



Centre for Addiction and Mental Health  
Centre de toxicomanie et de santé mentale

**CLINICAL PRACTICUM TRAINING PROGRAM  
IN PSYCHOLOGY**

**2012-2013**

**Director-of-Training: Nicola R. Brown, Ph.D., C.Psych.**

**Psychologist-in-Chief: Kenneth J. Zucker, Ph.D., C.Psych.**

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## OVERVIEW OF CAMH

### **Working for Better Understanding, Prevention and Care**

CAMH is the largest mental health and addiction facility in Canada and is recognized for its excellence. It was founded in early 1998 through the merger of the Addiction Research Foundation, Clark Institute of Psychiatry and, Donwood Institute, and Queen Street Mental Health Center and is affiliated with the University of Toronto. Since the merger, CAMH has focused on a seamless integration of addiction and mental health services in a functional and flexible environment. Internationally, CAMH has been designated by the World Health Organization as one of only four Centres of Excellence in mental health and addiction in the world. Through accessible treatment, community services, research, education and prevention, CAMH works to improve the quality of life for people who are struggling with mental illness or addiction and to support their family and friends.

*“For me it was the courage, and I guess the courage comes from saying ‘hey, let’s make a change.’ And the courage to continue to do that. It’s so great now ... it is so good for me now. I love my life.”*

Susan E. Gapka, Courage to Come Back Award Recipient

### **Care**

*“One of the things about working with people who suffer from mental illness or people who struggle with addictions is that, to the public, this may seem like a discouraging environment – a place that’s not filled with hope. But for those of us who work clinically, just the opposite is true. I find a great deal of professional fulfillment in this environment because many, many people get better.”*

Dr. David Goldbloom, former Physician-in-Chief

CAMH is committed to providing comprehensive, well-coordinated, accessible care for people with addictions or severe mental illness. We have created a continuum of clinical programs, support and rehabilitation to meet the diverse needs of people who are at risk and at different stages of their lives and illnesses. Our services include assessment, brief early interventions, inpatient programs, continuing care, and family support. We also address the larger issues relating to the four major factors affecting health: housing, employment, social support and income support. Our client-centred philosophy of care recognizes that the client has individual social, physical, emotional, spiritual and psychological needs.

### **Mental Health**

CAMH provides a wide range of inpatient, outpatient, and community-based treatment programs including: Child, Youth, and Family; Dual Diagnosis; General Psychiatry; Law and Mental Health; Mood and Anxiety; Schizophrenia; Work, Stress & Health, and others.

### **Addiction**

CAMH's addiction treatment is based on a harm reduction philosophy, an approach that focuses on decreasing adverse health, social, and economic consequences of alcohol or drug use. Clients' goals range from reduced use to total abstinence. Concurrent Disorders programs offer an integrated treatment approach for people facing concurrent addiction and mental health

problems.

### **Prevention**

*"Prevention involves a host of things. It's not just about preventing substance abuse or mental health problems. It's about supporting health and well-being and having environments that really are healthy environments."* Akwatu Khenti, former Director of Education and Training Services

CAMH is committed to working with communities throughout Ontario to create environments that support health and prevent illness. CAMH consultants work with individuals, local service providers and community groups to apply initiatives in the community and design evidence-based systems and approaches. Consultation, support, and training focus on preventing problems, promoting health and planning and delivering treatment. By providing information to the general public, we empower people with the knowledge to reduce the likelihood, recurrence and/or intensity of addiction or mental health problems for themselves or others.

### **Understanding**

*"Only through education can we hope to improve the understanding of mental health and addiction problems and thus foster support for people who struggle with these challenges."*

Dr. Paul Garfinkel, former President and CEO

One of CAMH's goals is to be a leader in creating, applying and disseminating knowledge. Each year, the Centre receives many research grants, fellowships and awards, resulting in the publication of hundreds of scientific articles and studies. Our research guides our public policy priorities and is transformed into practical resource materials and training programs, which inform the practice of professionals and help educate the general public. Advancing our understanding of mental illness and addiction is key to future improvements in prevention and clinical care. Working with communities, we aim to foster understanding and reduce the stigma associated with these illnesses.

## OVERVIEW OF THE APPLICATION PROCEDURE

Clinical placements are available across a large number of specialty clinics, to be described below. All placements are for a minimum duration of **500 hours**, either on a part-time or full-time basis. Traditionally, placements are either 2-3 days per week from September to May, or 5 days a week from May to August. Other combinations are possible and at the student and supervisor's discretion.

**THE DEADLINE FOR APPLICATIONS IS FEBRUARY 1, 2012 FOR SPRING-SUMMER 2012 AND FALL-WINTER 2012-13 PLACEMENTS.** Applications submitted after this deadline will be reviewed on May 1, 2012, and September 1, 2012 (no exception and no phone call or email about exception please).

Applicants will receive an email to confirm receipt of their application 2 weeks after the application deadline.

### **Applications are to include:**

- 1) The completed application form (on the last 2 pages of this brochure)
- 2) A one page statement of training goals and objectives
- 3) An up-to-date curriculum vitae
- 4) Official undergraduate and graduate transcripts
- 5) Three letters of reference

Applicants are required to assemble all materials prior to submission. E-mailed applications, reference letters etc. will not be accepted.

