6	5	6	5	(6
Time to Degree Ranges	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students in less than 5 years	0	0	0	0	0	0	0	0	0	####	0	0	0	0	0	0	0	0	0	0	0	0
Students in 5 years	0	0	0	0	0	0	0	0	0	####	0	0	0	0	0	0	0	0	0	0	0	0
Students in 6 years	2	67	3	75	1	100	1	33	0	####	1	25	1	33	0	0	5	83	2	67	16	52
Students in 7 years	1	33	1	25	0	0	2	67	0	####	3	75	1	33	2	50	1	17	1	33	12	39
Students in more than 7 years	0	0	0	0	0	0	0	0	0	####	0	0	1	33	2	50	0	0	0	0	3	10

2. Program Costs

Program Costs

Description	2020-2021 1 st -year Cohort Cost
Tuition for full-time students (in-state)	49,448
Tuition for full-time students (out-of-state)	49,448
Tuition per credit hour for part-time students (<i>if applicable enter amount</i> ; <i>if not applicable enter "NA"</i>)	NA
University/institution fees or costs	5,128
Additional estimated fees or costs to students (e.g. books, travel, etc.)	0

Harvard Psychology Department Standard Financial Aid Award, Students Entering 2020

The financial aid package for Ph.D. students entering in 2020 will include tuition and health fees support for years one through four, or five, if needed; stipend support in years one and two; a summer research grant equal to two months stipend at the end of years one through four; teaching fellowship support in years three and four guaranteed by the Psychology Department; and a dissertation completion grant consisting of tuition and stipend support in the appropriate year. Ordinarily students will not be allowed to teach while receiving a stipend in years one and two, although second-year students who have the support of their adviser may petition the dean to do a small amount of teaching.

Year 1 (2020-21) and Year 2 (2021-22)

Tuition & Health Fees: Paid in Full

Academic Year Stipend: \$30,560 (10 months) Summer Research Award: \$6,112 (2 months)

Year 3 (2022-23) & Year 4 (2023-24)

Tuition & Health Fees: Paid in Full

Living Expenses: \$30,560 (Teaching Fellowship plus supplement, if eligible)

Summer Research Award: \$6,112 (2 months)

Year 5 (2024-25) - if needed; may not be taken after the Dissertation Completion year

Tuition & Health Fees: Paid in Full

<u>Dissertation Completion Year</u> (normally year 5, occasionally year 6)

Tuition & Health Fees Paid in Full Stipend for Living Expenses \$30,560

The academic year stipend is for the ten-month period September through June. The first stipend payment will be issued at registration with subsequent disbursements on the first of each month. The summer research award is intended for use in July and August following the first four academic years.

In the third and fourth years, the guaranteed income of \$30,560 includes four sections of teaching and, if eligible, a small supplement from the Graduate School. Your teaching fellowship is guaranteed by the Department provided you have passed the General Examination or equivalent and met any other department criteria. Students are required to take a teacher training course in the first year of teaching.

The dissertation completion year fellowship will be available as soon as you are prepared to finish your dissertation, ordinarily in the fifth year. Applications for the completion fellowship must be submitted in February of the year prior to utilizing the award. Dissertation completion fellowships are not guaranteed after the seventh year. Please note that registration in the Graduate School is always subject to your maintaining satisfactory progress toward the degree.

Since financial support is the shared responsibility of the Graduate School, the department, and the student, students are be encouraged to apply for appropriate Harvard and outside fellowships throughout their enrollment. Students who win awards, such as NSF graduate fellowships, are obligated to accept the outside award in place of the Harvard award and are eligible for an incentive award from Harvard of up to \$4,000 for each academic year of outside funding.

For additional financial aid information, please refer to the Financial Support section of the GSAS website (gsas.harvard.edu/financial-support).

Psychology students are eligible to apply for generous research and travel grants from the Department.

Registration and Financial Aid are always subject to maintaining satisfactory progress toward the degree.

The figures quoted above are estimates provided by the Graduate School of Arts and Sciences and are subject to change.

3. <u>Internships</u>

Internship Placement - Table 1

								,	Year A	pplied	for Int	ernshi	ip							
Outcome	2010	-2011	2011	-2012	2012	-2013	2013	2014	2014	-2015	2015	2016	2016	-2017	2017	-2018	2018	-2019	2019-	-2020
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students who obtained APA/CPA-accredited internships	1	50	4	100	1	100	4	100	2	100	4	100	6	100	3	100	3	100	3	75
Students who obtained APPIC member internships that were not APA/CPA-accredited (tf applicable)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained other membership organization internships (e.g. CAPIC) that were not APA/CPA-accredited (if applicable)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained internships conforming to CDSPP guidelines that were not APA/CPA-accredited (tf applicable)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained other internships that were not APA/CPA-accredited (if applicable)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Students who obtained any internship	1	50	4	100	1	100	4	100	2	100	4	100	6	100	3	100	3	100	3	75
Students who sought or applied for internships including those who withdrew from the application process	2	-	4	-	1	-	4	-	2	-	4	-	6	-	3	-	3	-	4	-

Internship Placement - Table 2

	Year Applied for Internship																			
Outcome		2010-2011 2011-2012		2012-2013		2013-2014		2014-2015		2015-2016		2016-2017		2017-2018		2018-2019		2019-2020		
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students who sought or applied for internships including those who withdrew from the application process	2	-	4	-	1	1	4	-	2	-	4	1	6	-	3	-	3	-	4	-
Students who obtained paid internships	1	50		0		0		0		0		0		0		0		0		0
Students who obtained half-time internships* (if applicable)	0	0		0		0		0		0		0		0		0		0		0

4. Attrition

Attrition

									Year	of Firs	st Enro	llment								
Variable	2010-	2010-2011 2011-20		-2012	2012-	2012-2013		2013-2014		2014-2015		-2016	2016-2017		2017-2018		2018-	2019	2019-2020	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Students for whom this is the year of first enrollment (i.e. new students)	4	-	2	-	6	-	3	-	4	-	2	-	3		5	-	7	-	5	-
Students whose doctoral degrees were conferred on their transcripts	4	100	1	50	5	83	2	67	0	0	0	0	0	0	0	0	0	0	0	0
Students still enrolled in program	0	0	0	0	1	17	1	33	3	75	2	100	3	100	5	100	7	100	5	100
Students no longer enrolled for any reason other than conferral of doctoral degree	0	0	1	50	0	0	0	0	1	25	0	0	0	0	0	0	0	0	0	0

5. <u>Licensure</u>

Licensure

Outcome	2010-2020
The total number of program graduates (doctoral degrees conferred on	30
transcript) between 2 and 10 years ago	30
The number of these graduates (between 2 and 10 years ago) who	20
became licensed psychologists in the past 10 years	20
Licensure percentage	67%

Appendix A.

