Clinical Science Program
in Child and Adolescent Psychology

Student Guide

2019-2020

Statement of Student Commitment and Responsibility

Students indicate their understanding and acceptance of the contents of this FIU Clinical Science Student Guide when accepting an offer of admission to our PhD Clinical Science Program in Child and Adolescent Psychology. Students are held to the requirements stipulated by the Student Guide edition that was active at the time of their admission into the program, unless otherwise indicated; however, students are strongly encouraged to adopt the requirements of the most current Student Guide. In addition, students are required to attend the CCF clinic policies and procedures training, held annually early in the fall semester by Dr. Erika Coles.

By signing below, I acknowledge that I will be held to the curriculum, requirements, and procedures stipulated in the Student Guide 7th Edition 2019-2020, as well as attend the policies and procedures training:

Printed Name	
Signature	
Date	

Note: There may be additions and modifications to the student guide that reflect differences from the prior edition distributed during recruitment. Please read this new edition of the Clinical Science Student Guide carefully and thoroughly, ask any questions you may have, and submit this page, with signature, to the DCT by the end of the first month of classes.

By signing below, I acknowledge that I have received and reviewed the APA Ethical Principles for Psychologists and Code of Conduct. In addition, I have attended the CCF Policy and Procedures Orientation that includes information about Florida State laws, HIPAA, confidentiality, and other applicable ethical principals relevant to clinical work. I acknowledge that I will be held accountable to these principles and expectations.

Printed Name	
Signature	
Date	

Table of Contents

I. Clinical Science in Child and Adolescent Psychology

A. History and Vision
B. Philosophy of Education and Mission Statement
C. Education and Training Model: Clinical Science
D. Goals and Objectives

IA. History and Vision

Welcome to The Clinical Science Ph.D. Program in Child and Adolescent Psychology! The clinical science program enrolled its first cohort of students in Fall 2010, joining developmental, legal, and industrial /organizational programs in the Department of Psychology at Florida International University. The department is housed within the School of Integrated Science and Humanity in the College of Arts and Sciences. Since the program's inception we have grown considerably, and we encourage current and prospective students to peruse our website closely for more information about our program, faculty, and students: http://cscap.fiu.edu/.

History of the Program

By specializing in child and adolescent psychology, we joined only a small number of clinical science programs in the United States. This decision reflects the maturity of our field in this professional arena (e.g., board certification through the American Board of Clinical Child and Adolescent Psychology; transition of Clinical Child and Adolescent Psychology from a Section of Division 12 to its own independent Division 53, Society of Clinical Child and Adolescent Psychology) represented by a host of scientific conferences, academic journals, and newsletters uniquely focused on the mental health of children and families. It also reflects the cumulative body of theoretical and empirical knowledge produced over decades regarding the development, maintenance, prevention, and treatment of mental health problems for children and adolescents. Drawing on this rich literature, clinical science in child and adolescent psychology necessitates a solid foundation and breadth of training in (1) developmental psychology emphasizing the dynamic and complex interplay between the individual child and their ecology (e.g., parents, family, peers, schools, community), (2) developmental psychopathology emphasizing adaptation, coping, and resilience, (3) cultural diversity, in particular as it relates to access, quality, and impact of mental health care, and (4) methodology and statistics. Armed with knowledge and skills in these areas, students will be well positioned to advance science that contributes to reducing the unmet mental health burden facing children and families in this country.

Research Training

Our program is a mentor-based program in which students apply to work with an individual faculty member. A mentor-based program helps ensure that all incoming students become actively involved in research as soon as they begin the program. The mentorship-collaborative relationship includes intensive involvement in faculty research, support for students to develop their own research niche within the context of faculty-directed investigations, and extensive opportunities for collaboration and writing across investigative teams. Students receive guidance in every aspect of conducting research, including developing ideas, designing and conducting studies, and dissemination, presenting papers at national conferences and publishing papers in scientific journals. In addition, although we expect to provide assistantships to all graduate students, we support students to develop their own skills in grantsmanship via preparation of their required dissertation grant application. These activities and skills will position students to succeed in the research and academic positions that we intend for FIU clinical science graduates to pursue.

Clinical Training

We acknowledge the inextricable link between research and practice, by encouraging students to bring their clinical experience to bear on research questions, and to bring an empirical lens to the assessment and treatment of psychological disorders. Clinical training follows a clinical-science philosophy in which service delivery is based firmly on research, implemented in measureable ways, and modified based on ongoing assessment of outcomes. Toward that end, students will receive extensive academic and experiential training and supervision in empirically supported assessments and interventions. Core faculty has broad collective expertise in the major problem areas of childhood and adolescence, including ADHD, anxiety, conduct problems, depression and suicidal behaviors, and risky problem behaviors. Many are conducting community-based, school-based, and clinic-based interventions. Students have extensive opportunities for clinical training through partnership with the FIU Center for Children and Families, an interdisciplinary center focused on clinical research in child and adolescent mental health.

Center for Children and Families

Located on the beautiful Modesto A. Maidique Campus, the Clinical Science Program maintains close partnership with the Center for Children and Families (CCF; www.ccf.fiu.edu) Faculty from departments and schools across FIU are affiliated with the CCF. Physical facilities and resources cover 11,000 square feet, with 10 testing and clinical treatment rooms (with observation windows, wired for sound and video) ranging in size from individual testing rooms to very large group playrooms, two medical examination rooms, waiting rooms for parents and children, a journal library with a large collection of assessment and treatment materials and treatment manuals, two conference rooms, 29 offices, two large, cubicle-equipped (each with a phone and networked computer) bullpen rooms for research staff and students. Faculty, students and postdoctoral trainees conduct large- and small-scale research and clinical activities with children and families whose needs reflect externalizing (ADHD, aggression, risky behaviors) and internalizing (anxiety, mood disorders) dimensions of child and adolescent psychopathology.

Miami

The diversity of Miami's population and the size of Miami-Dade and Broward school districts (500,000 children) provide ample potential for research recruitment and clinical training. The Clinical Science Program has extensive relationships with Miami-Dade County Public Schools, primary care physicians and Nicklaus Children's Hospital, and with mental health facilities in Miami-Dade and Broward counties, affording opportunities to conduct activities not only on-site but also in community, school, and mental health settings across the South Florida community.

IB. Education and Training Model: Clinical Science

Our program's emphasis is on science and underscores our commitment to applying scientific method and evidence to further the design, delivery, and evaluation of assessment, prevention, and treatment procedures for use with children from infancy to adolescence. We are not just teaching students how to *do science*, but how to *be scientists*, both for conducting research and delivering clinical care. We adhere closely to the principles and values of clinical science, as articulated by the Academy of Psychological Clinical Science, of which our program has been a member since June 2014. Our goal is to produce researchers and scholars who will contribute to advancing scientific knowledge in theoretically strong, methodologically rigorous, and innovative ways. At the same time, we wish to produce clinical scientists whose work holds significant public health impact. Toward this end, we are committed to preparing students to conduct research with strong potential for external funding, by aligning our vision for training with criteria and considerations that influence manuscript reviews and grant reviews at federal, state, and local levels.

Significance

Coursework, in particular the first year sequence entitled Psychological Clinical Science, offers a historical lens coupled with emphasis on the most current controversies in our field. Students are encouraged to build a research agenda that addresses the unmet mental health burden in our country, with particular focus on historically disenfranchised and underrepresented families from diverse racial and ethnic backgrounds and families living in poverty. Research mentorship prepares students to ask urgent and critical questions that address a problem or barrier to progress in the field and to seek answers that advance knowledge and improve practice.

Innovation

Mentorship attends closely to shifting national priorities toward precision diagnostics, personalized intervention, target validation, and disruptive innovation in mental health. Students are required to submit a dissertation grant application reflecting their original research and encouraged to develop a proposal that utilizes novel theory, method, instruments, or interventions to shift current research or practice paradigms.

Investigator

Program milestones are designed to facilitate scholarship so that students emerge from the program with a record of accomplishment that demonstrates independent thinking, collaboration, and expertise in a primary area of research. Course electives are intended to build advanced analytic or interdisciplinary skills that reflect an era of team science and fading boundaries between disciplines. Students are encouraged to attend conferences where they can network, build new collaborations, and present their work on a national stage.

Approach

A rigorous curriculum in research methods and analysis prepares students to accomplish the specific aims of their planned research. Students are expected to become familiar with a wide range of research designs and analytic tools, knowledgeable about their specific assumptions, and competent in their application to psychological data. A two-semester sequence in research methods prepares students to conduct and critically examine randomized controlled trials in addition to alternative designs (e.g., qualitative, mixed methods, adaptive, and benchmarking) especially suited for questions associated with transportability of assessment and intervention to usual care. Following a foundational three-course sequence in quantitative analysis, students select an advanced analytic elective most well suited to their program of research. Students are encouraged to give careful consideration to specific design and analysis features including setting, sampling, and measures that appropriately balance internal and external validity.

