



for successful professional practice, including, in addition to assessment and intervention skills, competencies in the domains of ethics and ethical practice; multicultural/individual and cultural differences; professional and collegial relationships; self monitoring of skills and difficulties; effective use of supervision and consultation.

Equipped with these competencies, we expect our internship graduates to be able to function effectively as psychologists in a range of contemporary settings, including clinical/ institutional (group practice, counseling and family agencies, schools), private practice, and academic settings.

#### *Further Description of Aims of Internship Program*

#### **Aim 1. Awareness of multiple key approaches to conceptualizing and treating clinical problems**

Our supervisory faculty vary in their primary theoretical orientations, and include clinicians with expertise in psychodynamic psychotherapy, family systems approaches (including group work), cognitive behavioral approaches, and Interpersonal Psychotherapy (IPT) Many have specific assessment and diagnostic skills (e.g., educational assessment). We all have found, however, that the complexity of the issues that our clients face, and that our trainees will contend with in their future roles as psychologists, require awareness of and the ability to use a range of perspectives and evidence based methods. The overall position of the internship program and its supervisory faculty is integrative. We take this approach in our seminar program, our work with case evaluation, formulation and treatment planning, and our clinical meetings, at which multiple points of view are encouraged and taught.

We strive to conceptualize cases along the following dimensions:

- a) Developmental /Biological/Medical (e.g., genetic, constitutional, temperament, medical and/or developmental factors contributing to the presenting problems)
- b) Psychodynamic (e.g., internal conflicts, relational patterns, reactions to trauma)
- c) Cognitive/Behavioral (e.g., maladaptive cognitions and behaviors, conditioning and affect based schemas)
- d) Family and Relational Structures (e.g., family structure, boundaries, roles, intergenerational issues, relational patterns; support systems)
- e) Relationship/alliance with the evaluating/treating clinician
- f) Individual and Cultural Differences/ Social Systems (e.g., culture, race, ethnicity, socioeconomic status, community, gender & religion).

g) The person's strengths and capabilities.

Our evaluation and treatment planning conferences play a key role in implementing this approach to case conceptualization. In these conferences, the multiple points of view generate a biopsychosocial portrait of the patient(s), and provide information for making clinical decisions that are based on clinical judgment and core findings in psychotherapy research regarding therapeutic relationships and effective interventions.

#### **Aim 2. Utilizing Research/Empirical Bases**

- a) Utilizing the research and clinical bases for the approaches described in Aim 1 above
  - Interns will utilize appropriate research and clinical bases in implementing the conceptual/clinical approaches listed above.
  - Interns will become familiar with the principles and practices of integrative, evidence based therapy approaches.
  - Interns will consider the research and clinical bases for the several conceptual/clinical approaches listed above, using the Evidence Based Medicine model for clinical decision making (APA, 2005), with the goal of matching treatments to the particular needs of the patient.
- b) Active participation in empirical assessment of the effects of utilized treatment interventions.
  - Whenever possible, interns will utilize empirical measures to assess therapy alliance and/or effectiveness.

Depending on the results of the above considerations, treatments at the IHA centers are often integrative of multiple approaches, incorporating elements of family systems, CBT, IPT, and psychodynamic approaches as fits the case. In cases where CBT and family systems approaches are well supported for the presenting problems, these methods may be used almost exclusively (e.g., for anxiety disorders, some depressive illnesses, couples problems). Experience in couples treatment, group work and consultation is an integral part of the internship program. In addition, when required, patients receive practical, supportive intervention. As a result of this approach, we expect our interns to gain substantial beginning professional competence in the core domains of assessment and intervention that we teach, and useful knowledge in areas that we offer exposure to.

### **Aim 3. A wide range of professional competencies required for successful professional practice**

Our competency goals form describes and measures key professional competencies at the start, during the course of, and at the conclusion of the internship program. Desired outcomes are specifically established at the start of training and evaluated during the training process.

We believe that training is best achieved through intensive immersion in clinical work, including psychological assessment and the implementation of a variety of psychotherapy approaches, supported by skilled supervision and an appropriate set of didactic experiences that address the theoretical, clinical and empirical bases of these approaches.

#### **Monitoring Program Effectiveness**

An important part of our educational model is evaluation of program effectiveness. The faculty of our units receive and monitor feedback from students on the training program and its effectiveness, and make plans to modify programs accordingly.