List of Potential Practicum Sites

Appendix A. List of Potential Practicum Sites

Site	Supervisors/Conta ct Persons	Hours	Training Experiences	Notes	Year
VA Boston Health Care System (Boston VAMC, Jamaica Plain/Boston			Overview of all VA Practica: Please note that each rotation has assigned days for attendance that are required, and that vary across rotations. Please pay close attention to these time commitments for each rotation and discuss any questions you might have with the relevant supervisor(s). These days are typically nonnegotiable due to the stringent space demands that exist in this hospital setting. The practicum rotation has the right to rescind an offer to a student who accepts, then states after accepting that he/she cannot be at the VA on any portion of the days specified when the offer was accepted. Please also note that the listed practica do not meet Massachusetts requirements as Advanced Practicum, and as a result will not qualify as clinical hours for MA licensure. Please verify the status of the rotation at the time of your interview.		
General Mental Health	Kevin Brailey, Ph.D. Kevin.brailey@va. gov		Group and individual therapy with veterans of diverse ages.		
Center for Returning Veterans	Kevin Brailey, Ph.D. Kevin.brailey@va. gov		The Center for Returning Veterans is a mental health clinic providing readjustment services for veterans deployed during Operation Iraqi Freedom/Operation Enduring Freedom/Operation New Dawn. Practicum students working in the clinic will acquire assessment and treatment experience with a range of adjustment, anxiety, depressive, post-traumatic stress and comorbid substance use disorders. Students will have opportunities for training in evidence-based practices for PTSD, anxiety, and depressive disorders. Participation in a multidisciplinary team meeting and case-conference/didactic series is strongly encouraged.		

		 Accepting one 12-16 hour/week practicum student. Schedule requirements: prefer attendance at Tuesday case-conference/didactic team meeting, 2-3pm 	
PTSD Clinical Team	Kevin Brailey, Ph.D. Kevin.brailey@va. gov	Practicum students working in the PTSD clinical team have the opportunity to acquire treatment experience working with veterans diagnosed with PTSD and other trauma-related disorders. This practicum is for advanced students, and acceptance is contingent on availability of office space in the medical center. Trainees have the opportunity to train in semi-structured interviewing for PTSD and evidence-based treatments for PTSD (e.g., cognitive processing therapy, prolonged exposure) as well as group therapy for PTSD.	
		☐ Schedule requirements: Must be available on Monday and Wednesdays	
Behavioral Medicine Program	Kevin Brailey, Ph.D. Kevin.brailey@va. gov	The Behavioral Medicine Program provides comprehensive mental health and behavioral health services for Veterans with a broad range of medical conditions and health concerns. Practicum students in the Behavioral Medicine Program co-lead a variety of outpatient cognitive-behavioral groups (e.g., pain management, depression related to chronic medical illness, stress management, smoking cessation, weight management, and insomnia), participate in multidisciplinary care, and may have the opportunity to conduct problem focused short-term therapy. In addition, the practicum student may do consultation/liaison in the context of the renal dialysis unit. The practicum student also attends the weekly Behavioral Medicine team meeting where cases and didactics are presented. Additional opportunities may be available depending upon the days the practicum student is present on site. Accepting one 16-20 hour/week practicum student. Schedule requirements: Monday (all day), Tuesday (most of the day) and Friday mornings (until early afternoon at least)	
Substance Abuse Treatment Program	Kevin Brailey, Ph.D. Kevin.brailey@va. gov	Practicum students are typically involved in conducting audiotaped short-term and longer-term individual psychotherapy under licensed staff supervision, and in co-leading cognitive-behavioral substance use relapse prevention psychotherapy groups and in co-leading various psycho-educational groups (with members of our treatment team) in the Substance Abuse Treatment Program (residential and outpatient components) at the Jamaica Plain campus of VA Boston HCS. Both the shorter-term and longer-term treatments of choice are, typically, different types of empirically-supported cognitive-behavioral therapy. The patient population consists	

Neuropsychol ogy Program	Laura Grande, Ph.D., ABPP/CN, laura.grande@va.g ov	primarily of poly-substance users (who typically use some combination of alcohol, cocaine, and heroin/oral opiates). Patients frequently present with co-morbid psychiatric diagnoses of depression, PTSD, and anxiety disorders, and with personality issues, medical problems, and legal and psychosocial difficulties. □ Accepting two 20-24 hour/week practicum students. □ Schedule requirements: Mondays, Wednesdays, Fridays The neuropsychology practicum is 16-20 hours per week, and takes place at the Jamaica Plain Campus (a neuropsychology rotation is also available at the Brockton campus; see below). Students typically see 1 patient per week for neuropsychological evaluation and gain experience in interviewing, test administration, scoring, interpretation, report preparation and feedback to patients, patient families and referral source. The primary clinical setting is the neuropsychology consult service. Group and/or individual therapy experiences are available but are deependent upon training needs, space and time allowances (will be in addition to assessments). Students may attend weekly case conferences. Attendance at monthly Neurobehavioral Rounds (4th Thursday) are required (open to discussion if there is a significant schedule conflict). Research opportunities are available. Prior coursework in assessment is required. Prior coursework in cognitive assessment, neuroanatomy, and/or neuropsychology are recommended, as is prior neuropsychology are recommended, as is prior neuropsychology are recommended, as is prior neuropsychology are sement experience. ❖ Accepting one-two 16-20 hour/week practicum students. ❖ Schedule requirements: Thursday afternoons are required. Tuesdays and Wednesdays are preferred for clinic days.
VA Women's Division	Eve Davison, Ph.D. Eve.davison@va.g ov	Treatment of women who have served in the military The Women's Trauma Recovery Team (WTRT) is an outpatient mental health program affiliated with the Women's Health Sciences Division of the National Center for PTSD, and serves women veterans with PTSD and other trauma-related mental health difficulties. Women veterans treated in WTRT are quite diverse on sociodemographic and other variables, have experienced a variety of military and other lifespan traumatic events (e.g., sexual assault, including military sexual trauma; childhood abuse; intimate partner violence; combat and warzone trauma), and typically have complex clinical presentations. This placement is for advanced students (fourth year or higher), and runs through mid-August. Trainees will have the