Environment

Through professional development and research mentorship, students are encouraged to explore the scientific environment of the university, acquaint themselves with mechanisms of institutional support, including equipment and physical resources available to support their planned research. Additional resources are available through the department of psychology and through partnership with the FIU Center for Children and Families (CCF), an interdisciplinary center focused on clinical research on child and adolescent mental health. The CCF maintains partnerships with Miami-Dade County Public Schools, The Children's Trust (largest funder of child-focused services in the county), and several primary care and specialty physicians and mental health agencies. Opportunities for students to build collaborations with research and community colleagues within FIU and external to the university are extensive through advanced clinical practicum and research mentorship.

Human Subjects

Significant attention is allocated throughout training to considerations of diversity, ethics, and protections for human subjects. Discussions of diversity and ethics are woven throughout the course curriculum and are represented by clear and specific learning objectives as part of each core clinical course. Protection for human subjects from research risk relating to their participation is introduced early through IRB training and revisited often during courses and research mentorship, with a large focus on risk-benefit ratios, importance and urgency of the knowledge to be gained, and planning for data and safety monitoring procedures.

IC. Aims and Objectives

The Clinical Science Program in Child and Adolescent Psychology is designed to support all students to reach a minimum level of competence on each of the following learning goals and objectives, that have been informed by federal priorities for research and practice, literature on evidence-based mental health care, and competency benchmarks in professional psychology. Goals and objectives reflect the principles and values of clinical science, as articulated by the Academy of Psychological Clinical Science, and aligned with those articulated in the APA Guidelines and Principles. They align with the program vision to prepare students for careers in professional psychology that include research, education, and mental health service delivery.

Aim 1: Students will demonstrate competency to advance knowledge through research relevant to children and families in the discipline of psychological clinical science.

Objective 1a. Students will be able to synthesize literature and present a compelling rationale for stated hypotheses.
Objective 1b. Students will be able to generate an innovative and compelling set of research questions, with clear public health significance.
Objective 1c. Students will be able to plan and execute a sound and rigorous method for answering research questions.
Objective 1d. Students will be able to select and execute sound analytic approaches for their research questions.
Objective 1e. Students will be able to interpret and describe results and summarize conclusions, noting limitations to their method, implications for the field, and future research questions informed by the results.
Objective 1f. Students will be able to communicate their research orally.
Objective 1g. Students will be able to communicate their research in writing.

Aim 2: Students will demonstrate competency to deliver evidence-based clinical care for children and families.

Objective 2a. Students will be able to select, administer, score, and interpret psychological assessments for children and adolescents.
Objective 2b. Students will demonstrate ability to conduct a comprehensive clinical interview.
Objective 2c. Students will demonstrate ability to form a positive and productive therapeutic alliance with children and families.
Objective 2d. Students will apply data-informed decision making toward the case conceptualization and diagnosis of psychological disorders.
Objective 2e. Students will apply data-informed decision making to treatment planning for psychological disorders.
Objective 2f. Students will be able to deliver evidence-based treatment for psychological disorders.
Objective 2g. Students will use ongoing data-informed assessment of patient progress to inform treatment planning and termination.

Aim 3: Students will demonstrate knowledge in psychological clinical science.

<u>Objective 3a</u>. Students will demonstrate broad knowledge in areas of assessment and treatment related to psychopathology of childhood and adolescence.
<u>Objective 3b</u>. Students will demonstrate depth of knowledge in a defined area of growing expertise within the discipline of psychological clinical science.
<u>Objective 3c</u>. Students will demonstrate knowledge across broad and general areas of psychology (cognitive, affective, social, biological).
<u>Objective 3d</u>. Students will demonstrate knowledge of the history of psychology as a discipline.

Aim 4: Students will demonstrate professionalism in the research and practice of psychological clinical science.

<u>Objective 4a</u>. Students will apply ethical concepts and awareness of legal issues regarding professional activities with children, families, and communities.
<u>Objective 4b</u>. Students will demonstrate awareness, sensitivity, and skills in working professionally with diverse children, families, and communities.
<u>Objective 4c</u>. Students will display respectful interpersonal communication, openness to feedback, and effective use of research mentorship and clinical supervision.
<u>Objective 4d</u>. Students will demonstrate knowledge of strategies and awareness of benefits associated with interdisciplinary collaboration with other professionals in research and practice.

II. Who We Are

      A. Faculty
      B. Students

IIA. Faculty

The clinical science program includes nationally and internationally recognized faculty, as reflected by numerous awards, invited papers, and conference invitations. They publish at a high rate in leading journals within psychology, including APA journals and high profile interdisciplinary and specialty journals. They are influential in the field via activity on editorial boards, in professional organizations (e.g., APA, ABCT), NIH review committees, and advisory boards locally and nationally. The level of research activity is high and the level of research funding is strong, reflecting awards during the past few years from IES, NIMH, NICHD, and NIDA.

Core Faculty

Core faculty is required to participate in graduate education (teaching, research mentorship, clinical supervision) at minimum 50% time. They are either tenured or tenure-earning members of the Department of Psychology; their primary appointment is in psychology, and their primary program appointment is in the clinical science program. Core faculty must be a member of the graduate faculty as defined and determined by the University Graduate School, and they must have Dissertation Advisor Status, as defined and determined by the University Graduate School. The exception to this is the role of the current DCT, who is the Clinical Director of the Center for Children and Families and an Associate Clinical Professor. Responsibilities of core faculty include attendance at clinical faculty meetings, review of graduate student applications, and voting privilege on program decisions. Students receiving primary mentorship by core clinical faculty are eligible for university fellowships and department TA lines.

Dr. Daniel Bagner, Professor
Dr. Bagner is Director of the Early Childhood Behavior Lab (ECBL), where research focuses on examining interventions for young children and their families. Dr. Bagner is particularly interested in the prevention and treatment of externalizing behavior problems for infants and young children and other at-risk populations (e.g., developmental delay, poverty). Specifically, he focuses his work on enhancing the parent-child relationship in an effort to improve child outcomes. Dr. Bagner is the author of over 45 research articles and book chapters and has received grants from the National Institute of Mental Health and the National Institute of Child Health and Human Development to conduct his research.

Dr. Jon Comer, Professor
Dr. Comer directs the Mental Health Interventions and Technology (MINT) Program, an interdisciplinary clinical research laboratory devoted to expanding the quality, scope and accessibility of mental health care for youth. His program of research examines five areas of overlapping inquiry: (1) The assessment, phenomenology, and course of child anxiety disorders; (2) the development and evaluation of evidence-based treatments for childhood psychopathology, with particular focus on the development of innovative methods to reduce systematic barriers to effective mental health care in the community; (3) the psychological impact of disasters and terrorism on youth; (4) national patterns and trends in the utilization of mental health services and quality of care; and (5) psychosocial treatment options for mood, anxiety, and disruptive behavior problems presenting in early childhood. His work has received

current and past funding from the National Institute of Mental Health (NIMH), the International Obsessive Compulsive Disorder Foundation (IOCDF), APA Division 53 (Society of Clinical Child and Adolescent Psychology), the Anxiety Disorders Association of America (ADAA), the Mental Health Initiative (MINT), and the Charles H. Hood Foundation.

Dr. Erika Coles, Clinical Associate Professor, Clinical Director, Center for Children and Families, Director of Clinical Training

Dr. Coles is the Clinical Director of the Center for Children and Families. Her research and clinical work focuses on increasing the integrity with which teachers implement behavioral interventions in the classroom with children with or at risk for ADHD. A large portion of her work focuses on increasing the integrity and the use of behavioral interventions for ADHD in home, academic, and recreational settings.

Dr. Stacy Frazier, Professor

Dr. Frazier directs a program of NIMH-funded research that examines mental health promotion for families living in urban poverty through capacity building in the natural, neighborhood settings that support them. She collaborates with partners in schools, parks, and mental health agencies and with colleagues in public health, social work, organizational psychology, and school psychology to develop and test school- and out-of-school time models of community mental health practice that build on the strengths, respond to the needs, and respect the constraints of children's service settings. She utilizes both quantitative and qualitative research designs to develop and examine service models that emphasize workforce development and continuous quality improvement, with a particular emphasis on fidelity measurement that balances empirical rigor with clinical utility.