#### **The Contribution of Interdisciplinary Training**

The Institute for Human Adjustment trains students at many levels and from several disciplines. These include practicum, internship and post doctoral psychology trainees and pre and post masters social work trainees, speech language pathologists, psychiatry residents and often pediatric residents. Many opportunities for informal consultation and sharing occur in the training focused environments of the IHA internship, among trainees at different levels, and with faculty. We believe that the continual formal and informal interaction among trainees at different levels and from different disciplines provides a rich and supporting learning setting that is key to our program. Although there are seminars oriented specifically to the needs of beginning psychology interns, all students participate in the major meetings together. We believe that, in addition to experiences shared across disciplines, disciplinary differences in training provide diverse, mutually enhancing perspectives that enrich the experience of all concerned. These disciplinary differences include testing, empirical and statistical and research backgrounds for psychologists, and special attention to social and cultural factors for social workers.

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Reference: American Psychological Association (2005). Policy statement on evidence based practice in psychology. Available online at:

<http://www2.apa.org/practice/ebpstatement.pdf>

### ***Accreditation History, Links to University of Michigan***

The Institute for Human Adjustment's Clinical Psychology Internship Program has been re accredited by the American Psychological Association for a seven year period until 2010. The Psychological Clinic and the UCCF are also members of the University of Michigan's Internship Consortium, and interns from Michigan's Clinical program are located at both sites. The seminars and other group activities are fully integrated between these two internship programs, except for special periodic meetings with the Director of Training to address issues unique to the IHA internship program.

Staff and students at the Institute for Human Adjustment participate actively in a wide range of activities at the University of Michigan, including lectures and colloquia, scholarly and research collaborations, clinical meetings and exchanges with the Department of Psychiatry, and recreational sports and cultural events.

#### **INTERNSHIP PROGRAM**

The Institute's Clinical Psychology Training Program offers a full time internship, with time divided between the Psychological Clinic and the University Center for the Child and the Family.

#### **DESCRIPTION OF INTERNSHIP COMPONENT SITES**

The IHA internship integrates activities in two IHA units, one focusing on work with adults, the other on work with children and families. These are respectively the Psychological Clinic and the University Center for the Child and the Family.

##### **Adult Component: Psychological Clinic**

The Psychological Clinic, founded in 1938, was the original locus of the Clinical Psychology program at the University of Michigan. The Clinic began its modern existence (beginning in 1954) as a psychoanalytic training center. Over the years we have expanded our perspectives to include both the widening scope of psychodynamic practice as well as interpersonal, couples/systems, biological/psychiatric and cognitive behavioral approaches; an overall multicultural perspective infuses all of our work. We bring these perspectives to bear in our initial assessment and treatment planning for our clients, and seek to teach the fundamentals of these approaches through supervision, seminars and staff meetings.

Interns receive careful supervision of their work with individuals and couples, beginning with the initial interview and objective testing. Cases are initially reviewed in Evaluation, Treatment Planning and Follow Up Groups, where treatment plans are developed with consideration of available empirical evidence; follow up on cases through systematic monitoring is conducted. Supervision covers treatment in individual, couples and group modalities, in both short and longer term treatments. Interns are exposed to a wide range of outpatient problems and to clients of varying

cultural and economic backgrounds in our diverse university community. Interns participate in a wide variety of seminars and meetings, and have multiple opportunities to present their clinical work in formal and less formal meetings.

**Child and Family Component: University Center for the Child and the Family (UCCF)**

The Center is a well established and respected center for training and research, founded in 1987. A wide range of theoretical perspectives is represented at the Center (biological, behavioral, cognitive, psychodynamic, family systems, and community/cultural). We are committed to bringing all of these perspectives to bear on each case, in a broadly integrated fashion. We work with a very wide group of clients.

Interns receive closely supervised experience in all of the basic areas of child and family work. These include psychosocial assessments; empirically based psychological testing; individual, conjoint, parent and family treatments (both short and long term); therapy and psychoeducational groups; community consultation; report writing; and formal presentations.