			opportunity to conduct comprehensive psychosocial assessments and to provide a variety of evidence-based individual psychotherapies, with a primary focus upon training in Cognitive Processing Therapy for PTSD. Accepting one 8- to 12-hour/week practicum student. Schedule requirements: Tuesday mornings; Wednesdays 11:30-12:30 team meetings. Other scheduling dependent upon medical center space considerations; however, this placement with include time across at least two days of the week.		
MGH					
OCD and Related Disorders Clinic	Sabine Wilhelm, Ph.D., Wilhelm@psych.mg h.harvard.edu		- Cognitive-behavioral individual tx of OCD, BDD, trichotillomania, and tic disorders -Supervision and team meetings See: http://www.massgeneral.org/allpsych/PsychNeuro/PsychNeuro_ocd.htm	-Clinical research site	2+
Center for Anxiety and Traumatic Stress Disorders Massachusetts General Hospital One Bowdoin Square, 6 th Floor Boston, MA 02114	Amanda Baker, Ph.D. awbaker1@partners. org	10+ hours per week	Brief Description: This practicum is designed to introduce students to the assessment and empirically supported treatments (ESTs) of patients suffering from various Anxiety Disorders as well as Complicated Grief. Students will be expected to work a minimum of 10 hours per week for one academic year. Students will receive in depth training in administration of various standardized instruments including but not limited to SCID, MINI, LSAS, etc. Additionally, students will be exposed to ESTs and be able to co-lead CBT groups as well as to treat individual patients under the direct supervision of Dr. Marques. Students must be available at least one evening per week to co-lead CBT groups. For students interested in research, opportunities may be available for collaboration on conference presentations and manuscripts. However, these research projects will require an additional time commitment. Advanced students preferred but those with less clinical exposure will also be considered. However, students must have satisfactorily completed their SCID training course prior to beginning practicum. July start would be preferred to allow for orientation to clinical procedures. However, in rare circumstances, September start date would be considered.	-Clinical research site	2+
Bipolar Clinic & Research Program, MGH, 50 Staniford	Thilo Deckersbach, Ph.D. tdeckersbach@partn ers.org		See http://www.manicdepressive.org/ for more information.	-Clinical research site	2+

MGH Chelsea HealthCare Clinic 151 Everett Avenue Chelsea, MA 02150 (617) 884-8300	Louisa Sylvia, Ph.D. lsylvia2@partners.org CBT: Luana Marques, Ph.D. lmarques@partners.org Neuropsychological testing: Nancy Lundy, Ph.D. Lundy.nancy@mgh. harvard.edu		Evidenced-based CBT interventions with an ethnically and clinically diverse outpatient population Neuropsychological assessment		
Home Base	Dr. Erika Clark Eclark9@mgh.harva rd.edu		Neuropsychological Assessment of military veterans in program co-sponsored by the Boston Red Sox Foundation and MGH, based at MGH		
Cambridge Hospital					
Observational Practicum	Kimberlyn Leary, Ph.D., kleary@challiance.o	~2-6/wk	-Observe clinical evaluations & interventions, attend seminars		1
Central Street (Adult Outpatient Clinic)	Marla Eby, PhD Deborah Woodford, PhD Deidre Barrett, PhD Patricia Harney, PhD	16- 20/wk	-Conduct intakes (1/wk) -Conduct individual psychotherapy (8/wk) with wide range of adult disorders -Observe and co-lead anxiety management groups -Weekly supervision, seminars, & case conference (3-4 hrs/wk) See: http://www.challiance.org/departments_ii/outptserv.htm	-Additional hrs for paperwork -Hours and caseload may be flexible	3+
Somerville Hospital (Adolescent Inpatient and Assessment Unit)	Eric Nass, PhD Sharon Greenwald, PhD	16- 20/wk (Sept- May)	-Individual (1-2 cases) and group (1/week) psychotherapy -Supervision (1 group), seminars (3hrs), and grand rounds (1hr) -Inpatient assessment and treatment -Individual, family, and group therapy -Coordinate with school and other outside systems including DSS See: http://www.challiance.org/departments_ii/acuteservices.htm		3+
Asian Clinic	Lisa Desai Xialolu Hsi, PhD Pedro Barbosa, PhD	16-20 hrs (Sept- May)	-Individual psychotherapy (8-10hrs) -Supervision (3hrs), seminars, team meetings, case conference	-February application	3+

			See: http://www.challiance.org/departments_ii/outptserv.		
			<u>htm</u> for more information.		
Victims of Violence	Judith Herman, MD Jayme Shorin, LCSW	20/wk	-Individual (8 hrs/wk) and group (1.5 hrs/wk) psychotherapy, including a stress management group -Supervision (1hr), seminars (6hrs), and case		3+
	Barbara Hamm, PsyD		conference (2hrs) See:		
	,-		http://www.challiance.org/departments_ii/victimsofv_iolence.htm		
McLean Hospital					
OCD Institute	Jason Krompinger, Ph.D.,	~10hrs	-Individual exposure and response prevention therapy (8hrs)	-20hr minimum if carrying individual	2+
	jkrompinger@mclea n.harvard.edu		-Group therapy (1hr), supervision (1hr), case conference (1hr) See:	cases	
			http://www.mclean.harvard.edu/patient/adult/ocd.php		
Adult Develop. Disabilities	Karen Shedlack, MD		See: http://www.mclean.harvard.edu/patient/adult/ddph.p hp		3+
Child/Adolesce nt Program	Joseph Gold, MD		See: http://www.mclean.harvard.edu/patient/child/		3+
Geriatric	Jim Ellison, MD		See: http://www.mclean.harvard.edu/patient/geriatrics/		3+
3 East Day Program	Alison Yaeger, Ph.D. ayaeger@partners.o		Dialectical Behavior Therapy with patients with Borderline Personality Disorder and related conditions		2+
Klarman Center	Patricia Tarbox, LICSW		-Co-lead CBT-modeled self-esteem group and perfectionism group for residential eating disorder patients.		2+
			-Co-lead weekly media culture group for center residents.		
Behavioral Health Partial Program	Thröstur Björgvinsson, PhD, ABPP, Director, tbjorgvinsson@mcl ean.harvard.edu		At the Behavioral Health Partial Hospital Program (BHPP), we help individuals to develop skills that improve their mood and ability to function in hopes of allowing them to better cope with life circumstances. To achieve this mission, the BHPP utilizes cognitive behavioral therapy (CBT) approaches (including dialectical behavioral therapy [DBT] skills for a wide range of conditions such as mood and anxiety disorders, personality disorders, thought disorders, and substance use disorders.		
Franciscan Hospital for Children (joint Child & Adolescent training program with McLean)	Eric Benson, Ph.D., ebenson@fhfc.org				
McLean Anxiety Mastery Program	Jacqueline Sperling, Ph.D.		http://www.mcleanhospital.org/programs/mclean- anxiety-mastery-program		