Dr. Raul Gonzalez, Professor

Dr. Gonzalez is Director of the Substance Use and HIV Neuropsychology (SUHN) Lab, where research focuses on the interplay of neurocognitive functions, drugs of abuse, and risky behaviors, often with participants with or at risk for HIV. These topics are linked by their frequent co-occurrence and an overlap in brain systems implicated in drug addiction and risky behaviors, as well as changes that may occur to these systems through the specific actions of drugs of abuse and HIV. A large portion of his research portfolio focuses on the neurocognitive effects of cannabis. The research being conducted at SUHN Lab aims to identify neurocognitive differences that may place individuals at risk for substance use disorders or that emerge from their use, in order to inform interventions designed to reduce drug addiction and the risky behaviors that may contribute to the spread of HIV. Dr. Gonzalez is also a Clinical Neuropsychologist with substantial experience conducting neuropsychological assessments in both English and Spanish among individuals with a range of neurological disorders.

Dr. Paulo Graziano, Associate Professor

Dr. Graziano is Director of the S.E.L.F.-Regulation Lab, where research focuses on the role of children's self-regulation as it pertains to School Readiness, Early Intervention, Learning, and Fitness (S.E.L.F.). He is particularly interested in how parental and environmental factors (e.g., teachers/classroom) may influence or moderate the impact of regulatory processes on adaptive functioning outcomes. Special emphasis is placed on the role of physiological (i.e., RSA suppression) and neurocognitive processes in the development of psychopathology (emphasis on

disruptive behavior disorders) as well as pediatric obesity. A large portion of his research focuses on developing and examining early interventions (e.g., behavioral parent training, summer programs) that can target children's self-regulation skills and subsequent adaptive and health related outcomes. Dr. Graziano has authored or co-authored a number of papers and his work has been supported by both federal grants (e.g., Institute of Education Sciences) and local agencies (e.g., The Children's Trust).

Dr. Katie Hart, Assistant Professor
Dr. Hart's research interests broadly focus on young children with or at-risk for ADHD and related disruptive behavior disorders. Primarily, her work addresses the development, evaluation, and dissemination of early interventions, with emphasis on school readiness during major developmental transition periods (i.e., the transition from preschool to kindergarten), and treatments across home, school, clinic, and community settings. She develops and examines interventions to increase attendance and adherence for families of children from low-income backgrounds; culturally competent interventions for families from Latino/Hispanic and Haitian backgrounds; and mental health policy as it relates to the dissemination of evidence-based interventions in school and community settings. Dr. Hart is Director of the Summer Treatment Program for Pre-Kindergarteners, a comprehensive 8-week summer treatment program for preschool age children with early behavior problems, and the Summer Reading Explorers Program, a 6-week summer reading intervention program for rising kindergarten, first, and second grade children from at-risk community settings. Dr. Hart has authored or co-authored a number of papers and her work has been supported by both federal grants (e.g., Institute of Education Sciences, Administration for Children and Families) and local agencies (e.g., The Children's Trust).

Dr. Dana McMakin, Associate Professor
Dr. Dana McMakin is the director of Research Exploring Motivational and Emotional Development in Youth (REMEDY), an interdisciplinary research group that uses conceptual models and tools (e.g. fMRI) from developmental neuroscience to inform interventions for adolescents with, or at risk for, problems related to controlling emotion and behavior (e.g. suicide, depression, anxiety, risky behavior). She is currently exploring two areas that she has identified as having high translational potential: 1) enhancing reward processing during the sensitive window of early adolescence to observe potential impacts on the onset, maintenance, and recurrence of depression, and 2) examining sleep as it relates to emotional processing (including emotional memory consolidation during sleep) and neurodevelopment in adolescents with, or at risk for, anxiety or depression. A key aim of this work is to identify opportunities to develop interventions that capitalize on neural plasticity during sleep to positively influence socio-emotional development.

Dr. Erica Musser, Associate Professor
Dr. Erica D. Musser is the director of the Assessing Behavior, Cognition, and Emotion Regulation in Childhood ADHD/Cannabis Abuse Lab (ABC-ERICA Lab). Dr. Musser's overarching research goal is to better elucidate the mechanisms linking emotion dysregulation and certain aspects of parenting behavior to attention-deficit/hyperactivity disorder (ADHD), as well as related externalizing behavior problems, including substance abuse. In order to do this, her research has utilized a multi-method approach, which has included behavioral ratings,

laboratory computerized testing, behavioral coding, and physiological measures of both autonomic and central nervous system activity. Dr. Musser's research focuses on two complementary areas. First, her work focuses on examining the association between child emotion dysregulation and specific symptoms of ADHD and other externalizing behaviors, e.g., substance abuse. Second, her research focuses on the role of parent emotion regulation in shaping parental responsivity and sensitivity, as well as the development of child emotion regulatory abilities. These foci also serve to advance Dr. Musser's long-term aim of examining the longitudinal development of behavioral and biological emotion regulation among children with ADHD, and other externalizing problems, from the preschool period into adolescence and young adulthood. Dr. Musser has authored and co-authored a number of papers and presentations to the scientific community, and her work has been recognized by both federal (e.g., NICHD) and university awarders (e.g., University of Oregon).

Dr. Mei Yi Ng, Assistant Professor
Dr. Ng conducts research with the goal of advancing the science and practice of psychotherapy for youths, especially adolescents with depression. She employs two main strategies in her research program. First, she examines change mechanisms and processes of evidence-based psychotherapies such as cognitive behavioral therapy to better understand how they work. Second, she studies how to personalize mental health interventions by developing and applying methods to select and tailor therapies to maximize benefit to each individual youth.
A current focus of her research at the FIU Mechanisms Underlying Treatment Technologies (MUTT) Lab is to track depressed adolescents' emotions, cognitions, and behaviors in real-time. The aims are to learn how each of each these variables change over time, which variables drive changes in other variables, and whether these "drivers" and longitudinal relationships differ across individuals. It is hoped that this research may inform the personalized sequencing of treatment modules for individual youths.

Dr. William Pelham, Professor and Director, Center for Children and Families
For over thirty years, Dr. Pelham has served as a leading researcher in the field of ADHD in childhood and adolescence. He has published 359 articles on ADHD, including major articles and reviews on the treatment of ADHD (pharmacological, behavioral, and combined), the outcomes of ADHD individuals in adolescence and adulthood, the peer relationships of ADHD children, attributions and cognition in ADHD children, and the families of ADHD children. A number of Dr. Pelham's articles have focused on the development of later symptoms and functioning in adolescence and in adulthood within the context of the PALS and other longitudinal samples. In addition, Dr. Pelham has been a PI, Co-PI or Co-I on dozens of federal grants dealing with ADHD (e.g., from NIMH, NIDA, NIAAA, NICHD, IES) as well as foundation and industry grants.

Dr. Justin Parent, Assistant Professor

Dr. Parent's program of research explores the mechanisms through which families influence child adaptive and maladaptive development with the goal of optimizing intervention and prevention outcomes. A recent focus of his research has been on examining how early adversity

exposures (e.g., poverty, parental psychopathology, neglect, and abuse) are transduced into molecular events controlling the expression of neuroregulatory genes, which in turn guide brain development, calibrate stress reactivity, and influence the development of psychopathology.

His laboratory at FIU develops and tests family-based preventative intervention programs for at-risk children while simultaneously investigating how epigenetic processes functionally mold developmental plasticity in response to early environmental experiences. Dr. Parent is the author of over 45 research articles, is an associate editor of Journal of Child and Family Studies, and has received funding from the National Institutes of Health for the past six years to conduct his research.

Dr. Jeremy Pettit, Professor, Chair Department of Psychology
Dr. Pettit conducts research on depression, anxiety, and suicidal behaviors in adolescence and emerging adulthood. He has a particular focus on the course of depression over time, including interpersonal and cognitive factors that contribute to the onset, maintenance, and recurrence of these behaviors. Additional areas of interest include in the intergenerational transmission of depression and the co-occurrence of depression and anxiety. Dr. Pettit is the author of two books and over 75 research articles and book chapters. His research has been funded by the National Institute of Mental Health. He is currently editor of Behavioral Medicine and associate editor of Journal of Social and Clinical Psychology.

Dr. Joseph Raiker, Assistant Professor
Dr. Raiker's research focuses on understanding the impact of neurocognitive deficits (e.g., working memory, information processing) on the primary (e.g., inattention, hyperactivity, and impulsivity) and secondary (e.g., academic achievement, social problems) features associated with Attention-Deficit/Hyperactivity Disorder (ADHD) in children. He has begun examining the interaction of multiple dysfunctional cognitive processes and is interested in the implications of these deficits for intervention strategies targeted at reducing the adverse functional outcomes experienced by children and adolescents with ADHD as well as the integration of neuroimaging in further understanding ADHD.