**SUPERVISION AND TRAINING**

A substantial part of each student’s internship time (over 40%) is spent in supervision and/or training activities. All interns have individual and group supervisions for their adult and child/family caseload. They receive additional supervision for all specialty activities in which they are engaged (e.g. psychological testing, couples work, therapy and/or psychoeducational groups, consultations, work with special populations, etc.). Interns also attend weekly meetings, case conferences and seminars (described below). Interns meet periodically with the Institute Director, who serves as their senior advisor. Interns prepare and monitor their training plan with the Director. A Joint Internship Training Committee, composed of the directors of the Clinic and the UCCF, review the training plans and help fine tune the internship experience. Evaluations of the intern’s work is prepared by each unit, to be reviewed by the Training Committee, which also receives feedback from interns evaluating the internship.

**Approximate Breakdown of Activities**

|                                   |              |
|-----------------------------------|--------------|
| Client Contact (Child/Family)     | 7            |
| Client Contact (Adults)           | 9            |
| Individual Supervision            | 3            |
| Group Supervision                 | 1.5 4.5      |
| Special Projects & Supervision    | 2.5          |
| Testing & Supervision             | 1.5 3.5      |
| Interns Seminars                  | 2            |
| Disposition Conference (C/F)      | 1.5          |
| Evaluation, Treatment Gps (Adult) | 1.5          |
| Staff Conference/Meetings         | 2.5          |
| Paperwork/Preparation             | 10           |
| Administration/Reading            | 3            |
| <b>Total</b>                      | <b>45-50</b> |

**Seminars & Conferences**

- Unless otherwise noted, the conferences and seminars listed below are required for all interns.

**Adult Training Staff and Trainee Meeting (Psych Clinic; 1.25 hrs):** This is attended by all staff and trainees, and serves multiple functions. Interns are exposed to outside speakers, who discuss a wide range of topics, including approaches to short term therapy; issues of African American English; specific areas of concern such as shame and guilt. We have had several speakers who are actively involved in managed care issues the Chair of the Insurance Committee of the Michigan Psychological Association (a Clinic graduate); the Medical Director of the University’s Psychiatric Managed Care company, with which we have a contract to provide managed care services; and the Director of a managed care clinic. Clinic staff members also present regarding assessment methods used for evaluation of clinical progress, research relevant to psychotherapy and diagnosis, and other topics. This staff meeting also provides a forum for presenting reports on ongoing clinical work conducted by the entire Clinic staff. Psychology interns as well as senior staff, post doctoral fellows, and social work interns present detailed reports on clinical work in progress at this meeting. Interns are required to present a case or a panel on a clinical theme, and lead the following discussion. These discussions cover a wide range of issues raised by the individual cases. This exposure to clinical work and issues related to it helps sharpen and deepen the intern’s understanding of the field, of professional behavior and judgment, and of the variety of clinical approaches.

**Child Training Staff and Trainee Meeting (UCCF; 1.0 hrs):**

This is attended by all staff and trainees, and serves three purposes. First, this meeting provides in service training from outside presenters on advanced topics (e.g. substance abuse evaluation and treatment of teenagers; use of Dialectical Behavior Therapy (DBT) in treatment of adolescents; evaluation and treatment of aggression in preschool children) relevant to clinic services and training needs. Second, this meeting provides interns training in the development of professional presentations. During their internship, every intern is required to make a professional level presentation based upon an integration of their clinical work at the Center with contemporary research and theory. Third, this meeting is used to identify and address intern generated topics in a timely manner. Four times during the year the meeting addresses clinical and professional topics raised by the interns.

**Adult Training Consultation Groups (Psych Clinic; 1.5 hrs):**

For their adult training at the Clinic, interns are assigned to one of three weekly Consultation Conferences. These meetings are co led by a senior psychologist and senior clinical social worker, and attended by psychology and social work interns and post doctoral and post MSW fellows. Interns present their ongoing (typically 2-3 sessions) initial consultations with new clients at these meetings, using a presentation format that parallels the consultation summary form that is completed at the end of the consultation. For each new client, the psychological tests and other information gathered at the start of the consultation are reviewed. A wide array of issues are raised and discussed at the Consultation Conference in conjunction with cases that interns present. These include interviewing techniques, diagnostic questions, medical/psychiatric issues related to the client's problems, medication issues, cultural and diversity issues relevant to the client and to our efforts to engage and help the client, ethical issues (e.g. regarding confidentiality, multiple relationships), consideration of alternative treatments, , research issues related to diagnosis and treatment, theories of psychopathology, scientific basis for case formulation and/or treatment approach proposed, and others. Each case is then followed at 6 week intervals, and progress is reviewed, and alternate approaches considered, all in the context of the original formulation and goals, and using monthly follow up questionnaires. All Psych Clinic clients are tracked on a monthly basis using Lambert's Outcome Questionnaire (OQ45) and the Working Alliance Inventory. These questionnaires are scored and tracked over time to

examine shifts in the alliance and to track patient reported change. The results are kept by the intern, and discussed in individual supervision as well as in the Consult Groups.