	jsperling@mclean.h arvard.edu	799 Concord Ave, Cambridge, MA, 02138 (McLean Hospital satellite clinic) Application Requirements: We will begin accepting applications for the 2019-2020 year starting 11/01/2018 with a deadline of 1/7/19. Interested applicants should send a letter of interest, CV, two letters of recommendation, and a graduate transcript to Jacqueline Sperling, Ph.D. If applicants do not have two letters of recommendation on file, they can have their recommenders send letters directly to Dr. Sperling. Of note, we will be adhering to the MPA's universal application deadline (1/7/19) and position offer date (2/11/19). Position Description: As part of the McLean Anxiety Mastery Program at McLean Hospital, practicum students will have the opportunity to co-lead clinical evaluations as well as Cognitive-Behavioral Therapy (CBT) skills-based groups and exposure sessions. Practicum students also will participate in parent guidance groups and family meetings. Additionally, students will have unique opportunities to provide telehealth coaching sessions and home-based exposure sessions. Practicum students also will be able to engage in collaborative work with schools and school-based exposures. Trainees will attend an intensive series of didactics on implementing CBT with children over the summer, and there will be an ongoing didactic seminar as well as individual supervision throughout the training year. For this position, we are seeking advanced practicum students who have had prior graduate-level experience delivering CBT and/or working with children/adolescents.	
Gunderson Residence	Lois Choi-Kain, M.D., lchoicain@partners. org	Clinical practicum students at the Gunderson Residence assess and treat adult women diagnosed with borderline and other severe personality disorder. Students co-lead group therapy sessions and conduct Dialectical Behavior Therapy (DBT) with individual patients. Opportunities to attend formal training for evidence based treatments, such as Mentalization Based Treatment (MBT) and DBT, are often available to rotating students during their practicum. Hours per week are negotiable, but most students are here on Wednesdays and Thursdays.	
Brigham and Women's Hospital, Boston MA			
Brigham Health Advanced Practicum Training: Outpatient Program	Shannon Sorenson, Ph.D., ssorenson@bwh.har vard.edu	The psychology advanced practicum training program within Brigham Psychiatric Specialties (BPS) at Brigham and Women's Hospital (BWH) is designed to provide 3rd or 4th year doctoral students in psychology with an enriching 9-month (September through May) placement to develop expertise in psychological treatment within a	

bospital-based outpatient psychiatry service. The programs is for advanced practicus matudents who can commit to a 3 or 4-day training schedule for a total committent of 20 hours each week. Practicum trainees will provide individual psychotherapy to a wide range of diagnostically diverse patients in the outpatient clinic. All psychotherapy is met outpatient clinic. All psychotherapy necks within the clinic. All psychotherapy cases are referred internally within the BPS clinic from existing providers. Practicum trainers activities in training will include provision of individual psychotherapy to approximately 6-8 patients per week, membership on an interdisciplinary treatment train, weekly supervision, and opportunities to attend Thursday Psychiatry Grand Roanids as BWH. All psychotherapy to approximately 6-8 patients per week, membership on an interdisciplinary treatment train, weekly supervision, and opportunities to attend Thursday Psychiatry Grand Roanids as BWH. All psychotherapy groups with facility or other trainees are also available. Our clinic provides treatment from a variety of modulities, including that not limited to loginities to order trainees and commitment Therapy. Exposure and Response Prevention, Dialectical Behavioral Therapy, and discussions in supervision that are cultivarily-based and responsive. Interested doctoral students and faculty in the program are encouraged to contact Dr. Shannon Sorenson to discuss questions shout the training program. Applications for the 2019-2020 training year are due by 12 prop not almany 7th, 2019 per the Massachustis Practicum Training Collaborative. Interested doctoral students and faculty in the program are encouraged to contact Dr. Shannon Sorenson to discuss questions shout the training program. Applications for the 2019-2020 training year are due by 12 proposal and styring program. Applications for the 2019-2020 training year are due by 12 provide 3rd or 4th year doctoral students in psychology with an enriching 9-month (Spermbert through May) plac	1	1	r	I	
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Inpatient Program enriching 9-month (September through May) placement to develop expertise in psychological	varu.cdu		year doctoral students in psychology with an		
Program placement to develop expertise in psychological					
assessment and treatment within an acute inpatient					
			assessment and treatment within an acute inpatient		

			psychiatry service. The program is for advanced practicum students who can commit to a 3 or 4-day training schedule for a total commitment of 20-hours each week. Provision of psychological services for patients within an acute inpatient setting is a unique opportunity to care for those with serious mental illness, dual diagnostic illnesses, and complex medical and psychiatric problems within a locked unit. Application: Interested doctoral students and faculty in the program are encouraged to contact Dr. Christopher AhnAllen to discuss questions about the training program. Applications for the 2019-2020 training year are due by 12pm on January 7th, 2019 per the Massachusetts Practicum Training Collaborative. Interested psychology graduate students should submit the following: 1. Cover letter 2. Curriculum Vitae 3. 3 Letters of reference (References should include at least one from an academic source and one from a clinical supervisor) 4. Psychological testing report (optional) Complete applications should be sent via email to: Christopher AhnAllen, Ph.D.	
			cahnallen@bwh.harvard.edu	
Children's				
Hospital Eugene J.				
D'Angelo, Ph.D., ABPP Chief, Division of Psychology Director, Outpatient Psychiatry Service Department of Psychiatry Children's Hospital Boston 300 Longwood Avenue Boston, MA 02115 Biobehavioral	Eugene J. D'Angelo, Ph.D.		Assessment and treatment of children and adolescents with diverse behavioral disorders	
Pediatric Pain Lab, Children's	Christine Sieberg, Ph.D.			
Zuo, emidien s	<u> </u>	<u> </u>	26	<u> </u>