Dr. Adela Timmons, Assistant Professor
Dr. Timmons obtained her undergraduate degree in psychology from the University of Kansas in 2011 and her Ph.D. in clinical and qualitative psychology from the University of Southern California in 2018. She completed her predoctoral clinical psychology internship at the University of California, San Francisco. Her research examines how childhood stress, trauma, and adversity become biologically embedded and impact physiological reactivity and emotion regulation in the context of close relationships. She is also interested in machine learning and developing just-in-time adaptive intervention with wearable technologies for improving mental health outcomes in children, couples, and families.

Dr. Elisa Trucco, Assistant Professor
Dr. Trucco's research is grounded in developmental psychopathology. Her work examines the etiology of substance use from a social ecological perspective. This involves delineating risk and protective factors for the development of adolescent problem behavior and substance use across

multiple levels of analysis, including biological factors (genetics), social environments (peers, parents, neighborhoods), and individual characteristics (temperament, personality). She examines genetic and personality factors that increase or decrease susceptibility to parenting practices and peer influence for engaging in substance use toward improving prevention programs for youth.

Associated Faculty

Associated faculty are required to hold Graduate Faculty Status, and encouraged to apply for Dissertation Advisor Status. They may submit a written petition (in the form of a memo) for the opportunity to serve as primary mentor for a clinical science doctoral student. No petition is necessary to participate in the role of secondary mentor. Associated faculty may hold their primary appointment in the Department of Psychology or in other departments across campus (e.g., Public Health, Psychiatry, Education).

Dr. Stefany Coxe, Assistant Professor, Department of Psychology
Dr. Coxe's research focuses on evaluating and applying advanced statistical methods to psychological data and takes two directions. First, her quantitative research examines the application of generalized linear models (GLiM, McCullagh & Nelder, 1983, 1989) to "grouped counts" that fail to comply with all assumptions of any GLiM but are commonly employed as outcome measures in psychological research. Related, she examines applications of Poisson regression for count data, particularly for mediation analysis in which the final outcome is a count. Second, Dr. Coxe's applied research involves longitudinal and prospective evaluations of preventions and interventions for youth with mental health needs, including psychometric analysis of study measures, complex longitudinal growth models, multilevel regression, and multilevel structural equation models.

Dr. Jami Furr, Clinical Assistant Professor
Dr. Furr is the Associate Clinical Director for the Center for Children and Families and the Clinical Director of the Mental Health Interventions and Technology (MINT) Lab. She has clinical expertise and research interests in cognitive-behavioral treatment of childhood anxiety and disruptive behavior disorders, with a focus on preschool mental health. Specifically, she specializes in weekly and intensive treatment programs for preschool aged children with selective mutism, and obsessive-compulsive disorder and other anxiety disorders, as well as in parent-child interaction therapy for young children with disruptive behavior disorders.

IIB. Students

We recognize that our students are among our program's greatest strengths and most important resources. They publish in leading journals (e.g., Clinical Psychology Review; Journal of Abnormal Child Psychology; Administration and Policy in Mental Health and Mental Health Services Research) and present their research at national conferences (e.g., Association for Behavioral and Cognitive Therapies; National Conference in Clinical Child and Adolescent Psychology). Their level of research activity is high to prepare them for a competitive academic market. They are expected to demonstrate increasingly sophisticated research and clinical skills and the highest level of professionalism.

Applicants

Our applicant pool has increased since the program's inception, and currently hovers around 100 applications annually. In accordance with university procedures, two program faculty members independently review each application along a range of criteria (e.g., academic credentials, research experience, career objectives). After an applicant has been deemed acceptable by both reviewers, the faculty member identified best positioned to be that student's primary mentor (based on alignment of research interests and faculty expertise) will review that application more closely. Faculty select a small number of applicants to interview via phone / Skype. Each applicant is interviewed by a minimum of two faculty members and one graduate student. Students that receive offers are invited (and funded, at least partially) to attend Graduate Recruitment Day, sponsored by the College of Arts and Science and the University Graduate School. Current students host prospective students overnight. Students then spend the day at FIU learning about the program and department, with presentations by program directors, meetings with program faculty and students, campus tour, and student panel.

Admission Requirements

To be admitted into the Clinical Science doctoral program, a student must:
1. Hold a Bachelor's degree in a relevant discipline from an accredited college or university.
2. Have a 3.0 average or higher during the last two years of the undergraduate program and submit Graduate Record Exam (GRE) scores.
3. Have completed an undergraduate or graduate research methods course as a prerequisite.
4. Arrange to have three letters of recommendation evaluating the applicant's potential for graduate work sent to the Psychology Graduate Program Director.
5. Send a brief essay stating reasons for interest in the program and career goals to the Psychology Graduate Program Director.
6. Receive approval from the Departmental Graduate Education Committee.
7. International graduate student applicants whose native language is not English are required to submit a score for the Test of English as a Foreign Language (TOEFL) or for the International English Language Testing System (IELTS). A total score of 92 on the iBT TOEFL (equivalent to 580 in the TOEFL) is required.

Note: These are minimum requirements. Admission is competitive. Students are encouraged to seek research experience prior to submitting their application.

Enrollment

We currently have 165 enrolled students across 6 cohorts. Students are evenly distributed across faculty, in accordance with a mentor model and general guideline that each faculty accepts one new student each year. Our current class size ranges from 5 to 11, corresponding to a growing program faculty. As illustrated by the list of faculty above, we have grown even larger during the last couple of years, and we are currently recruiting a cohort of 10-12 students. Approximately three-quarters of students graduated college outside of south Florida, among them Boston University, University of Michigan, Amherst College, University of California-Santa Barbara, State University of New York, and Tulane University. GRE scores among our enrolled students range from 1050 to 1490 (Mean = 1270), with three-quarters at or above 1200.

Funding

All students *in good academic standing* in the clinical science program receive 12-month support ($19,194 + tuition waiver) for 4 years. Good standing means that students are demonstrating acceptable performance by meeting program requirements in accordance with the planned timeline (see annual performance evaluation criteria). Historically, all students in the department doctoral programs have been funded during their 5th year as well. Funding reflects four pathways. First, students may receive Research Assistantships, funded by their mentor's active grants, and including a broad range of responsibilities including IRB procedures; participant recruitment; data collection; data management, cleaning, and analysis; and manuscript writing. Second, students may receive a Teaching Assistantship, allocated by the College of Arts, Sciences & Education. Students funded by a TA line early during their graduate training are expected to support the undergraduate mission of the university by assisting with large lecture courses. Students who have completed their Master's Project may be assigned to teach their own section of Research Methods, after which they are eligible for an assignment as Instructor of Record (with mentor approval). Third, four graduate assistant lines are funded by the University Graduate School to support clinical research in the Center for Children and Families. Students funded on these lines have clinical responsibilities that include intakes and clinical service delivery. Students funded by these three mechanisms are expected to work 20 hours per week. Finally, students may receive university fellowships that are accompanied by higher stipends and release of assistantship responsibilities to facilitate increased research productivity. The clinical science program has had 3 students funded by the prestigious Presidential Fellowship (for recruiting outstanding doctoral candidates) and 1 student funded by the McKnight Fellowship (designed to address the chronic under-representation of African American and Hispanic/Latino faculty at colleges and universities in Florida). FIU contracts prohibit students from accepting any external employment opportunities during their funded doctoral training.

Scholarship

Students are encouraged to collaborate with faculty and with one another to build scholarship in their area of research expertise, including manuscripts and conference presentations. Program milestones (Master's Project, Advancing to Candidacy, and Dissertation) are strategically designed to facilitate lead-author publications. As reflected by our students' impressive list of

publications and presentations, and several prestigious awards, our students are expected to emerge from doctoral training well positioned for successful careers as clinical scientists.