**Child/Family Treatment Disposition meeting (UCCF; 1.5 hrs):**

This weekly conference provides an interdisciplinary (psychology, social work, psychiatry, pediatrics, speech and language pathology) review of all new cases evaluated and/or treated at UCCF. Interns present client case material and must then offer an integrated multi axial formulation. The presentation must be informed by contemporary practice, theory and research, and include empirically supported treatments that were consulted in the development of the treatment plan.

**Professional Development Seminar (1 hour):**

Dr. Cheryl King, Director of the Institute, leads this seminar. The topics include: Training Program Policies, Applying for a 1<sup>st</sup> Professional Position or Postdoctoral Fellowship, Legal Issues and Clinical Documentation, Clinical Supervision, Assessment and Management of Suicidal Individuals, Integration of Science and Practice, Career Pathways involving Administration, and the APA Ethics Code, among others. This seminar involves active discussion with the interns with ample opportunities for tailoring to individual intern's specific interests and training needs.

**Adult Training Seminar (Psych Clinic; 1 hr)**

This ongoing seminar series is designed to focus attention on important issues in clinical work with adults for beginning therapists. These seminars are planned and scheduled in a cumulative, graded fashion to meet the needs of beginning clinicians as they learn to do and think about diagnosis and treatment. Early topics include interviewing skills for initial evaluation sessions, effective documentation, suicidality assessment; later topics are more advanced and include specialized intervention series (e.g. psychodynamic psychotherapy; CBASP, Motivational Interviewing, Acceptance and Commitment Therapy [ACT], & Couples Therapy) and other topical series (e.g. Issues related to Sex and Sexuality). Multiple faculty members and guest speakers with topical expertise present and lead discussions.

**Cognitive Behavioral Therapy Seminar (1.5 hr weekly)**

Dr. Van Etten Lee, Training Director, leads this seminar. This is a weekly fall seminar that reviews CBT theory and practice for a variety of anxiety and depressive conditions. Following the seminar, it provides group consultation on CBT interventions with clients.

**LD/ADHD & Testing Seminar** (Tuesdays, 8:30-12:30, first 4 weeks). This 4 week seminar, led by a neuropsychologist, provides 16 hours of comprehensive training around the research, theory and assessment of adult and child ADHD/LD. Includes training in test administration, scoring, and interpretation of various testing batteries. Also includes a segment provided by UCCF's speech language pathologist on training in dealing with educational and learning issues in children, and basic consultation to clients, families and schools about these issues. Individual supervision of testing follows.

**Child Training Seminar (UCCF; 1.5 hr, Fall only):** This seminar introduces the interns to core theoretical and clinical issues that are organized in terms of (1) an Integrated Model (i.e. bio psycho social) model of child and family development, functioning and psychopathology, and (b) the tenets of Evidence Based Practice. Multiple faculty members present and lead discussions.

**Psychiatric Consultation Seminar (1 hr, 5 weeks in fall):** This 5 week seminar is conducted by a consulting psychiatrist at the Institute. It deals with issues of psychiatric referral and psychotropic medications.

## **SUPERVISING FACULTY/AREAS OF SPECIAL INTEREST**

**Eileen Bond, MSW** (Faculty, UCCF) Clinical Social Worker with expertise in mind/body approaches to behavioral health including: imagination training, relaxation training, and stress management; parent education; family therapy; and the utilization of spirituality in psychotherapy.

**Barbara Cain, MSW, ACSW** (Faculty, Clinic) Social worker with expertise in adult psychotherapy. Special interests in divorce and supervision.

**Kristin Chapman, M.A., CCC/SLP.** (Faculty, UCCF) Speech & language pathologist specializing in disorders of speech, language, learning, social functioning and attention; expertise in consultation with educational systems on behalf of children with these disorders.