Memorial Hospital	Christine.sieberg@c hildrens.harvard.edu		
Massachusetts Mental Health Center			
Cognitive- Behavioral Therapy Team	Robert Goisman, MD Susan Gelfman, OTR/T	-Work with patients in the Partial Hospitalization Program for Schizophrenia. -Individual therapy -Group therapy for specific goals, such as to decrease paranoia and delusions, increase self-care, or lessen addictions.	2+
Southard Clinic, Massachusetts Mental Health Center, 180 Morton Street, Jamaica Plain, MA 02130	June Wolf, PhD, ABPP June_wolf@hms.har vard.edu	Patients may receive psychodynamic, cognitive-behavioral, psychopharmacologic, or family systems treatment, individually, in couples, or in groups. Southard Clinic clients may be self- referred or by counseling centers, practitioners at other hospital outpatient services, and private practitioners in the community at large. Trainees also have the opportunity to work in subspecialty areas such as psychological testing, cognitive-behavioral therapy, and psychopharmacology. See http://www.massmentalhealthcenter.org/training/index.htm for more information.	
Dialectical- Behavioral Therapy Team (Partial Hospitalization Program)	Rudolph Blier, PhD Christopher Morse, PhD Elizabeth Simpson, MD	-Teach skills, lead addiction groups, do individual therapy with Borderline Personality Disorder and Paranoid Schizophrenic patients	3+
PREP (Prevention and Recovery in Early Psychosis)	Michelle Friedman- Yakoobian, Ph.D. mfriedm3@bidmc.h arvard.edu	See http://www.massmentalhealthcenter.org/clinicalservices/programsandservices-prep.htm for more information.	2+
CEDAR (Center for Early Detection, Assessment, and Response to Risk)	Michelle Friedman- Yakoobian, Ph.D. mfriedm3@bidmc.h arvard.edu	The CEDAR clinic helps young people and their families • Understand recent changes in thoughts, feelings or behavior • Consider treatment options • Stay on track or get back on track with work, school or self-care • Learn strategies for reducing stress and increasing protective factors Who does CEDAR serve? The CEDAR clinic is for young people (ages 14-30) who are experiencing new or worsening symptoms that may be warning signs for psychosis. These can include:	

		 Difficulties thinking clearly or concentrating Suspiciousness or uneasiness with others Increased sensitivity to sights or sounds Withdrawing from friends and family 	
Beth Israel Deaconess Medical Center			
Cognitive Neurology Unit	Sara Hoffschmidt, Ph.D. shoffsch@bidmc.ha rvard.edu	The Cognitive Neurology Unit (CNU) at BIDMC welcomes advanced doctoral students in psychology seeking experience in clinical neuropsychology. The CNU is an outpatient clinic staffed by an interdisciplinary team of neuropsychologists, neurologists, neuropsychiatrists, social workers, and trainees from all disciplines. Specialty clinics include the Concussion and TBI Clinic, Executive Function Clinic, Brain Fit Club, and Memory A2Z Program. Neuropsychological evaluation is an integral part of all treatment teams. Therapeutically focused evaluations are provided to adult patients with a variety of neurological problems including learning and attention disorders, head injury, stroke, multiple sclerosis, epilepsy, and neurodegenerative disorders. The CNU practicum is designed to promote mastery of skills in all areas of neuropsychological evaluation, including interviewing, testing, scoring, report writing, and providing patient feedback. The practicum trainee is involved in assessment of two to three patients per week. Additional clinical activities include cognitive remediation and therapy groups coordinated through the Brain Fit Club. Academic expectations include participation in rounds and didactic seminars. Up to two hours of weekly supervision and didactics are provided. Although the practicum is designed with a clinical emphasis, research opportunities are available for interested students able to commit additional time on site. The practicum is unpaid and is a 12-month training program (July 1st - June 30th); a twelve month commitment is required. Applicants should be in the third or fourth year of their doctoral program. A strong interest in neuropsychology, demonstrated by prior testing experience, is preferred. Expectations for practicum students: -Mastery of test administration and scoring during the early portion of the practicum -Complete scoring/data sheet and behavioral observations on each case -Report writing responsibilities (two to four reports/month) -Attend CNU/CNBS Grand Rounds (Wed 3-5	2+

Center for Anxiety and	CARD is affiliated with	-Attend and present at weekly neuropsychology seminar (Wed 2-3) -Attend weekly supervisory sessions with primary and secondary supervisors -Co-lead at least one cognitive remediation group To learn more about the CNU, please see our website: www.cognitiveneurologyunit.com.)	
Related Disorders (CARD)			
Child Anxiety Disorders	Rachel Merson, Ph.D., rmerson@bu.edu	See http://www.bu.edu/anxiety/ for more information about the center.	2+
Adult Anxiety Disorders:	Lisa Smith, Ph.D., smithl@bu.edu	See http://www.bu.edu/anxiety/ for more information about the center.	
Advanced Practicum in Behavioral Medicine	John D. Otis, Ph.D., johnotis@bu.edu	Behavioral Medicine is the interdisciplinary field concerned with the development and integration of behavioral, psychosocial, and biomedical science knowledge and techniques relevant to the understanding of health and illness, and the application of this knowledge and these techniques to prevention, diagnosis, treatment and rehabilitation. The Behavioral Medicine Program will give students the opportunity to develop clinical skills for working with patients with a variety of presenting problems including chronic pain, anxiety, stress conditions, sleep, smoking, and substance use. A specific focus of this program is psychological approaches to chronic pain management. Students will receive training in assessment and individual therapy. Students will have the opportunity to see patients and participate in research/writing. This advanced practicum placement is flexible and may range between 8-16 hours per week depending on student interest and training needs. http://sites.bu.edu/cardbmed/	
Interventional Neuropsycholo gy Program (ING)	Bonnie Wong, Ph.D., ABPP/CN, wongb@bu.edu	ING offers clinical services for a wide-range of neuropsychological and neuropsychiatric needs. Our treatment and assessment model involves brief, targeted neurocognitive assessment for diagnostic clarification and to identify potential areas of intervention and treatment; cognitive-behavioral therapy for attention/executive functioning and memory skills; and ongoing monitoring that includes repeat cognitive testing as needed. Students will be trained in writing brief neuropsychological reports for referring providers, educators, and clients, with a turn-around time of two weeks or less after completion of testing. We provide patient-centered, therapeutic feedback, which will include referrals to tailored cognitive treatments (individual, group), provided either as a	