III. Curriculum

A. Overview
B. Academic Coursework
C. Clinical Practicum
D. Professional Development
E. Multidisciplinary Training
F. Internship

IIIA. Overview

Our curriculum reflects the principles and values of clinical science as articulated by the Academy of Psychological Clinical Science, and aligns closely with APA Guidelines and Principles. The faculty allocate significant time and effort to remain well-informed on the evolving literature of pedagogy, and to incorporate innovative training processes and educational methods to build knowledge, skills, and competencies that reflect the program's unique goals and objectives. The curriculum package reflects broad and general training, designed to prepare our students for entry-level practice in professional psychology. Clinical science in child and adolescent psychology necessitates a solid foundation and breadth of training in (1) developmental psychology emphasizing the dynamic and complex interplay between the individual child and their ecology (e.g., parents, family, peers, schools, and community), (2) developmental psychopathology emphasizing adaptation, coping, and resilience, (3) cultural diversity, in particular as it relates to access, quality, and impact of mental health care, and (4) methodology and statistics. Toward this end, we designed a multi-faceted and rigorous 6-year training curriculum that includes academic coursework, clinical practicum, professional development, and internship. The curriculum is broad and comprehensive; guided by our four professional goals and specific learning objectives; strategic in its sequencing of training requirements and opportunities; cumulative in that learning opportunities build on one another incrementally; and graded over time by academic, research and clinical demands that increase in challenge and complexity, accompanied by increasingly more advanced competency benchmarks and performance expectations. At each stage of the sequence, students engage in a fully integrated set of research and clinical activities to ensure their delivery of psychological assessment and treatment services is informed by scientific literature and that their developing research questions and methods are informed by clinical experiences, reflecting FIU's value on integrating scholarly and local knowledge.

IIIB. Academic Coursework

The clinical science curriculum is designed to complement research experiences and clinical training (see Section V. Practicum Training) and to equip students with the skills and competencies they need to succeed as scientists and scholars. Coursework is divided into five categories as detailed below.

Introduction to Psychological Clinical Science

This 2-semester (6 credits) sequence provides a historical perspective on science and, in particular, psychological clinical science. It begins with philosophy of science; covers the major developmental theories, systems, and ecologies that contribute to human behavior; introduces seminal readings; and familiarizes students with the most current tensions and controversies of our day.

Psychological Clinical Science I (CLP 5007): *Historical Perspectives and Current Controversies* This course provides an overview of the field of clinical child psychology, including history and philosophy of psychological clinical science and challenges and controversies related to bridging science and service. By the end of this course students should (a) be familiar with the development of clinical child psychology as a field, including a historical perspective on the science of clinical psychology combined with emphasis on the most current and urgent questions and controversies, (b) be familiar with the dialogue in our field related to culture, context, and diversity, including definitions of race, ethnicity, and culture; methods and measures that reflect cultural competence; and research and ethical considerations with economically vulnerable and underrepresented minority groups, and (c) develop a balance between skepticism and enthusiasm related to the pursuit of knowledge in child and adolescent clinical psychology.

History and Systems (PSY 5605): The history of psychology is primarily the history of people arguing over a set of questions about the nature of human behavior and development that have been around as long as there have been people. By the end of this course students should (a) be familiar with *The Great School* and *The Great Figure* approaches to the history of psychology, (b) demonstrate appreciation for how dialogue and debate over the last century and a half shaped our current beliefs, perspectives, and theories, including knowledge of common themes and individual contributions and (c) be familiar with literature that speaks to fundamental questions related to brain, body, and behavior; what makes humans unique; free will; nature and nurture; research methods; and biology, anthropology, and psychology as interdisciplinary science.

Assessment & Intervention in Childhood Psychopathology

This 3-semester (9 credit) sequence introduces the continuum of mental health care from assessment to treatment in the primary domains of childhood psychopathology. Courses are designed to cover (1) prevalence; phenomenology; disparities by race, ethnicity, or gender; onset age; and trajectory/course; (2) classification and evidence based assessment; (2) key influences in the development and maintenance of disorders, including genetics, learning, cognitive/information processing, and family and peer relationships, and; (3) evidence-based prevention and treatment intervention approaches.

Assessment and Treatment I: Internalizing Disorders (CLP 6471): This course focuses on the development/learning and treatment/reversal of internalizing disorders in children and adolescence. Emphasis is placed on the most commonly occurring anxiety and depressive disorders though other issues relating to internalizing disorders (i.e., suicide, selective mutism, trauma) are covered as well. By the end of the course, students should (a) be familiar with the history of childhood internalizing disorders and current approaches to science and service, (b) be knowledgeable and critical with respect to theory, research, and practice in the area of child and adolescent internalizing disorders, and (c) be sensitive to issues of diversity and ethical considerations as they related to the study and delivery of care.

Assessment and Treatment II: Externalizing Disorders (CLP 6472): This course is designed to be an overview of child psychopathology, assessment, and evidence-based treatment of externalizing disorders in children and adolescents. By the end of the course, students should (a) be knowledgeable about the history of childhood externalizing disorders and current approaches to science and service, (b) be familiar with literature on individual differences and diversity as they relate to symptom presentation, course, and treatment response, and (c) be mindful of ethical considerations related to assessment and treatment of externalizing disorders and associated research.

Assessment and Treatment III: Developmental, Learning, and Pediatric Disorders (CLP 6473): This course provides an overview of assessment and treatment in clinical child and adolescent psychology, with a particular focus on the classification, assessment, and treatment of developmental, learning and pediatric disorders. By the end of the course students should (a) be familiar with symptom presentation, etiology, classification, and course of several common developmental, learning and pediatric disorders, (b) be knowledgeable and critical with respect to theory, research, and practice in the area of developmental, learning, and pediatric disorders, and (c) demonstrate appreciation for issues of diversity and ethical considerations related to research and practice.

Research Method and Design

This 2-semester (6 credits) sequence provides students with a foundation of knowledge related to research method and design for clinical psychology, with particular attention to the unique features associated with studies along the basic to applied research continuum. Course readings and materials integrate seminal papers in the field with current papers from peer-reviewed journals. Students will become familiar with a wide range of designs (e.g., randomized controlled trial, meta-analysis, mixed-method) and will become competent to select an appropriate design for their research questions, acknowledge inherent limitations, consider potential methodological artifacts and plan for studies with modified design to tease apart the most urgent and critical questions facing psychological clinical science. In addition to formal course requirements, students are encouraged to seek additional methods training through mechanisms such as the APA summer Advanced Training Institutes (e.g., *Research Methods with Diverse Racial and Ethnic Groups*).

Research Methods in Clinical Psychology (PSY 6219): This course is designed to provide students with a fundamental understanding of empirical research methods and design in clinical psychology. Students will develop skills to become informed and savvy consumers of the existing literature, and will develop expertise to critically evaluate and refine their own work from a methodology and design perspective. By the end of this course students should (a) develop a deep appreciation for matters of internal validity and external validity, and will develop strategies to balance these sometimes competing demands in their own work in order to produce research that maximizes both rigor and relevance; (b) learn to think like a psychologist with an emerging identity as a clinical scientist; (c) develop a sophisticated appreciation for and understanding of psychometric evaluation; and (d) become familiar with the Belmont Report on ethical principles and guidelines for the protection of human subjects in biomedical and behavioral research.

Dissemination and Implementation Research (CLP 6530): This course will address the increasing need to bridge research and practice to inform a new generation of effective services that are accessible to the large numbers of children and families in need. Through readings, discussion, and assignments, we will explore the unmet mental health burden, the history of dissemination and implementation research, and the continuum of research methods that have emerged to help close the science to service gap. By the end of this course students should (a) be familiar with the terminology, similarities, and differences associated with efficacy, effectiveness, services, dissemination, implementation, fidelity, and transportability research*;* (b) be able to apply a public health framework to mental health, consider the unmet mental health needs of children and families, mental health disparities, and the degree to which evidence-based interventions can inform routine care, with particular attention to issues of context, culture, and diversity; and (c) be able to articulate and think critically about the skill sets, ethical implications, primary tensions and inherent complexities associated with dissemination, implementation, and services research.

Analytic Requirements

This 4-semester sequence (12 credits) includes three courses that comprise the department's common core (for students across psychology programs) plus one advanced analytic elective selected by the students, in consultation with their mentors, based on the unique and specific analytic needs of their dissertation and overall research agenda. Analytic electives may be selected from within or outside of the psychological department and include but are not limited to *Structural Equation Modeling, Categorical Analysis, Longitudinal Analysis, Systematic Review and Meta-Analysis, Qualitative Analysis, and Mixed-Method Research*. In addition to formal course requirements, students are encouraged to seek additional quantitative training through mechanisms such as the University of Kansas Center for Research Methods and Data Analysis (CRMDA) Summer Institutes in Statistics ("Stats Camp" http://crmda.ku.edu/statscamp) and the University of Michigan Inter-University Consortium for Political and Social Research (ICPSR) Summer Program in Quantitative Methods of Social Research (http://www.icpsr.umich.edu/icpsrweb/sumprog/index.jsp).