### **Please direct applications via post mail to:**

Nicola Brown, PhD, C.Psych.  
Psychology Clinical Training Coordinator  
Centre for Addiction and Mental Health  
250 College Street, 6<sup>th</sup> floor  
Toronto, Ontario M5T 1R8  
Phone: (416) 535-8501 Ext. 4077  
Email: [Nicola.Brown@camh.net](mailto:Nicola.Brown@camh.net)

Once your completed application is received, the Practicum Committee will review the submission. If deemed appropriate, your application will be sent to potential supervisors who may contact you for an interview. Most interviews take place within 4 weeks of the application deadline. After which time, you will be contacted if accepted for a placement. **If your university does not have an affiliation agreement with CAMH, this will need to be obtained before your acceptance.**

## **OVERVIEW OF CLINICAL ROTATIONS**

**The Child, Youth, and Family (CYF) Program** is newly organized, incorporating the former Child Psychiatry Program and the Youth Addictions Service, both long-standing services at the Centre for Addiction and Mental Health.

Practicum students will receive intensive training in clinical assessment and diagnosis, psychological testing, consultation, and therapeutic intervention. Such training includes experience in clinical interviewing of children, youth, and their families, and diagnostic formulation, which includes a strong focus on the use of the DSM-IV-TR. The program also serves a diverse and multicultural population, giving the practicum student an awareness of their own personal and professional strengths, limitations, and areas of growth as a clinician, while developing the knowledge, sensitivity, and skills needed to work with diverse populations. Training staff have a variety of theoretical interests, including attachment theory, the interface between developmental psychology and psychopathology, and evolutionary psychology.

Assessment and psychological testing includes objective tests, projective tests, observational techniques, psychoeducational assessment, and structured diagnostic interviews. Such training includes development of integrated psychological report writing and the process of providing clinically sensitive feedback to parents and children. Therapeutic approaches rely on empirically-validated and best-practice models of intervention. These include individual psychotherapy, group therapy, family therapy, and parent counseling in various modalities (e.g., cognitive-behavioral, behavioral, psychodynamic, solution-focused and strength-focused, and core conflictual relationship theme therapy). Preventative programs in school and community settings also exist. Services within the CYF often work within a multidisciplinary team of psychologists, psychiatrists, social workers, nurses, and child and youth workers. Thus, practicum students are able to enhance their understanding of the roles of multiple disciplines and develop skills in working together constructively.

Practicum students can gain experience in a broad range of internalizing and externalizing child psychopathologies (e.g., fire setting, delinquency and antisocial behavior, ADHD, mood and anxiety disorders). In addition, the program evaluates and treats youngsters with complex learning disabilities, pervasive developmental disorders, gender identity disorders and paraphilias, as well as substance abuse disorders. At present, the program is organized as an outpatient setting with specialized services housed within it, including a linkage with programs at the Hospital for Sick Children.

Supervision is on an individual and group basis. Child track practicum students participate in a weekly seminar that involves all psychology staff and other trainees, in which both staff and students make presentations. The seminar focuses on a range of topics, including new research in clinical child psychology and clinical issues.

**---CHILD, YOUTH AND FAMILY TRACK---**

## **ADOLESCENT SERVICE**

Supervisor: Tracey A. Skilling, Ph.D., C.Psych.

The Adolescent Service works with youth aged 12 to 19 years old. These youth are often actively involved in the juvenile justice system or have other legal issues. Mental health, psycho-educational, and risk-to-reoffend assessments are completed with recommendations offered to the courts, families, and other involved agencies. The clinic also, on occasion, provides similar assessment services to youth not involved in the juvenile justice system who have problems with behaviour such as anger, aggression, or sexual misconduct.

This rotation almost exclusively provides assessment services; comprehensive treatment plans are developed but not offered by the Service, instead treatment referrals to community agencies are suggested. The only treatment service occasionally provided in the clinic is a 10-week psycho-educational group program offered to parents who are having difficulties parenting their teens. This program uses illustrative video clips, focused group discussion, and skills building exercises to support new and more effective management strategies in order to help reduce parenting stress and family conflict, and to increase parent-teen communication.

## **BETTER BEHAVIOURS SERVICE**

Supervisor: Brendan Andrade, Ph.D., C.Psych.

The Better Behaviours Service (BBS) provides help for children, youth and their families who have challenges with disruptive behaviour, aggression, social skills difficulties, inattention and non-compliance at home and/or at school. Through semi-structured assessment, factors contributing to behavioural difficulties are identified. Individual, family and group based treatments are offered to help children build skills, reduce behavioural difficulties and help caregivers develop more effective parenting strategies to reduce family conflict. The BBS also offers a 10-month (i.e., an academic year) day treatment program in a community school for children aged 6-8 with severe behavioural challenges. Day treatment occurs in conjunction with family and group based therapy.

This is a clinical-research practicum. Students will be involved in assessment, intervention and consultation in the context of one or more clinical-research projects operating within the BBS. Students complete brief assessments and participate in delivery of structured group and individual treatment. Training and supervision of implementation of Cognitive-Behavioural treatment approaches will be provided.

## **GENDER IDENTITY SERVICE**

Supervisors: Kenneth J. Zucker, Ph.D., C.Psych.

Hayley Wood, Ph.D., C.Psych.

The Gender Identity Service helps children, adolescents, and families better understand a young person's struggle with gender identity development and related behavioural or emotional problems. Many children and youth seen in this clinic are confused about their gender identity or are unhappy about being a boy or a girl. The clinic also assesses children and youth exhibiting inappropriate and/or highly sexualized behaviour, as well as adolescents who are concerned about being sexually aroused by cross-dressing.