		clinical service or as part of an IRB-approved research study.	
		The ideal candidate would be an advanced-level (third year and above) graduate student with experience in neuropsychological testing and traditional report writing, and training in cognitive-behavioral therapy.	
Judge Baker Children's Center			
	Sarah Kate Bearman, PhD James Slavet, Ph.D.	-Group leader for CBT group for depressed adolescents, based on Primary and Secondary Control Education and Treatment (PASCET) -Individual and case management for children and adolescents at the Manville School. -Administer WISC-IV, WJ-III, CBCL, and MMPI-A. -Conduct overall assessment of children and adolescents, including gathering information from parents and teachers -Co-lead groups on anger management, depression, and anxiety	2+
		See http://www.jbcc.harvard.edu/ for more information about the center.	
Center for Effective Child Therapy	Daniel M. Cheron, Ph.D., ABPP training@jbcc.harvard.ed u	Judge Baker Children's Center (JBCC), a Harvard Medical School Affiliate, is accepting applications for a clinical practicum position at the Center for Effective Child Therapy (CECT), the outpatient mental health service program at Judge Baker Children's Center. CECT serves children and adolescents ages 2 – 19. Therapists utilize evidence-based treatments for some of the most common presenting problems including anxiety, depression, traumatic stress, and disruptive behavior. Professional training at CECT focuses on assisting trainees in the use of effective, sustainable treatments that have withstood rigorous clinical testing (e.g., Cognitive Behavioral Therapy, Behavioral Parent Training) as well as measuring patient progress during treatment to inform therapeutic decisions. Our focus on data and quantifiable measures gives trainees unique insight into the best ways to help children and families and assists trainees in developing necessary intervention skills. The practicum experience is between 16 - 24 hours (two to three days) per week and focuses primarily on the delivery of short-term psychotherapy to children and adolescents ages 2 to 19 as well as their families. Trainees can expect to gain experience with a wide range of psychopathology, with a focus on anxiety disorders, depression, and disruptive behavior disorders. Treatments center on cognitive-behavioral therapy for anxiety and depression as well as behavioral parent training techniques for disruptive behavior disorders.	

	Students may select a focused track on early childhood treatment and receive training in Parent-Child Interaction Therapy (PCIT) or a focused track on school-aged children and adolescents and receive training in the Modular Approach to Therapy for Children (MATCH). Students in either track will gain exposure to clients across the age range. Students must be available on Thursdays to attend staff seminars as part of the practicum experience, as well as evening hours to facilitate seeing clients. Essential Duties and Responsibilities Provide time-limited psychotherapy interventions to 3-6 clients per week using cognitive-behavioral and behavioral strategies on a weekly individual outpatient basis. Participate in specific training and supervision in the Modular Approach to the Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC). Participate in diagnostic evaluations with a staff psychologists using semi-structured Kiddie-Schedule for Affective Disorders and Schizophrenia (K-SADS). Note that the student will have the opportunity to observe administration of the (K-SADS) and may have the opportunity to begin learning aspects of administering it. However, this practicum will not provide the level of training needed for proficiency and reliability of K-SADS administration in other settings. Participate in at least two hours of individual supervision per week. Cases will be supervised by a licensed psychologist for one hour per week. Additional supervision hours will be provided by postdoctoral fellows, overseen by a licensed psychologist. Participate in direct and/or videotaped observation of and by clinical supervision hours will be provided by postdoctoral fellows, overseen by a licensed psychologist. Participate in additional research and didactic activities as appropriate. Qualifications and Skills Enrolled in a doctoral graduate program in clinical, counseling, or school psychology. Completion of basic psychopathology coursework. Completion of heat program in clinical		
	based treatments is preferred.		
Anne Cangello, Psy.D. training@jbcc.harvard.ed u	Judge Baker Children's Center (JBCC), a Harvard Medical School Affiliate, is accepting applications for a one (1) year clinical trainee placement. JBCC is an established center of excellence for implementation, training, quality improvement, and service initiatives focused on improving behavioral health for children and adolescents. JBCC is also home of the Manville School, a therapeutic day		
	training@jbcc.harvard.ed	childhood treatment and receive training in Parent-Child Interaction Therapy (PCIT) or a focused track on school-aged children and adolescents and receive training in the Modular Approach to Therapy for Children (MATCH). Students in either track will gain exposure to clients across the age range. Students must be available on Thursdays to attend staff seminars as part of the practicum experience, as well as evening hours to facilitate seeing clients. Essential Duties and Responsibilities Provide time-limited psychotherapy interventions to 3-6 clients per week using cognitive-behavioral and behavioral strategies on a weekly individual outpatient basis. Participate in specific training and supervision in the Modular Approach to the Therapy for Children with Anxiety. Depression, Trauma, or Conduct Problems (MATCH-ADTC). Participate in diagnostic evaluations with a staff psychologists using semi-structured Kiddie-Schedule for Affective Disorders and Schizophrenia (K-SADS). Note that the student will have the opportunity to observe administration of the (K-SADS) and may have the opportunity to begin learning aspects of administering it. However, this practicum will not provide the level of training needed for proficiency and reliability of K-SADS administration in other settings. Participate in at least two hours of individual supervision per week. Cases will be supervised by a licensed psychologist. Participate in additional supervision hours will be provided by postdoctoral fellows, overseen by a licensed psychologist. Participate in direct and/or videotaped observation of and by clinical supervision per week. Cases will be supervised by a licensed psychologist. Participate in direct and/or videotaped observation of and by clinical supervisors. Participate in dactoral graduate program in clinical, counseling, or school psychology. Completion of ne full year of a prior practicum. Completion of hosic psychopathology coursework. Completion of one full year of a prior practicum experience. Previous or conc	childhood treatment and receive training in Parent-Child Interaction Therapy (PCIT) or a focused track on school-aged children and adolescents and receive training in the Modular Approach to Therapy for Children (MATCH). Students in either track will gain exposure to elients across the age range. Students must be available on Thursdays to attend staff seminars as part of the practicum experience, as well as evening hours to facilitate seeing clients. Essential Dutles and Responsibilities Provide time-limited psychotherapy interventions to 3-6 elients per week using cognitive hehavioral and behavioral strategies on a weekly individual outpatient basis. Participate in specific training and supervision in the Modular Approach to the Therapy for Children with Anxiety. Depression, Trauma, or Conduct Problems (MATCH-ADTC). Participate in diagnostic evaluations with a staff psychologists using semi-structured Kiddie-Schedule for Affective Disorders and Schizophrenia (K-SADS). Note that the student will have the opportunity to observe administration of the (K-SADS) and may have the opportunity to begin learning aspects of administration; to the (K-SADS) administration in other settings. Participate in a least two hours of individual supervision per week. Additional supervision busus will be supervised by a licensed psychologist for one hour per week. Additional supervision bours will be provided by postdoctoral fellows, overseen by a licensed psychologist. Participate in a dealer will be supervised by a licensed psychologist. Participate in direct and/or videotaped observation of and by clinical supervision hours will be provided by postdoctoral fellows, overseen by a licensed psychologist. Participate in direct and/or videotaped observation of and by clinical supervisors. Participate in direct and/or videotaped observation of an observation of a minimum or how full years of a core graduate program in clinical or school psychology by the start of the practicum. Completion of one full year of a prior practicum