*Quantitative Methods I (PSY 5939):*This course is designed to provide an introduction to experimental design and analysis with an emphasis on one of the most common analytical

techniques used in the social sciences - the analysis of variance (ANOVA). Topics covered in this course will include, but are not limited to, appropriate experimental design, principles of null significance hypothesis testing, and various types of ANOVA (e.g., ANCOVA, factorial designs). The course will approach the analytic methods from both a mathematical and applied perspective. The advent of point-and-click statistical software packages (e.g., SPSS) has made our ability to complete statistical analysis incredibly easy while simultaneously undermining our ability to fully grasp the "how" and "why" of our statistical approaches. The design of this course hopes to avoid this and instead produce scholars capable of correctly designing experiments amenable to ANOVA, running analyses while also understanding how those analyses are undertaken, understanding what the results mean, and being able to describe and interpret them for a broader audience. By the end of this course, students will be able to: a) develop experimental designs amenable to single-factor, factorial, and within-subject analysis of variance (ANOVA), analyze data from multiple types of experimental designs using common statistical packages (e.g., SPSS), interpret and report on the outcome of the statistical tests describe above.

Quantitative Methods II (PSY 5939): The purpose of this course is to provide you with a theoretical and practical introduction to advanced statistical methods and analyses used in the psychological sciences, as well as a thorough conceptual understanding of each analysis. In particular, this semester will focus on applications of multiple regression and correlation. In addition to learning the general procedures and assumptions of the statistics we discuss, there is a strong emphasis on "hands-on" data analysis and interpretation, reflecting an overall applied approach. By the end of the semester, you should: (a) conceptually understand the calculation of statistical models (e.g., General Linear Models) in scientific research and (b) be able to apply appropriate statistical models for the evaluation of empirical research questions (e.g., relationships between behaviors, causal inferences in development, evaluation of interventions, etc.).

Multivariate Statistics (PSY 5246): This course provides an introduction to basic techniques of multivariate statistical analysis, emphasizing both theoretical background and applications to psychological research. Topics include matrix algebra, multiple regression, MANOVA, principal component analysis, and factor analysis. By the end of the course, students should (a) be familiar with a variety of classic multivariate statistical techniques, (b) be able to conduct these analyses using SPSS and/or SAS and interpret the results, (c) be prepared for further study in applied statistics in the social and behavioral sciences, and (d) be able to read current applied statistics research articles in their field.

As noted above, following the 3 courses that comprise the department's common core, students are required to select an advanced analytic elective from the courses listed below (or an alternative course with approval from the Director of Clinical Training). Students that complete a total of 6 analytic courses will receive a Minor in Quantitative Psychology.

Introduction to SEM for Psychological Research (PSY 5939): This course is an introduction to structural equation models as applied to problems in the social sciences, broadly defined. The major purpose of the course is to familiarize you with the technique of structural equation modeling and to provide you with working knowledge of AMOS and MPLUS, computer programs designed to execute the analysis of a broad class of structural equation models. We

consider numerous advanced topics, described below. The goal of the course is to expose students to a variety of analytical techniques so that they may become proficient in using SEM analyses to answer individual research questions.

Longitudinal Data Analysis (PSY 5939 / PHC 6056): This course covers topics related to statistical analysis of longitudinal data, focusing on methods used in the social sciences and health research. Topics build on a basic ANOVA and regression (general linear model) framework and include ANCOVA, mediation, multilevel modeling of longitudinal data, and latent growth modeling. Students will be able to analyze, interpret, and write up results using these methods.

Categorical Data Analysis (PSY 5939): This course covers topics related to statistical analysis of categorical outcome variables, focusing on methods used in the social sciences. Topics include chi-square and other non-parametric methods for categorical outcomes, the generalized linear model (GLiM, including logistic regression, Poisson regression, and survival analysis), and repeated measures extensions of GLiM (such as GEE and generalized linear mixed models). Students will analyze, interpret, and write up results using these methods.

Systematic Review & Meta-Analysis (PHC 6062): This course is designed to train students in the conduct of a systematic literature review and developing the skills critical for evidence-based clinical and public health practice. This course will provide a detailed description of systematic review process and will combine didactic sessions with in-class laboratory sessions. Students will be provided step-by-step guidance on how to perform a systematic review & meta-analysis. They will be expected to apply all the tools taught in the class to a topic of their choosing. The final deliverable for the course will be a systematic literature review with/without meta-analysis.

Breadth Requirements

Five breadth requirements are planned for students to develop minimal levels of competence in the areas of affective, biological, cognitive, social, and developmental aspects of behavior, corresponding to APA Implementing Regulation, C-16, Broad and General Preparation for Doctoral Programs. Students are required to select one course from each category (Affective, Biological, Social, Developmental and Cognitive Aspects of Behavior). The following courses are offered within the psychology department and have been approved by the DCT. Students may request permission from the DCT to fulfill a breadth requirement with another course (that will be added to the list of approved courses

- **Affective Aspects of Behavior**

Affective Bases of Behavior (CLP 6060)
This course will provide a comprehensive introduction to the literature on affective science with a focus on understanding: behavioral, biological, cognitive, and social dimensions, as well as the relevance of affective science to clinical science. The course will focus on current and historical theories and empirical literature in the domain of affective science.

- **Biological Aspects of Behavior**

Biological Basis of Behavior Development (DEP 5058): This course will survey recent advances in the biological sciences (genetics, epigenetics, developmental biology, neuroscience, evolutionary biology) that inform the study of behavioral development. In particular, we will focus on the interdisciplinary science of developmental psychobiology, which attempts to integrate developmental biology and developmental psychology to further our understanding of individual development. By the end of this course students should (a) be familiar with the evolution of psychobiology and current literature, (b) be knowledgeable about the development of behavior, in particular reflecting the science of perception, action, and cognition and (b) appreciate the importance and value of interdisciplinary research.

Clinical Neuropsychology (CLP 6426): This course will introduce students to basic foundations and some advanced concepts in Clinical Neuropsychology, with a focus on clinical disorders. Topics covered throughout the course will include functional neuroanatomy, brain disorders across the lifespan, assessment of neuropsychological functions, ethical considerations, and implications of assessing participants from varying ethnic, racial, and cultural backgrounds. By the end of this course students should be able to: (a) assess and interpret the relation between nervous system function and behavior; (b) describe neuropathology and neurocognitive profiles of various central nervous system disorders; (c) be familiar with various neuropsychological assessments used in the clinical setting; (d) consider implications of racial, ethnic, and cultural background to clinical presentation and methods for neuropsychological assessment; and (e) be informed of ethical considerations in clinical neuropsychology and assessment.

- **Social Aspects of Behavior**

Proseminar in Social Psychology (SOP 5058): This course provides an in-depth review of some of social psychology's foundational themes and research literatures, with attention to how individuals perceive, judge, remember, reason about, feel, and behave toward and among other people. By the end of this course students should develop: (a) familiarity with classic and current issues in social psychology; (b) understanding of major theories driving social psychological research; (c) appreciation for the principal methods in social psychology; (d) ability to use social psychological methods and theories to answer questions across various fields of psychology and in the real world; and (e) critical thinking skills regarding research, theory, methods, and social problems.

- **Cognitive Aspects of Behavior**

Cognitive Development (DEP 5065): The primary goals of this course are to provide you with an overview of cognitive development, with a major focus on the theories, experimental evidence and milestones in cognitive development. We will cover a range of topics including the development of attention, perception, memory, problem solving, categorization, concepts, language, causal reasoning, social cognition, theory of mind, metacognition, executive function, reading and math. Students will develop an understanding of the major themes and controversies that continue to shape research in cognitive development. By the end of this course, students should be able to: (a) describe the major milestones in cognitive development and generate cognitive developmental questions (e.g., what develops and why development pursues its observed course); (b) characterize and evaluate major theories of cognitive development and the

research evidence supporting these views; (c) identify and describe two core explanatory systems that account for changes in children's cognition (i.e., domain-general versus domain-specific); and (d) assess and analyze the evidence in support of innate versus acquired accounts of cognition in children.

Cognitive Neuroscience (EXP 5667): The major objectives of this course are to: (1) gain an understanding of the basics of brain and central nervous system function and its relation to cognition; (2) gain knowledge of human and monkey neuroanatomy; (3) gain an understanding of several methodologies for studying cognitive neuroscience; (4) be able to read and interpret research in the cognitive neurosciences; (5) learn how to write and review papers in psychology.

- **Developmental Aspects of Behavior**

Cognitive Development (DEP 5065) The goals of this course are to provide you with an overview of cognitive development, with a focus on theories, experimental evidence and milestones in cognitive development. We will cover a range of topics including development of attention, perception, memory, problem solving, categorization, concepts, language, causal reasoning, social cognition, metacognition, executive function, reading and math.