Treatment modalities are informed by models of developmental function and psychopathology. Diagnostic case formulations tailor the therapeutic modality and approach, which include supportive psychotherapy, psychodynamic therapy, attachment-based therapy, and parent counselling. We typically provide weekly long-term treatment to our clients. A key element in the training experience of the practicum student is to develop empathic skills and to understand better the internal representational world of their clients. Practicum students will have the opportunity to be involved in diagnostic assessments, psychological assessments, feedback to clients, families and referral agents, and as well in individual, family and parent therapy. Students may also have the opportunity to be involved in clinical research projects underway in the Service. Assessment and treatment initiatives are undertaken within the framework of a multidisciplinary team approach, and students work closely with the professionals from other disciplines (e.g., psychiatry, social work, and endocrinology) in the provision of services.

### **MOOD AND ANXIETY SERVICE**

Supervisor: Allison-Owen Anderson, Ph.D., C.Psych.

The Mood and Anxiety Disorders Service helps children and adolescents aged 5-18 who have anxiety and/or depression, as well as their families. Through the course of the assessment, we help the child and family better understand the problem. Where appropriate, treatment is recommended and can be provided within the service. Treatment goals are to reduce the client's anxiety or improve their mood so that he or she is better able to cope at home, school, and with friends.

Treatment is provided in the form of individual, family, or group therapy, as well as parent counseling or individual therapy to parents. Treatment modalities include cognitive behavioural therapy, play therapy, and psychodynamic therapy.

### **PSYCHOMETRY SERVICE**

Supervisors: Carol Root, Ph.D., C.Psych.  
Liora Keshet, M.A., C.Psych.Assoc.

Psychometry service offers students opportunities for conducting comprehensive psychological assessments for children and youth (age 4-17) who are referred internally within the Child, Youth and Family Program. Assessments are typically requested for psycho-educational, socio-emotional, and psycho-diagnostic considerations.

Practicum students will gain experience with regard to clinical and diagnostic interviewing, administering and interpreting standardized psychological assessment measures and tests, integrating clinical information with psychological test data, and provision of written and verbal feedback to clients, families, and referring agents.

Assessment tools include cognitive measurement, academic testing, assessment of learning, memory, and language, as well as socio-emotional, personality, and projective measures. Practicum students are trained via individual supervision and group supervision.

## **THE ARSON PREVENTION PROGRAM FOR CHILDREN (TAPP-C)**

Supervisors: Sherri MacKay, Ph.D., C.Psych.  
Susan Lambert, Ph.D., C.Psych.

TAPP-C helps children and youth aged 2 to 18 years, and their families, address fire setting and other fire-related behaviours, in the context of general mental health and family functioning. Not only is fire setting a very dangerous behaviour, but it also tends to occur in the context of complex behavioural, emotional, and familial needs.

Program staff provides comprehensive risk assessments, integrating fire-specific and general mental health information, and generate comprehensive treatment plans. Program staff provides intervention to families based upon TAPP-C's manualized treatment and work closely with various community agencies, including child welfare agencies, to provide service. Many TAPP-C clients have histories that include one or more of the following: child maltreatment, involvement in the youth criminal justice system, residential treatment, substance abuse (parent and/or child), and multiple psychiatric disorders (parent and/or child).

## **YOUTH ADDICTION AND CONCURRENT DISORDERS SERVICE**

Supervisor: Allison Owen-Anderson, Ph. D., C.Psych.

The Youth Addiction and Concurrent Disorders Service is a harm reduction service that helps adolescents and young adults aged 15-24 who have substance use problems, with or without mental health concerns, such as problems with mood and anxiety, disruptive behaviour, attention difficulties, eating disorders, psychotic disorders, learning disorders, adjustment disorders, and personality disorders. Psychology practicum students become involved in diagnostic assessments, psychoeducational assessments, feedback to clients, families, and referral agents, as well as individual and group therapy [First Contact, a brief group with a motivational interviewing focus; C-Smart for youth struggling with substance use and mood and/or anxiety difficulties; Seeking Safety to address concurrent substance use and PTSD; Dialectical Behavior Therapy (DBT) to address concurrent disorders]. Treatment modalities include cognitive behavioural, motivational interviewing, supportive, psychodynamic, and DBT.

-- ADULT TRACK --

## **MOOD AND ANXIETY PROGRAM**

### **ANXIETY DISORDERS SERVICE**

Supervisors: Amanda Beaman, Ph.D., C.Psych and Judith Laposa, Ph.D., C. Psych.

This rotation is conducted in the Anxiety Disorders Clinic (ADC), located in the Mood and Anxiety Program at the CAMH College Street site. The ADC is a clinical and research unit staffed by individuals from a wide range of disciplines including psychology, psychiatry, social work, and occupational therapy. The clinic sees about 1000 new referrals per year, many of which are treated via cognitive-behavioral and/or pharmacological treatment programs. The principal disorders seen in the clinic by the psychology students include panic disorder with and without agoraphobia, social phobia, obsessive compulsive disorder, and generalized anxiety disorder. Psychological treatment consists of short-term cognitive behaviour therapy (CBT), where clients are typically seen weekly over 12 weeks.

Training of psychology practicum students includes administering structured clinical interviews for diagnostic assessment of Axis I disorders, learning to discern suitability for short-term CBT, developing clinical decision making skills, learning how to effectively communicate/collaborate with other health professionals, and training in empirically supported treatments.

Also, practicum students are expected to become a valued part of the treatment team, and to become familiar with the relevant clinical and research literature. Depending on the practicum students' interests and experience, opportunities to participate in clinical research projects or to develop new projects are available as time permits.

### **CBT CLINIC - DEPRESSION**

Supervisor: Lance Hawley, Ph.D., C. Psych.