school for students from kindergarten through 10th grade who experience emotional, neurological, or learning difficulties that have impacted their ability to succeed in previous school settings. Manville has a strong tradition of providing innovative educational programming and comprehensive, evidence-based clinical services. As a result of the integration of these service components, Manville is a school where students with challenging needs can experience academic success, social development, and emotional growth.

The trainee will carry a caseload of at least 3 students enrolled in the Manville School by the end of the year. As clinicians and case managers for these students, the trainee will provide individual therapy sessions and will serve as co-leaders in group therapy services. In addition, family contact is essential and often clinically indicated, and may include parent training and formal family therapy. In their roles as case managers, trainees will coordinate the service planning and service delivery of a student's interdisciplinary Manville team. The Manville team consists of staff from various disciplines who are working with the student and their parents/guardians. Each team member contributes a unique perspective regarding the student's educational, behavioral, social and/or emotional functioning. The trainee also facilitates communication between Manville staff and any outside providers working with the child and family. The case manager role will be supported in individual and group supervision with other psychology and social work trainees. Trainees have the opportunity to further develop relationship skills through these contacts and interventions. All trainees are supervised by a licensed, full-time Manville clinician (either a psychologist or social worker), and participate in various training activities during the course of the practicum.

Essential Duties & Responsibilities:

Provide weekly clinical and targeted case management services to at least three students enrolled at Manville School for the entire school year.

Work collaboratively with parents and caregivers to support school-based intervention Facilitate monthly classroom interdisciplinary team meetings and annual case conferences. Collaborate with external collateral service providers to support student care. Participate in IEP and case conference meetings. Complete comprehensive diagnostic and treatment status reports for each student on an annual basis. Provide clinical consultation to the classroom team in an on-going way throughout the year Conduct safety assessments (self-injurious or aggressive behaviors) and mental status evaluations. Review principles of ethical practice and principles related to confidentiality and mandated reporting Participate in bi-weekly intern training seminars organized and led by Manville's Clinical Supervisors

		Participate in weekly clinical team meeting. Trainees will have the opportunity to attend the Child Mental Health Forum Lecture Series co- sponsored by Boston Children's Hospital. Trainees who are in doctoral programs in psychology will have the opportunity to conduct psychological testing batteries, including WISC-IV, projective tests (eg: TAT), personality tests (eg: MMPI-A when appropriate), and behavioral / symptom checklists. ALL TRAINEES must be available from 9:00 AM – 3:00 PM from August 26, 2018 through August 30, 2018 for staff training. ALL TRAINEES must be available weekly on Wednesdays and Fridays for critical school and staff meetings and seminars.	
		Qualifications and Skills: Candidates must meet all of the following requirements: Applicants must be currently enrolled in a Doctoral program in Clinical, Counseling, or School Psychology or a Master's program in Social Work or Counseling At least two years prior experience providing clinical services. Strong clinical service coordination skills. Excellent interpersonal, organizational and communication skills and be comfortable collaborating with a range of professionals from other fields. Strong applicants will have: Prior experience delivering evidence-based interventions in a school-based setting.	
		Applications Interested candidates should send a cover letter specifically addressing your experience related to the job responsibilities above, a curriculum vitae two letters of recommendation, emailed directly from a supervisor overseeing your prior clinical work	
The Camp Baker Summer Treatment Program	Sarah Tannenbaum, PsyD, campbaker@jbcc.harvard .edu	Camp Baker currently has eight graduate-level summer training positions available. Camp Baker is a therapeutic summer program based off of the Summer Treatment Program (STP) model and is specifically designed for 6-12 year old children with ADHD. The STP has positive effects on the serious behavioral, social, and academic difficulties exhibited by children diagnosed with ADHD. Summer trainees at Camp Baker will implement the treatment program in a camp setting for children with ADHD. They will receive extensive training and experience implementing the research-based intervention. Students with STP experience are often highly sought-after in graduate training programs in clinical psychology, social work, medicine, and education. Previous trainees within Camp Baker	

		have gone in to successful careers in all of these fields.
		Camp Baker is currently accepting applications for two roles: 1) Graduate Counselor and 2) Behavior Support Specialist. Please visit our website for a detailed description of roles and responsibilities for each position: https://jbcc.harvard.edu/employment-opportunities-sei.
		All aspects of the training program are supervised by a licensed clinical psychologist. Trainees typically gain over 200 hours of experience providing treatment directly to children. Opportunities for participating in behavioral parent training are also available.
		Trainees complete a week-long training prior to the start of treatment and receive ongoing supervision. Training begins Monday, July 1, 2019 with the July 4th holiday off. Camp Baker runs from Tuesday, July 10th and continues through Friday, August 16th, 2019. Trainees typically work from 7:30am until 4:30pm and stay from 7:30am-6pm one evening per week. The stipend for graduate-level positions this summer is \$2,500.
		Interested applicants should send • A cover letter describing your professional development goals and how Camp Baker might fit with those goals • A current CV • A de-identified assessment report, treatment report, or other psychology-related writing sample • The name and contact information for your practicum coordinator (for applicants looking to gain practicum or academic credit) • Three letters of recommendation (sent to Dr. Tannenbaum from the recommender directly)
Metrowest Neuropsychol ogy		
Metrowest Neuropsycholo gy, 1900 West Park Drive, Suite 280, Westborough, MA 01581	Dr. Stacy Horner s.horner@metrowes tneuropsych.com	Child, adolescent, adult, and geriatric neuropsychological assessment