- **Advanced Integrative Knowledge of Basic Discipline-Specific Content Areas**

Cognitive Neuroscience (EXP 5667): The major objectives of this course are to: (1) gain an understanding of the basics of brain and central nervous system function and its relation to cognition; (2) gain knowledge of human and monkey neuroanatomy; (3) gain an understanding of several methodologies for studying cognitive neuroscience; (4) be able to read and interpret research in the cognitive neurosciences; (5) learn how to write and review papers in psychology.

Cognitive Development (DEP 5065) The goals of this course are to provide you with an overview of cognitive development, with a focus on theories, experimental evidence and milestones in cognitive development. We will cover a range of topics including development of attention, perception, memory, problem solving, categorization, concepts, language, causal reasoning, social cognition, metacognition, executive function, reading and math.

Ethics and Diversity

We spend significant time, in an ongoing way, considering comprehensive and empirically informed methods by which to train our students on issues of ethics and diversity, as these represent foundational professional competencies of both research and practice that are critical to a successful career in psychological clinical science. Ethics is a broad area critical to both patient care (e.g., maintaining awareness of personal bias, managing uncertainty, privacy and confidentiality, team-based decision making and treatment planning, aligning practice with codes of professional conduct) and research activities (e.g., informed consent, representative sampling, inclusion of underrepresented minority groups, culturally meaningful measurement, familiarity and compliance with IRB policies and procedures). Ethical conduct is exemplified by respect for cultural diversity and individual differences that characterize patients, participants, and populations receiving and participating in prevention, treatment, and healthcare services and

research. Informed by a rich body of literature on ethics and diversity in psychological clinical science, we determined there to be several advantages to integrating training in these areas across multiple courses and throughout multiple years of training, thus providing students important opportunities to advance their knowledge and application of knowledge in an increasingly sophisticated way. In addition, by integrating ethics and diversity across multiple curriculum formats (coursework, practicum, and professional development), students receive opportunities to consider these issues in a variety of ways that include class discourse, clinical supervision, research meetings, and brown bag discussions that expose them to a wide variety of faculty experiences and perspectives, and ongoing opportunities for dialogue in small and large groups. Therefore, ethics and diversity are introduced early and revisited throughout training. Competence related to ethics and diversity is assessed annually with designated course assignments (Year 1: Psychological Clinical Science I and Year 3: Dissemination and Implementation Research) and upon completion of each advanced practicum through comprehensive student evaluations.

IIIC. Clinical Practicum

Clinical practicum training is designed to facilitate the development of competencies essential for an entry-level professional clinical scientist. The development of these essential competencies will prepare students to make effective use of a clinical psychology internship and/or postdoctoral clinical training experiences.

Practicum Objectives

Professional Standards: Practicum provides didactic and experiential training opportunities related to the delivery of psychological services in a manner consistent with professional standards of clinical psychology practice and APA ethical principles.

Clinical Competencies: Practicum provides training opportunities to facilitate the development of competence in the following 11 domains, consistent with ADPTC Practicum Competencies Workgroup recommendations (Hatcher & Lassiter, 2007): (a) Relationship/ Interpersonal Skills, (b) Skills in Application of Research, (c) Psychological Assessment Skills, (d) Intervention Skills, (e) Consultation Skills, (f) Diversity, (g) Ethics, (h) Leadership Skills, (i) Supervisory Skills, (j) Professional Development, and (k) Meta-knowledge – Skilled Learning. These domains map directly onto our program goals and objectives, in particular Goal 2 (competence to deliver evidence-based clinical care) and Goal 4 (professionalism in research and practice). It is not expected that all students will demonstrate the same level of competence in each domain upon the completion of practicum experiences. However, upon completion of the doctoral program all students are expected to demonstrate a minimum level of competence in every domain as reflected by scores of (3) Intermediate and (4) Advanced level of competence in specific domains, as measured by the Advanced Clinical Practicum Evaluation.

Training Requirements

In partial fulfillment of the requirements of the doctoral degree, students must complete a minimum of 500 direct service hours and a minimum of five integrated assessment reports.

Foundation Practicum: Students will complete a two-semester Foundation Practicum sequence beginning during spring semester of their first year in the Clinical Science doctoral program. The Foundation Practicum will provide didactic and experiential training in foundational relationship skills, assessment skills, intervention skills, diversity, ethics, and professional development. The Foundation Practicum will provide students with breadth of clinical training experiences, including exposure to a range of presenting problems and empirically supported assessment and treatment approaches, which will serve as a foundation upon which to pursue depth of clinical training in specific areas. Emphasis on the development of novice to intermediate competence in a broad range of clinical practice activities coincides with the first year clinical course sequence that facilitates foundational knowledge in clinical psychological science.

Advanced Practicum: Following successful completion of the Foundation Practicum, students complete a minimum of three Advanced Practicum during their third and fourth years of study in the Clinical Science doctoral program. A *Student Guide to Advanced Practicum* containing an

updated list and description of opportunities will be distributed annually before fall semester course registration. Advanced Practicum experiences provide students with depth of clinical training in both assessment and treatment, and related to specific diagnoses (e.g., anxiety, ADHD), techniques (e.g., cognitive behavior therapy, motivational interviewing, behavioral parent training, school consultation), and formats for delivery (e.g., clinic, home, community, technology-facilitated). Emphasis on the development of intermediate to advanced competence in specific types of clinical activities coincides with the second, third, and fourth year curriculum that facilitates an intermediate to advanced knowledge base in clinical psychological science. Each student will select Advanced Practicum in consultation with his or her major professor. Students are encouraged to complete a diverse range of Advanced Practicum experiences to build intermediate to advanced competence in diverse types of clinical activities. Students are required to complete at least one practicum that provides training in assessment, at least one practicum that provides training in treatment, and at least one breadth practicum (outside of their primary clinical research area). Students are required to submit their hours for approval by their practicum supervisor at the end of each practicum, and encouraged to maintain a log of clinical activities via Time2Track.

External Practicum: Students can, in consultation with their primary mentor and following acceptable performance in at least one internal advanced practicum, identify a potential external clinical opportunity aligned with their interests and petition the Practicum Committee for permission to design a placement. Past students have completed external practicum at Nicklaus Children's Hospital, University of Miami Mailman Center, and University of Miami Center for Neurology.

Competency Assessment

Student Evaluation Form: The Advanced Clinical Practicum Evaluation Rubric will be used to evaluate each student's level of competence in each of 10 domains. At the end of each semester in which a student is enrolled in a practicum, the practicum supervisor must complete the Student Evaluation Form in writing and review the form individually with the student. The supervisor and the student each will sign the form and the form will be placed in the student's file. Student Evaluation Forms will be reviewed and discussed at the annual review of each student's progress in the Clinical Science doctoral program.

Program Quality Improvement

Practicum Evaluation Form: The Practicum Evaluation form will be used to evaluate students' experiences in each practicum. At the end of each semester in which a student is enrolled in a practicum, the student must complete the Practicum Evaluation Form in writing. The supervisor and student will review the form jointly and the form will be placed in the doctoral program's Practicum Evaluation file. Practicum Evaluation Forms will be reviewed and discussed annually by the Practicum Committee to make decisions about practicum offerings and improvement in the Clinical Science doctoral program for the next academic year.

CLINICAL SCIENCE PROGRAM IN CHILD AND ADOLESCENT PSYCHOLOGY: SAMPLE CURRICULUM

Year	Course	Fall	Course	Spring	Course	Summer
1	CLP5007 PSY 5939 PSY6219	Psychological Clinical Science I Statistics I-Quantitative Meth I Research Methods	CLP 5483 PSY 5939 CLP 6432	Affective Bases of Behavior Statistics II – Quantitative Meth II Foundation Practicum I	CLP 6060 CLP 6945	Research Practicum
2	CLP 6471 PSY 5246 PSY 6947	Internalizing Disorders Multivariate Statistics Foundation Practicum II	CLP 6472	Externalizing Disorders Cognitive OR Biological OR Analytic Requirement OR Elective	PSY 5918 CLP 6945	Research Practicum
		Master's Degree				
3	CLP 6473 CLP 6943 SOP 5058 or PSY 5605	Developmental & Learning Disorders Advanced Clinical Practicum Social Bases of Behavior OR History and Systems OR developmental	CLP 6530 CLP 6943	Dissemination & Implementation Research Advanced Clinical Practicum Cognitive OR Biological OR Analytic Requirement OR Elective	PSY 5918	Research
		Advance to Candidacy				
4	CLP 6943 SOP 5058 or PSY 5605 PSY 7980	Advanced Clinical Practicum Social Bases of Behavior OR History and Systems Dissertation	CLP 6943 PSY 7980	Advanced Clinical Practicum Cognitive OR Biological OR Analytic Requirement OR Elective Dissertation	PSY 7980	Dissertation
5	PSY 7980	Dissertation	PSY 7980	Dissertation	PSY 7980	Dissertation
6	CLP 6948	Internship	CLP 6948	Internship	CLP 6948	Internship