**Polly Gipson, Ph.D. (Faculty, UCCF).** Clinical psychologist with specialty expertise in a variety of evidence based psychotherapies for children and adolescents, in addition to depression and suicide risk assessment for adolescents. **Todd Favorite, Ph.D.** (Director, Psychological Clinic). Clinical Psychologist with expertise in a variety of evidence based psychotherapies for adults; interest and

expertise in trauma research and psychotherapy; certified in Cognitive Behavioral Analysis System of Psychotherapy (CBASP).

**Joseph Harvey, M.D.** (Faculty, UCCF) Child and Adolescent Psychiatrist with expertise in both biological and psychotherapeutic treatment of adolescents and children. Particularly interested in the integration and use of appropriate medications with ongoing psychotherapy.

**Elise Hodges, Ph.D.** (Faculty, Clinic and UCCF). Neuropsychologist with expertise in psychological testing of adults, adolescents and children.

**Jody Hoffman, Ph.D.** (Faculty, Clinic). Clinical Psychologist with expertise in CBT and Interpersonal Psychotherapy (IPT).

**Cheryl King, Ph.D. (Director, IHA; Interim Director, UCCF; Faculty, Clinic).** Clinical Child and Adolescent Psychologist with expertise in developmental psychopathology, family systems, parent behavioral management training, cognitive behavioral therapies for child/adolescent depression and anxiety, social skills training, family interventions for parents and adolescents, suicide risk assessment, and suicide risk management.

**James W. Plunkett, Ph.D.** (Faculty, UCCF) Clinical Psychologist with expertise in play therapy, parent consultation, the impact of divorce on children and families and in the development and disruption of early parent child relationships.

**Jeffrey Urist, Ph.D.** (Faculty, Clinic) Clinical Psychologist with expertise in adult psychotherapy and assessment, short term psychotherapy, and therapy with adolescents.

**Cesar Valdez, M.S.W.** (Faculty, UCCF). Clinical Social Worker with expertise treating trauma, and special interests in neurobiological approaches to psychotherapy, the role of spirituality in people's lives, and issues of diversity.

**Michelle Van Etten Lee, Ph.D.** (Director of Psychology Training, IHA; Faculty, Psychological Clinic). Clinical Psychologist with expertise in adult psychotherapy and assessment, with a focus on CBT and anxiety disorders.

**Susan Watts, MSW** (Faculty, Clinic) Social worker with expertise in individual, couples and group therapy, and treatment of substance abuse.

**Teri Wolf, MD** (Faculty, Clinic). Adult psychiatrist with interest in influence of medical conditions on psychological states.

## INTERNSHIP STIPEND AND BENEFITS

The full time internship stipend is \$19,000. Other benefits include medical insurance, two weeks vacation plus December January holiday week break, and five days professional leave.

## INTERNSHIP QUALIFICATIONS

Prospective interns must:

1. be enrolled in a clinical, counseling or educational psychology doctoral program;
2. have satisfactorily completed all required coursework in preparation for their doctorate; and
3. have satisfactorily completed required practicum assignments, with training relevant to the IHA internship.

## INTERNSHIP APPLICATIONS

**The deadline for application is NOVEMBER 1. ALL MATERIALS SHOULD BE SUBMITTED THROUGH THE APPI ONLINE PORTAL, AT [http://www.appic.org/match/5\\_3\\_match\\_application.html](http://www.appic.org/match/5_3_match_application.html).**

The following items are required:

1. completed online APPIC application
2. letter of interest;
3. curriculum vitae;
4. two letters of recommendation;
5. graduate school transcript.

Check our website for additional information at [www.umiha.org](http://www.umiha.org). Applicants will be notified of their interview status by December 1st. Two or three individual interviews with staff members from the sites will be arranged. You will also be invited to attend team meetings, case conferences

and seminars.

## ADDRESS ALL APPLICATION MATERIALS TO:

Michelle VanEtten Lee, Ph.D.  
Director of Psychology Training,  
Institute for Human Adjustment  
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Ann Arbor, MI 48109 1043

## ACCREDITATION

The Institute for Human Adjustment's Psychology Internship program is accredited by the *American Psychological Association*.

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## THE REGENTS OF THE UNIVERSITY

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(updated 8/3/2010, svel)