This rotation is conducted in the Cognitive Behaviour Therapy (CBT) Unit of the Mood and Anxiety Program at the Clarke Site. The CBT Unit is a high demand clinical/research outpatient treatment clinic that offers specialized training in short-term cognitive therapy for mood disorders (patients are seen over 15-20 weeks) and mindfulness-based cognitive therapy (MBCT) for the prevention of depressive relapse. All clients complete a comprehensive, multi-axial diagnostic intake assessment, and suitability for cognitive therapy is also assessed as part of the initial evaluation procedure. The goals of the CBT Unit involve the provision of highly refined and well-researched clinical services, designed to optimize treatment response. Ongoing research investigations are conducted to evaluate treatment methods and to investigate vulnerability to psychological disorders. Given the clinical research role of this unit, patients are often concurrently participating in research trials which have a focus on the investigation of relapse and recovery following treatment. A current orientation of this unit involves the study of vulnerability to major depressive disorder and the identification of cognitive markers as related to treatment efficacy. This unit also serves an important academic and teaching function for continued training of psychiatric residents and other mental health professionals who are interested in learning about the cognitive model of emotional disorders.

Training opportunities on the Cognitive Behaviour Therapy Unit involve developing skills in clinical assessment, diagnostic interviewing, and provision of cognitive-behavioral treatment (in both individual and group format) for clients experiencing Major Depressive Disorder. Interns will gain proficiency in the administration of the Structured Clinical Interview for the DSM-IV (SCID-IV) and they will also learn to administer the treatment suitability interview for determination of suitability for short-term cognitive treatment. In addition, there is a strong emphasis on the importance of case formulation, using a comprehensive model of emotional disorders. Finally, interns who are interested in mindfulness based CBT (MBCT) may choose to have introductory exposure to this paradigm. Supervision includes a minimum of two hours per week of individual supervision, group supervision, as well as weekly clinical and assessment rounds that include all clinic staff.

The main focus of this internship rotation involves collaborating with clinical students in order to further develop their ability to provide a comprehensive multi-axial diagnosis, while considering optimal treatment suitability (e.g., considering treatment format: individual vs. group, acute phase treatment vs. relapse prevention treatment). During the practica, clinicians develop strong case formulation skills, in order to optimally apply CBT principles to complex diagnostic

presentations. Related training goals involve understanding the role of cognitive vulnerability factors, while considering the interaction between pharmacotherapy and psychological treatment of the disorder. Opportunities for participation in research are also available; however, this is determined on a case-by-case basis, in consideration of the clinicians' overall caseload as well as considering additional clinical opportunities offered in this clinical service that the clinician may choose to be involved in.

Program Consultant: Zindel V. Segal, Ph.D., C.Psych.

### **BORDERLINE PERSONALITY DISORDER CLINIC**

Supervisors: Shelley McMain, PhD., C.Psych.  
Andrew Ekblad, PhD., C.Psych

The Borderline Personality Disorder (BPD) Clinic is an outpatient program serving multi-disordered individuals with borderline personality disorder who are 18 years or older. The Clinic offers specialized training in the delivery of Dialectical Behaviour Therapy. The standard DBT modes of therapy offered in the Clinic include weekly individual, group skills training, after-hours telephone consultation and therapist consultation. Family skills groups are also offered. Treatment entails a team approach and requires a one-year commitment by clients.

In this placement, students primarily gain experience in delivering DBT individual and group skills training as well as crisis management. Interns are also involved in conducting diagnostic and suicide assessments. Students also participate in a weekly therapist consultation team meeting. Students are expected to become familiar with the relevant research. The BPD Clinic is an active clinical, research, and training centre. Research interests of the team include the evaluation of treatment outcome, the relation of psychotherapy process to outcome, and the role of emotion in psychotherapy. Participation in research activities is available as time permits.

### **DAY TREATMENT PROGRAM**

Supervisor: Adele Efendov, Ph.D., C. Psych.

The Day Treatment Service provides treatment to clients with mood and anxiety disorders that have been recently discharged from an inpatient stay or who require more intensive treatment than what is typically provided in traditional outpatient settings. This service has two streams, both offered at the Queen Street Site. The Recovery Connections Program offers clients an opportunity to participate in a supportive outpatient program that focuses on activation, socialization, and structure.

The Intensive Day Treatment Program is an eight-week group program designed to reduce symptoms, enhance coping through skills development/education, and support client functioning in the community. The Intensive Program has a 4+ week pre-intensive phase for orientation to groups and programming, and a 4-week aftercare phase for continued support. Clients participate in group treatments including support, activation, and relapse prevention.

Students will have the opportunity to observe and co-facilitate group treatment and conduct intake assessments within a multidisciplinary team setting (e.g. psychiatry, psychology, occupational therapy, social work, and nursing). Students might also have the opportunity to provide individual treatment to clients in the Mood and Anxiety Inpatient Unit and Alternative Milieu Setting depending on their interests and abilities. In addition to weekly individual

supervision, students will participate in the DTP clinic rounds and be provided with direct clinical feedback through live and/or one-way mirror observation of groups and audiotaping of individual sessions.

### **DUAL DIAGNOSIS PROGRAM**

Supervisors: Anna M. Palucka, Ph.D., C. Psych.  
Margaret Reid, Clin.Psy.D., C. Psych.

Practicum opportunities exist in the Dual Diagnosis Program for students interested in working with adolescents and adults with developmental disabilities (intellectual disability, autism spectrum disorders) and mental health issues. The program comprises of two outpatient community-based services, a 10-bed inpatient unit and the Day Treatment Program (both located at the Queen Street Site). The placement allows for participation in all the components of the program.

The treatment model is based on an interdisciplinary biopsychosocial approach to client care. The clinical teams have a wide representation of mental health disciplines including psychiatry, psychology, OT, behavior therapy, recreational therapy, social work and nursing. The placement offers a rich interprofessional experience (IPE) as well as opportunities for engagement in

formal IPE activities.

