

**Child and Family Practicum
Fall 2004
Wednesday 9 am to 12pm
Child and Family Center
195 W. 12th**

Counseling and Clinical Psychology Programs

CPSY 609: Advanced Child and Family Intervention
PSY 609: Child and Family Practicum

Instructors:

Beth Stormshak, Ph.D. Counseling Psychology Program: 346-2152
Tom Dishion, Ph.D. Clinical Psychology Program: 346-3620
Arin Connell, Ph.D., Post Doctoral Fellow, Child and Family Center: 346 0446

email: bstorm@darkwing.uoregon.edu
tomd@darkwing.uoregon.edu
aconnell@darkwing.uoregon.edu

Clinic Coordinator:

Michelle Markstrom, MS. Child and Family Center, 346 4805
mmark@uoregon.edu

Course Objectives:

This practicum emphasizes an ecological model of child psychopathology and intervention, with a focus on providing empirically supported interventions to children and families in the community. The practicum will provide an opportunity to integrate various intervention and assessment practices within a comprehensive framework. The practicum is centered at the Child and Family Center (CFC), which provides services to children and families of diverse cultural and ethnic backgrounds. A specific focus of this practicum is to support the use of culturally sensitive interventions by means of background readings, guest speakers, shared expertise of instructors and participating doctoral students.

This professional training practicum prepares doctoral students to assume leadership roles in promoting adaptation and preventing maladaptation in children and adolescents. The practicum prepares individuals to design and deliver the best possible intervention services to children and families based on previous research in this field. Each student will develop a set of individualized goals with their supervisor based on their level of experience. The following are some of the course objectives and skills we expect students to achieve this year:

1. Conducting intake interviews with children and families
2. Conduct interventions including family assessments, feedback sessions, parenting groups, brief family interventions, family therapy, and school consultation in the community.
3. Conceptualize cases within an ecological framework and present cases to the group.

4. Professional and collegial conduct when working in an interdisciplinary team;
5. Use data to guide and evaluate effectiveness of intervention services
6. Learn about ethical and legal issues when providing services to children and families
7. Write professional reports and keep appropriate chart notes, complete all paperwork involved in seeing clients in a timely fashion
8. Become familiar with child and adolescent diagnoses using the DSM-IV.

History of Collaboration:

This practicum is a product of a collaborative effort between the Counseling Psychology and Clinical Psychology programs at the University of Oregon that began in 1996. In an effort to provide doctoral students with experiences conducting intervention with children and families, the Clinical and Counseling program are working collaboratively with the community to connect students, faculty, and community personnel.

Practicum Description:

The Child and Family practicum has in the past placed students at a variety of off-site training sites. As the practicum has developed over the past 8 years, we have developed collaborative relationships with the 4J school district as well as direct links to mental health agencies as referral sites. The result is that we have plenty of cases and opportunities for students that involve individual, family, and school-based mental health work. The following is a summary of some of the opportunities you will have on this practicum.

1) Child and Family Center: Clinical work will consist of intakes, thorough family assessment and feedback interventions, family therapy, direct interventions with children and adolescents, and parent groups. Intervention and assessment services will follow the client needs as they unfold during the year. Direct clinical research on the efficacy of interventions may also be included. Supervision and support will be provided individually and in the practicum meetings. All students will carry at least 3-4 cases throughout the year. Students will primarily work in teams of 2, with 1 therapist assigned to the child and the other assigned to the family/parents.

2). Parenting Groups: There are a variety of opportunities to run parenting groups at the University of Oregon, the CFC, and/or in both middle schools and elementary schools. These opportunities will be forthcoming as the school year gets started and we begin our work with teachers and school counselors.

3). Dinosaur Curriculum: Elementary School: This curriculum developed by Carolyn Webster-Stratton was modified by students last year and delivered at River Road elementary school. This year, we will have the opportunity to provide this service again. Students will adapt the curriculum to meet the needs of teachers and students and will become puppet masters as they learn how to teach social skills to first graders!

All practicum activities are oriented to family-based intervention and assessment services. Students will be provided with empirically-based strategies for conducting intakes and assessments (the "family check up"), a curriculum for conducting parenting groups for families with young and older children. Brief training modules in individual work with children and adolescents and family therapy will be provided in the context of case discussion and group supervision in the practicum.

Clinic Paperwork

Each case opened in either CFC will require the following paperwork.

1. Weekly progress notes documenting treatment goals, plan, and interventions (to be signed by supervisor)
2. Assessment report ("Intake") to be written after the feedback sessions with families. This report should include goals for treatment and case formulation.
3. Closing report, or treatment summary, to be written at termination.