Note: Students interested in learning more about each of these sites should contact the Harvard faculty person listed above each site. Harvard faculty will then work with the student and the practicum site to negotiate placement, hours, responsibilities, etc.

Appendix B.

Clinical Skills Evaluation Form

Harvard University, Department of Psychology Clinical Skills Evaluation Form

Name of Student:		Date:	
Name of Evaluator:			
Training Site:			
Please rate the studen	t's competence in each	ch of the following area	us of clinical skill.
1	2	3	4
Needs o	attention Adequ	uate Above avera	ge Superior
2. Adopts a3. Is willing t4. Responds5. Has appro6. Is aware o7. Demonstra8. Works we	professional manner of learn. appropriately to feed priate boundaries in if and sensitive to ether ates proficiency in clitals as a member of a tree profice.	interactions with patient ical issues. inical case conceptualiz	ff and supervisors. ts/clients. cation.
10. Is able to11. Has good12. Is able to13. Is able to14. Is able to	ask for help when ne fundamental clinical consider clinical prol work well with patie	ecessary and appropriate skills (interviewing, en blems from multiple pents/clients from diverse cal situations in an effect	e. mpathic listening, etc.). rspectives.
16. Demonstra	ates skill at applying	scientific knowledge to	clinical practice.

17. Demonstrates knowledge and proficient use of appropriate assessment methods.
18. Demonstrates knowledge and proficient use of evidence-based treatment methods (when
applicable).
Overall Evaluation:
Strengths:
Areas for Improvement:
Supervisor's Signature:
Please return this form to:
Professor Richard J. McNally, Director of Clinical Training
Department of Psychology, Harvard University
33 Kirkland Street
Cambridge, MA 02138
Thank you!

Date: _____

APPENDIX C.

Graduate Student Annual Report Form

Year: _____

Student name: _____

Annual Report: 2019-2020 Academic Year		
1. Please list the courses that you have taken this year:		
2. Places describe the macross year have made with years account this year. Places include non-arc		
2. Please describe the progress you have made with your research this year. Please include papers published, presentations made, projects and collaborations with other labs, and grants and grant applications, as well as progress made regarding your own research.		
3. Please describe the clinical practica (if required) that you have been involved with this year. Include site, type of population served, type of clinical contact and supervision, as well as time commitment devoted to practicum activities.		

I. Please describe the progress you have made toward meeting the relevant departmental requirements for your program this year (e.g., completed first or second year project, finished all required coursework, received approval for dissertation research (i.e., passed prospectus) etc., etc.
5. Please describe your plans and goals for academic work (including work over the summer) and for he 2018-2019 academic year. Please be specific about what you intend to accomplish.

Clinical Competence Self-Rating

Recent developments in the assessment of professional competence (see Kaslow et al., 2007) have identified the following areas as important. Please rate your competencies in these domains using the scale below.

1= deficient in a major way 2 = needs some work/improvement 3 = average 4 = good 5 = excellent
1. critical thinking
2. judgment
3. ethical behavior
4. professionalism
5. maintaining appropriate boundaries
6. interacting effectively with others
7. self-awareness regarding areas of weakness
8. ability to respond to feedback
9. working with others
10. citizenship
11. ability to regulate negative emotions (e.g., anger, anxiety)
12. honesty and integrity
13. emotional maturity
14. ability to resolve conflict
15. respect for and tolerance of diversity (racial, ethnic, religious, social or political)

- 16. willingness to learn and grow as a professional
- 17. overall knowledge about psychopathology
- 18. overall knowledge about assessment and diagnosis
- 19. overall knowledge about clinical treatment
- 20. familiarity and knowledge of APA ethical guidelines

Areas of Strength and Weakness

What do you consider to be your greatest strengths as a clinical psychologist? What areas still present challenges for you? What are you currently doing to address these issues?

Appendix D.

Annual Student Evaluation Ratings

Clinical Program ANNUAL STUDENT EVALUATION RATINGS

STUDENT NAME:

Academic Year Began ProgramProgram	Years in
Academic Advisor	Research
 successful completion of the program (3) Satisfactory: students who are making adequate program (2) Fair: given to students who are making less than exp (1) Poor: given to students who are showing significant parts of the program, or have one or more academic cla acceptable grade. (0) Not Applicable: given to students who may not have on internship or who have completed their academic contact academi	th a written evaluation letter to each student. A remediation taking exceptional progress for his/her level of training tess for his/her level of training and seem to be on target for the gress. Sected progress and have problems that need to be addressed problems that must be addressed, or have failed one or more that must be repeated in order to obtain the minimal that the opportunity to obtain experience in the area, have been the ursework but have not yet obtained their degrees.
exams, quality of writing, critical-analytic skills, writted engagement; teaching and/or scholarly activity) 0 (N/A)1(poor)	en communication skills, class participation; intellectual3(satisfactory)4
CLINICAL PERFORMANCE: (performance in assessed clinical comprehensive exam; Practicum competencies externship clinical supervisors)	
0 (N/A)1(poor)2(fair)(good)5(excellent)	3(satisfactory)4
RESEARCH PERFORMANCE (performance in research projects, critical thinking, writing skills, research soph research projects, ability to use and interpret quantitatindependence and competence of ideas, collection of d 0 (N/A)1(poor)2(fair)	tive and qualitative strategies and methodologies; ata)

Summarized Feedback:		
Plan and Timeline for Remediation (if needed)		
Date and Type of Student Response to Feedback:		
Advisor's Signature:	Date:	
Student's Signature:	Date:	