Referrals to program involve a wide spectrum of clinical conditions such as mood and psychotic disorders, anxiety disorders, personality and impulse control disorders, autism spectrum disorders as well as a range of intellectual disability. Clinical opportunities for students include individual therapy (only some clients are able to participate in individual therapy, however), group therapy in the Day Treatment Program (e.g., outpatient group, relaxation training, women's/men's group), assessment (cognitive, behavioral, diagnostic, and personality) as well as consultations to service providers (e.g., other programs at CAMH, hospitals, forensic services, group homes) and families, and crisis planning. Supervision is provided on an individual basis, as well as through observation at team meetings/case conferences.

### **SCHIZOPHRENIA PROGRAM**

Through its 200+ inpatient beds and 15 ambulatory services, the Schizophrenia Program provides care at all stages of the illness. Services include prevention, treatment for first episode psychosis, Medication Assessment Program for Schizophrenia (MAPS), monitoring and management of co-occurring metabolic problems, rehabilitation, and care for adults with severe and persistent mental illness.

#### **Assessment Service**

Supervisors: Mahesh Menon Ph.D., C.Psych.  
Sean Kidd, Ph.D., C.Psych.

Practicum students will have the opportunity to participate in the Schizophrenia Program psychological assessment service. In this service they will gain experience in clinical interviewing, administering and interpreting psychological and neuropsychological assessment tools, writing comprehensive assessment reports, and providing feedback to clients, family members, and

service providers. Assessments address questions related to community functioning (e.g., psycho-educational and psycho-vocational assessments) and issues of diagnosis and comorbidity among persons with psychosis. Weekly supervision meetings will be held with students and there are opportunities to attend a range of clinical rounds and interdisciplinary team meetings.

### **Cognitive Behaviour Therapy Service**

Supervisors: Faye Doell, Ph.D., C.Psych. (Supervised Practice)  
Sean Kidd, Ph.D., C.Psych.

The rotation in the Cognitive Behaviour Therapy Service of the Schizophrenia Program offers a unique training opportunity for students who are interested in gaining experience working therapeutically with individuals with severe and persistent mental illness. Practicum students will receive intensive training in CBT for Psychosis, and will have the opportunity to participate in weekly individual supervision as well as group supervision with a multidisciplinary team of clinicians. Students will carry a small caseload of individual clients, and will also have the opportunity to participate as co-facilitator of CBT for psychosis therapy groups offered through both our outpatient services and Partial Hospital Program.

## **LAW AND MENTAL HEALTH PROGRAM**

The Law and Mental Health Program was one of the first forensic centers established in Canada and continues to be at the forefront of research and treatment innovations. The Law and Mental Health Program specializes in the assessment and treatment of individuals who have ongoing involvement with the legal system.

### **Adult Forensic Outpatient Service**

Supervisor: John Arrowood, Ph.D., C.Psych.

The Adult Forensic Outpatient Service is a clinical research outpatient unit, which specializes in the assessment and treatment of individuals involved in criminal and civil legal proceedings as well as occupational discipline procedures.

Clinical activities in which students are involved include diagnostic assessment, assessment of Posttraumatic Stress Disorder, assessment of psychopathic personality, clinical and actuarial assessment of risk for reoffense, and assessment of risk for violence in the workplace. These assessments sometimes include evaluation for of police officers for fitness of duty as well as evaluation of physicians and attorneys for fitness of practice. Students will become familiar with the psycholegal standards in forensic practice and in reporting to attorneys and the courts.

Depending on the students' level of experience they may also take on psychotherapy clients and co-facilitate treatment groups in the sex offender treatment program. Supervision is provided on an individual basis as well as in team meetings and case conferences. Additionally, Practicum Students will have the opportunity to attend the Law and Mental Health seminar series.

### **Adult Forensic Inpatient Service**

Supervisor: Carolyn Abramowitz, Ph.D., C.Psych.

The Law and Mental Health Program is comprised of several assessment and rehabilitative

inpatient units that serve mentally ill individuals who are involved with the legal system. Relevant legal issues include clients' fitness (competency) to stand trial and/or their criminal responsibility (legal defense) for their crimes.

Specialized clinical activities in which practicum students are involved include the assessment of intellectual, cognitive, and neuropsychological functioning, personality, and malingering. In addition, practicum students would have the opportunity to learn necessary skills for the assessment of psychopathy and risk for future offending.

Students will become familiar with the psycholegal standards involved in forensic assessment and reporting to the courts; in addition, he or she will be exposed to the dispositions from relevant legal bodies, such as the Ontario Review Board, that guide and monitor the supervision and clinical care of our rehabilitation clients. Opportunities for individual and group therapy are available on a variety of topics (e.g., substance abuse, anger management, risk management, symptom management) according to students' interests. Supervision is provided on an individual basis.

### **Clinical Sexology Program**

Supervisor: James Cantor, Ph.D., C.Psych.

At the start of the placement, students focus on assessment, using standardized instruments (primarily neuropsychological) with patients undergoing sexological assessment in the Kurt Freund Laboratory. The patients include those being referred after having committed one or more sexual offenses (e.g., sexual interference with a child, sexual assault, or possession of child pornography) and potentially paraphilic individuals who report difficulty integrating their sexual interests into their lives in a healthy manner. The placement is ideal for students pursuing or considering careers in either forensic psychology, neuropsychology, or sexology.

Students typically assess approximately 75 patients over the course of the placement. Trainees often report that the structured nature of the assessments is helpful at the pre-doctoral stages of their training and that the high volume of assessments has been very useful experience for subsequent clinical placements.