More information on the content of each of these reports will follow in class. In each case, your supervisor should sign the reports and progress notes on a weekly basis. Students will fail practicum if paperwork is not complete at the end of the quarter!!!

Supervision and Time Commitment

This practicum will involve a time commitment of 8-12 hours per week per student. Time spent on this practicum will likely fall within 8-12 hours per week including class time. The practicum will require a year commitment. We will meet at this time all year.

Supervision will be primarily conducted in a group format during class. The following provides a structure of the supervision and class organization.

1. Email instructors with any specific concerns prior to the class meeting time in order to provide us with adequate time to prepare brief presentations (for example, you are seeing a family in which domestic violence may be an issue and you want more information on this topic).
2. Beginning of class (FALL TERM ONLY): At the beginning of each class we will do a status check-in of the cases to assess how they are progressing and track referrals. We will also assign cases at this time. As we move into Winter term, students will sign up for presentation slots during class time. Check-ins and brief supervision will be provided only for emergencies.
3. Present up to 2 cases with intensive group supervision provided. Video-taped sessions and background information should be provided. More information will follow on the specific format of these presentations. Each student is expected to show video-tape and present a case each quarter. Video-taped segments should include both a segment in which you feel the goal of the interaction was achieved, and a segment in which you want supervision or assistance.
4. As the quarter progresses, we will break off into smaller supervision groups meeting 1 hour per week. Small group supervision times will be scheduled with your supervisor.

Individual supervision will be provided in a number of different ways. First, each student will meet with their faculty supervisor at least once per quarter, and additionally on an as needed basis. Each student will be responsible for developing personal goals and reviewing those goals with their supervisor. Students will receive an end of year evaluation as well as feedback at the end of each quarter. Students are responsible for making sure they get feedback from their supervisors and schedule these meetings.

When individual supervision is needed, students are responsible for contacting their supervisor and scheduling these meetings. Supervisors do not track down students to schedule supervision. The expectation is that when consultation is needed, students will take the initiative to schedule meetings with their supervisor.

Grading

The course is pass/no pass. All students are expected to attend class, complete paperwork for clinic cases, and participate actively in class discussions and supervision. Students will meet individually with their supervisors and receive feedback each quarter. Failure to complete appropriate paperwork by the end of the quarter in clinic files will result in a grade of "no pass".

Readings

This class does not have a reading schedule and reading assignments, however, you are responsible for reading the following material. You are also responsible for outside reading directly related to the work you are doing with children and families. For example, if you have a child with toileting problems, you need to read about how to handle these and the best, evaluated strategies for toilet training. Your instructors have readings or recommendations for most topics. You will find that you actually will do a lot of reading for this class.

Several books have been ordered and should be available at the University of Oregon bookstore. They include:

Henggeler, S., Schonwald, S., Borduin, C., Rowland, M. & Cunningham, P. (1998). Multisystemic treatment of antisocial behavior in children and adolescents. New York: Guilford Press

Reid, J., Snyder, J. & Patterson, G. (2002). A Developmental Analysis and the Oregon Model for Intervention. Washington D.C.: American Psychological Association.

Dishion, T. J. & Kavanagh, K. (2003). Intervening on Adolescent Problem Behavior: A Family-centered Approach. New York: Guilford Press

Dishion, T. & Patterson, S. (1996) Preventive Parenting with Love, Encouragement and Limits in the Preschool years. Castalia Publishing Co: Eugene, Or.

Patterson, G. & Forgatch, M. (1985). Parenting Adolescents. Castalia Publishing Co, Eugene, Ore.

Miller, W. (2002). Motivational Interviewing. New York: Guilford Press

Stormshak, E. A., & Dishion, T. J. (2002). An ecological approach to clinical and counseling psychology. Clinical Child and Family Psychology Review, 5, 197-215

Webster-Stratton, C. (1994) The Incredible Years: A trouble-shooting guide for parents of children aged 3-8. Umbrella Press.

An additional reading packet with a parent training curriculum will also be available.

Fall Class Topics

- | | |
|-------|---|
| 9/29 | Orientation, Welcome, Presentation of Practicum Opportunities (Consider and formalize training goals for year, strengths, and weakness over the week) |
| 10/6 | Initial contacts with children and parents: General interviewing and clinical strategies (Turn in goals, strengths, and weaknesses to supervisor, set up individual meetings) |
| 10/13 | Family Check-up and motivational interviewing |

10/20	Family check-up continued
10/27	Working directly with children and adolescents
11/3	Parent Training Groups:.
11/10	Working with trauma
11/17	Family Therapy
11/24	Case presentations
12/1	Case presentations