As the term progresses, students may begin to participate in psychotherapy groups, according to their prior experience and their home programs' requirements. Previous students have received additional training in gender identity concerns and transsexualism through arrangements with the Gender Identity Clinic of the Centralized Assessment and Treatment Services of CAMH). Other trainee activities include participation in clinical case conferences and attendance at departmental and hospital-wide functions.

For more information, see [http://individual.utoronto.ca/james\\_cantor](http://individual.utoronto.ca/james_cantor).

### **WOMEN'S PROGRAM**

Supervisor: Donna Akman, Ph.D., C. Psych.

The Women's Program offers services for women with complex mood and anxiety disorders who often have a history of trauma and/or addictions. The program provides both inpatient and outpatient treatment. The approach is trauma-informed and integrates psychotherapeutic, psychopharmacological, and psycho-educational modalities of care. The Women's Program is

staffed by an interdisciplinary team from psychiatry, psychology, nursing, occupational therapy, therapeutic recreation, and social work.

Clinical activities in which students are involved include providing time-limited individual outpatient therapy, co-facilitating inpatient and outpatient groups, and conducting psychodiagnostic assessments. Students are expected to participate in clinical rounds, team meetings, and educational events.

### **WORK, STRESS AND HEALTH PROGRAM**

Supervisors: Jason Bacciochi, Ph.D., C. Psych.

Hester Dunlap, Ph.D., C. Psych.

Donna Ferguson, Ph.D., C. Psych.

Niki Fitzgerald, Ph.D., C. Psych.

Katy Kamkar, Ph.D., C. Psych.

This rotation is conducted in the Work, Stress and Health Program (WSH) of the Mood and Anxiety Program. The WSH is a large multidisciplinary outpatient clinic that provides comprehensive independent assessment and treatment for individuals who develop primary anxiety or mood disorders in response to workplace related traumatic events.

The program provides students with the rare training opportunity to conduct independent comprehensive psychodiagnostic assessments for third parties within a civil-legal context. These assessments involve the thorough evaluation of Axis I psychopathology, Axis II personality pathology, normal personality, and response style distortion (i.e. malingering or defensive responding) utilizing structured and semi-structured interviews (e.g. SCID-I, CAPS, SIPD, M-FAST, SIRS), as well as self-report psychometrics (e.g. MMPI-2, PAI, NEO PI-R). The WSH assessment service sees a wide range of diagnostic presentations, but the majority of those assessed suffer from anxiety (e.g. PTSD, Panic Disorder), mood, and somatoform disorders. The WSH treatment service specializes in the treatment of primary anxiety and mood disorders (PTSD, depression and a range of other anxiety disorders) utilizing CBT. In addition to receiving supervision in the provision of individual evidence based CBT protocols for anxiety and mood disorders, students will have the opportunity to actively participate in our group program as well.

Both the assessment and treatment services function within a multidisciplinary team approach and students work closely with the professionals from other mental health disciplines (e.g. psychiatry, occupational therapy) in the provision of services. WSH clients are of diverse ethnic and cultural backgrounds. Students will participate in the clinic's regular clinical and educational rounds.

### **CLINICAL TRAINING PROGRAM IN PSYCHOLOGY**

Supervisor: Lena C. Quilty, Ph.D., C.Psych.

This rotation is conducted in the Clinical Research Laboratory (CRL) at the College Street site. The CRL is a dynamic clinical, research and training setting, conducting a variety of basic clinical research and treatment outcome studies. Over the past 5 years, the CRL has received an average of 240 referrals for basic clinical research studies per year, principally involving psychological assessments of mood, anxiety, substance use, impulse control and personality disorders. Over the past 5 years, the CRL has received an average of 290 referrals for treatment outcome studies per year, principally involving the treatment of depression via brief interpersonal therapy, cognitive behavioural therapy,

or antidepressant medication. The CRL also provides consultation and training to other mental health professionals. Practicum students may be involved in assessment and/or therapy, as determined by student training, experience and interests, as well as current research initiatives.

Assessment practicum students receive in-depth training, supervision and experience in psychodiagnostic assessment of both Axis I and II disorders, including the *Structured Clinical Interview for DSM-IV, Axis I Disorders, Patient Form* (SCID-I/P; First et al., 1995). Students also receive training in structured interview, self-report, informant-rated, and performance-based measures of personality, cognition, motivation, impairment, and response bias. Supervision is provided on an individual and group basis, as well as through clinical team meetings. Training and supervision experience may be available for advanced students. Therapy practicum students receive in-depth training, supervision and experience in the provision of cognitive behavioural therapy for depression. Opportunities also exist for time-limited supportive therapy. Supervision is provided on an individual basis. Peer observation and educational events may also be available. Practicum students will develop specific skills in empirically validated instruments and techniques, as well as general skills in clinical interviewing and decision making and effective communication with other health professionals.

## CLINICAL PRACTICUM FACULTY SUPERVISORS

**Carolyn Abramowitz, Ph.D., C.Psych.,** Finch University of Health Sciences / The Chicago Medical School, 2005. Clinical and Research Interests: psychopathy, psychological and neuropsychological mechanisms of psychopathy and risk, assessment of dangerousness, assessment and treatment of sex offenders, externalizing disorders, neuropsychology of psychiatric disorders.

**Donna Akman, Ph.D., C.Psych.,** University of Toronto, 2003. Clinical and Research Interests: women's mental health, feminist psychotherapy, social determinants of mental health, program development and evaluation.

**Brendan Andrade, Ph.D., C.Psych.,** Dalhousie University, 2006. Clinical Interests: assessment and treatment of children and adolescents with disruptive behaviour and associated mental health concerns. Individual, family, and group based cognitive-behavioural intervention. Research Interests: social-cognitive and familial contributions to childhood disruptive and aggressive behaviour, ADHD, peer relationships, and clinic- and community-based prevention and intervention programs for disruptive children.

**John S. Arrowood, Ph.D., C.Psych.,** State University of New York at Binghamton, 1994. Clinical Interests: forensic assessment including the assessment of dangerousness and psychopathic personality, assessment of fitness for duty or special assignment in police officers, and assessment and cognitive/behavioral treatment of Posttraumatic Stress Disorder (PTSD). Research Interests: historical antecedents of antisocial behavior and the behavioral and pharmacological treatment outcome in PTSD.

**Jason Bacchiochi, Ph.D., C.Psych.,** University of Toronto, 2005. Clinical interests: psychological assessment and treatment of mood and anxiety disorders. Research interests: assessment and identification of malingered psychopathology; use of structured psychometric instruments in differential diagnosis, and the relationship between individual differences a vulnerability to psychopathology.

**James M. Cantor, Ph.D., C.Psych.,** McGill University, 1999. Dr. Cantor's clinical activities focus primarily on the assessment of persons dealing with illegal or clinically significant sexual behaviours and interests such as pedophilia and other paraphilias, (so called) sexual addictions, and persons with sexual orientation or gender identity concerns. His program of research investigates the biological contributors to sexual orientation, gender identity, and paraphilic sexual interests, using a variety of brain imaging, neuropsychological, and psychophysiological techniques. He also founded and manages the *NewPsychList*, an internet discussion list for over 4,500 recent and soon-to-be doctorates in psychology. More information available at [http://individual.utoronto.ca/james\\_cantor](http://individual.utoronto.ca/james_cantor).

**Emily Cripps, Ph.D., C.Psych.,** University of Waterloo, 2004. Clinical Interests: Assessment and treatment of male and female forensic inpatients; assessment and treatment of co-morbid anger and substance abuse problems using Dialectical Behaviour Therapy; sexual "addiction." Research Interests: Assessment and treatment of pathological gambling; assessment and treatment of female forensic inpatients; sexual "addiction."

**Faye Doell, Ph.D., C.Psych. (Supervised Practice),** York University, 2010. Clinical and Research Interests: assessment and treatment of individuals with Schizophrenia-spectrum disorders, with an emphasis on Cognitive Behavioural Therapy and Motivational Interviewing.

**Hester Dunlap, Ph.D., C. Psych.,** University of Toronto, 2005. Clinical Interests: Psychological assessment and treatment of PTSD, anxiety disorders, and depression with Cognitive Behavioural Therapy. Research Interests: Risk and protective factors associated with chronic posttraumatic stress.

**Adele Efendov, Ph.D., C. Psych.,** University of Toronto (OISE), 2006. Clinical Interests: Assessment and treatment of mood and anxiety disorders with Cognitive Behavioural and Interpersonal Therapy (individual and group format), objective personality assessment, assessment of PTSD and malingering.

**Andrew Ekblad, Ph.D., C.Psych.,** Duke University, 2009. Clinical Interests: the treatment of borderline personality disorder, and suicidal behaviour. Special interest in working in Emergency Department settings. Research Interests: Adaptations of Dialectical Behavior Therapy; the treatment of suicidal behaviour in Emergency Departments; Mindfulness.

**Donna Ferguson, Psy.D., C.Psych.,** Adler School of Professional Psychology, 2003. Clinical Interests: assessment and treatment of depressive and anxiety spectrum disorders. Individual and group cognitive behavioural treatment of depressive and anxiety disorders. Research Interests: assessment and treatment of concurrent disorders, particularly anxiety disorders and/or co-morbid depressive disorders with gambling pathology.

**Niki Fitzgerald, Ph.D., C. Psych.,** University of Windsor, 2006. Clinical Interests: assessment and treatment of depression and anxiety-spectrum disorders with a particular interest in PTSD. Research Interests: the role of psychosocial factors on the presentation of depressive, anxiety, and pain disorders.

**Lance Hawley, Ph.D., C. Psych.,** McGill University, 2006. Clinical Interests: Diagnostic assessment and empirically informed treatment of adolescents and adults experiencing Axis I mood or anxiety symptomatology. Research Interests: Clarifying process and outcome elements of empirically informed treatment interventions for mood and anxiety disorders; information processing and cognitive vulnerability models; examining non-specific (e.g., therapeutic alliance, personality) and specific (therapeutic skills) factors influencing treatment response; utilizing novel applications of statistical methodology to clinical practice (e.g., modeling longitudinal data).

**Liora Keshet, M.A., C.Psych. Assoc.,** Hebrew University of Jerusalem, 1995. Clinical Interests: assessment and consultation of developmental and learning disabilities in children and adolescents.

**Sean Kidd, Ph.D., C.Psych.,** Clinical Interests: complex trauma, mindfulness, and emotion-focused therapy. Research Interests: examining mechanisms of resilience among marginalized persons and the effectiveness of psychiatric rehabilitation interventions

**Susan L. Lambert, Ph.D., C. Psych.,** York University, 2009. Clinical and Research Interests: Comprehensive assessment of children and adolescents with fire setting behaviour and associated mental health concerns. Treatment with children, adolescents, and caregivers using a CBT approach. Program development and evaluation of risk factors contributing to fire setting.

**Judith M. Laposa, Ph.D., C.Psych.,** University of British Columbia, 2005. Clinical Interests: assessment; individual and group cognitive therapy for anxiety disorders. Research Interests: measurement and evaluation of cognitive models of anxiety disorders, and mechanisms in treatment response to cognitive behaviour therapy, with particular interests in PTSD, social phobia, and obsessive-compulsive disorder.

**Sherri A. MacKay, Ph.D., C.Psych.,** University of Toronto, 1985. Clinical Interests: Assessment and treatment of antisocial children, adolescents, and their families. Research Interests: Program development, risk assessment and brief intervention for child and adolescent fire setters.

**Shelley McMain, Ph.D., C.Psych.,** York University, 1995. Clinical Interests: the treatment of borderline personality disorder, suicidal behaviour, concurrent mental health and addiction problems. Research Interests: relationship of psychotherapy process to outcome, the efficacy of Dialectical Behavior Therapy, treatments for chronically suicidal patients and substance using patients with borderline personality disorder.

**Mahesh Menon, PhD, CPsych.** University of Cambridge, 2005. Clinical Interests: Neuropsychological assessment, CBT for psychosis. Research Interests: Brain imaging (particularly fMRI) and cognitive approaches examining symptomatology in schizophrenia.

**Allison Owen-Anderson, Ph.D., C.Psych.,** OISE/University of Toronto, 2006. Clinical interests: psychological assessment and treatment of gender identity disorders and transvestic fetishism, child psychotherapy, parent psychotherapy. Research interests: empathy in boys with gender dysphoria, expressed emotion in families of children with gender dysphoria, Internet use and how adolescents with gender dysphoria negotiate their gender identities online.

**Anna M. Palucka, Ph.D., C.Psych.,** University of Toronto (OISE), 1997. Clinical and Research Interests: assessment of developmental disabilities, diagnostic assessment of psychopathology in developmentally disabled individuals, treatment interventions in autism spectrum disorders, forensic issues and intellectual disability.

**Lena C. Quilty, Ph.D.** University of Waterloo, Clinical and research interests: include psychological assessment and treatment of mood and anxiety disorders. Research interests include the role of personality and cognition as mediators and moderators of treatment outcome in depression, the hierarchical structure of personality and psychopathology, and the psychometric evaluation of measures of psychopathology and other individual difference variables.

**Margaret Reid, Clin. Psy.D.,** University of Birmingham, UK, 1999. Clinical and research interests: The assessment and treatment of individuals with intellectual disabilities (ID) and mental health problems, in particular, anger management, and the treatment of clients with ID diagnosed with personality disorders. Other interests include treatment of addictive behaviours: harm reduction, motivational interviewing, and relapse prevention.

**Carol Root, Ph.D., C.Psych.,** OISE/University of Toronto, 2002. Clinical and Research Interests: psycho-educational, diagnostic, social-emotional, and risk assessments, developmental psychopathology, risk factors and intervention methods related to juvenile fire setting, parenting and children's emotional development.

**Tracey A. Skilling, Ph.D., C.Psych.** Queen's University, 2000. Research and Clinical Interests: causes and correlates of serious antisocial behaviour in children and adolescents; treatment program development and evaluation.

**Hayley Wood, Ph.D., C.Psych.,** OISE/University of Toronto, 2009. Clinical and research interests: psychological assessment of gender identity disorder (GID), child and parent psychotherapy in GID, childhood temperament, and the expression of comorbid GID in individuals with autism spectrum disorders.

**Percy N. Wright, Ph.D., C. Psych.,** York University, 1991. Clinical and Research Interests: intellectual and personality assessment with adult and adolescent offenders, assessment of malingering and deception, assessment of violence risk and the relationship between psychopathology and violence.

**Kenneth J. Zucker, Ph.D., C.Psych.,** University of Toronto, 1982. Clinical and Research Interests: gender identity disorders in children and adolescents; attachment and child psychopathology; individual child psychotherapy; parental counseling.

**Centre for Addiction and Mental Health**  
Psychology Practicum Application Form  
For 2012-2013 Academic Term

(Applications are due on or before **February 1, 2012**)

1. Name:

Address:

Telephone:

Date of Birth:

E-Mail Address:

Sex:

2. Educational Background

University	Dates of Attendance	Major	Degree Granted/ Expected Completion
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3. Name, Address, Telephone Number, and E-mail of Director of Clinical Training

4. Fall-Winter Practicum \_\_\_\_ Spring-Summer Practicum \_\_\_\_  
Anticipated start of practicum: \_\_\_\_\_

5. Based on the aforementioned descriptions provided, please rank order of the following rotations you would be interested in participating in (e.g., 1= 1<sup>st</sup> choice [most preferred rotation], 2= 2<sup>nd</sup> choice, 3= 3<sup>rd</sup> choice, etc.).

**Please note that there are:**

- (1) Child, Youth and Family, and**
- (2) Adult rotations**

**You do not have to rank all the programs, only rank those in which you are interested.**

### **CHILD, YOUTH AND FAMILY TRACK**

Adolescent Service  
Better Behaviours Service  
Gender Identity Service  
Mood and Anxiety Disorders Service  
Psychometry Service  
The Arson Prevention Program for Children (TAPP-C)  
Youth Addiction (in Concurrent Disorders Service)

### **ADULT TRACK**

Adult Forensic Outpatient Service (in Law and Mental Health Program)  
Anxiety Disorders Program

Borderline Personality Disorder Clinic

Clinical Sexology Program

Clinical Training Program in Psychology

Dual Diagnosis

Eating Disorder and Addiction Clinic (NO PLACEMENT AVAILABLE FOR THE FALL  
2012/2013 TERMS)

Mood Disorders Program

Schizophrenia Program

Women's Program

Work, Stress and Health Program