Curriculum Summary

3 Common Core Statistics (9 credits) + 7 Clinical Core (21 credits)

5 Breadth Requirements (15 credits): Affective, Cognitive, Biological, Developmental, and Social Bases of Behavior

1 Advanced Integrative Requirement (3 credits)

1 Advanced Analytic Requirement (3 credits)

1 Elective (3 credits): To facilitate depth of independent research

Practicum (15 credits): 500 hours, 2 Foundation Practicum + 3 Advanced Practicum

Research (27 credits): 12 Supervised Research + 15 Dissertation Credit

IIID. Professional Development

Graduate education in psychological clinical science is a time of enormous professional and scholarly expansion and refinement, during which students actively engage with mentors to develop advanced skills in their transformation into independent clinical scientists. As a doctoral program in clinical science, superior science-based professional development is strategically interwoven throughout all aspects of the program in order to ensure that graduates enter the clinical science marketplace with an attitude toward lifelong learning and the core foundation, advanced training, requisite skills, and professional savvy, responsibility, and humility to competitively pursue positions of advanced leadership.

Training Objectives:

Professional development has been designed to provide a combination of didactic, experiential, structured, and semi-structured training opportunities in the practical aspects of scholarly productivity to facilitate the competencies needed for professional advancement. Critical areas emphasized include: (a) Developing effective time management skills, (b) Attaining an optimal work-life balance that can set the stage for a personally rewarding and professionally satisfying career, (c) Understanding the professional opportunities afforded by a doctorate in clinical psychology, (d) Distinguishing professional opportunities from professional distractions, (e) Building a linear program of research, (f) Securing funding for one's research, (g) Writing effectively, (h) Navigating the peer review process, (i) Navigating the IRB process, (j) Communicating effectively with colleagues and supervisors, (k) Building a competitive curriculum vitae, (l) Developing professional networks, (m) Understanding the clinical internship match process, (n) Developing strategies for effective interviewing, (o) Preparing a job talk, and (p) Understanding considerations of ethics and diversity as they interface with research, practice, and professional advancement. Upon completion of the doctoral program, students are expected to demonstrate at minimum an Intermediate level of competence in each domain.

Training Requirements

Mentor Model: For every year in the program, students hold membership in an identified core research laboratory that continuously provides applied, experiential, small group, and 1:1 learning opportunities with an identified research mentor in all practical aspects of scholarly productivity and professional advancements. Laboratory-based membership follows an apprenticeship model of training, with doctoral students treated as junior colleagues intimately involved in all laboratory activities—from securing grant-funding to seeking IRB approval, collecting data, conducting the research and data analyses, preparing manuscripts, responding to peer-reviews, and considering next-needed studies.

Course Curriculum: The clinical science curriculum is designed to equip students with the skills and competencies needed to succeed and advance as scientists and scholars. Matters of professional development (e.g., ethics, diversity, writing, and presentation skills) are explicitly incorporated into class material and into assignments for evaluation across courses.

Dissertation Grant Applications: In partial fulfillment of the requirements of the doctoral degree, all clinical science students are required to submit at least one major grant application, and two lead-author publications for peer review, in collaboration with and under the direct mentorship of clinical science faculty members. These required experiences not only help students build their CVs and a program of fundable research, but also strategically provide students with mentored experiences in fundamental professional activities at the heart of professional success in psychological clinical science.

CCF Division 53 Workshops: The CCF was especially fortunate to have regular opportunities beginning Fall 2011 through Spring 2013 for workshops on evidence-based interventions offered by treatment developers who are leaders in their field. The workshops provide an opportunity for students to exit the comfort zone of their primary clinical research area and broaden their training in areas of diagnosis, assessment, and treatment of child and adolescent disorders. Students are encouraged to consider during the workshops the workforce most likely to deliver the treatments and the skill set required to do so, the populations more or less likely to benefit, and the opportunities and challenges associated with treatment implementation. Workshops are available for students in full online at FIU and Division 53's Effective Child Therapy website.

CCF Speaker Series: In partial fulfillment of the requirements of the doctoral degree, all clinical science students are required to attend the speaker series at the Center for Children and Families (exceptions require advance permission from primary advisor and Director of Clinical Training). The speaker series includes a variety of opportunities for students and other trainees that facilitate core competencies needed for professional development. First, speakers from FIU and outside FIU present on research focusing on children and families. In addition to presentations by the esteemed faculty in the clinical, developmental, and legal programs at FIU, world-renowned researchers regularly present in this series—e.g., Drs. Alice Carter, Nathan Fox, Paul Frick, Nora Newcombe, and Nora Volkow. Second, at designated speaker series, students present their data and receive feedback from faculty and their peers in preparation for future presentations at conferences, as well as manuscript and grant submissions. Finally, a sub-series of targeted professional development presentations and discussions with faculty members from clinical, as well as from developmental and legal areas are included in the speaker series to specifically address professional development topics that may not readily lend themselves to classroom material. Examples of topics covered in this professional development sub-series include preparing your Curriculum Vitae, writing and submitting manuscripts for publication, applying for internship/postdoctoral/faculty positions, and submitting grant applications. The coordinators of the speaker series work closely with students and faculty to decide on relevant topics to be included each semester. Attendance is mandatory (exceptions require advance permission from primary mentor and DCT).

Encouraged … but not required

The Miami International Child & Adolescent Mental Health (MICAMH) Conference: The annual MICAMH conference is one of the world's leading interdisciplinary conferences on state-of-the-art, evidence-based prevention and treatments for mental health and educational problems in children and adolescents. Keynote lectures, didactic presentations, and hands-on breakout workshops are combined to teach trainees the basic principles of effective psychosocial, psychoeducational, pharmacological, and combined interventions, including clinic-based treatments, school-wide interventions, and parent training. Students are strongly encouraged to attend, and receive opportunities to formally present their work during scientific poster sessions.

Professional Development Brown Bag Series: Approximately 3 times per semester, the DCT (in collaboration and consultation with the professional development committee and student representatives) develops the schedule for topics in professional development that help to supplement the other training aspects of the program. Topics in the past have included grant writing, have to navigate the mentor-mentee relationship, applying for internship, and navigating the job market.

Graduate Student Data Blitzes: As part of the Graduate Professional Development Series, Graduate Student Data Blitzes are held twice each year. These Data Blitzes afford graduate students in Clinical Science an opportunity to formally present their research in slide format as they would at a national conference. Each student research presentation is roughly 10 minutes and is attended by the Center for Children and Families faculty and student body. Each presentation is followed by a brief question and answer session.

South Florida Child Psychology Research Conference: Beginning in spring 2014, Florida International University and the University of Miami have co-sponsored an annual one-day cross-university mentoring conference for graduate students who are attending universities in South Florida. This South Florida Child Psychology Research Conference focuses on research in the domains of clinical child psychology and developmental psychology, and this past year brought researchers together from four universities: Florida International University, University of Miami, University of South Florida, and Florida Atlantic University. The topics covered at the conference in panel discussions include grantsmanship and early career funding opportunities, working with diverse research populations, developing writing skills, long-term career planning, and networking. Students also present their research in slide and poster formats as they would at national conferences, and receive feedback from faculty and peers who attend the conference. Students are invited to present their research at any stage of development or completion. The conference has been funded by generous support from the Center for Children and Families at FIU and by the National Science Foundation SEEDS (Scientists and Engineers Expanding Diversity and Success).

GSAW Scholarly Forum: UGS hosts an annual spring Graduate Student Appreciation Week that begins always with the 2-day Scholarly Forum highlighting graduate research at FIU. The forum has increased in size over the past few years, and currently

includes 100+ presentations. Students may submit proposals to the Graduate Professional Student Committee. The forum includes poster sessions and oral presentations, provides a platform for graduate students to showcase their research, compete for awards and cash prizes, gain professional experience, and compete for a place at the state's Graduate Symposium.

Conference Travel: Scientific conferences and related professional travel can offer students unparalleled opportunities to learn firsthand the latest findings in their areas of interest, to present their work in professional settings, to directly communicate with a broad array of professionals and leaders in the field, and to develop cross-institution networks that are critical for professional development. Annual or biennial meetings that many of the faculty and students regularly attend include the American Psychological Association (APA), Association for Psychological Sciences (APS), Association for Behavioral and Cognitive Therapies (ABCT), and Society for Research in Child Development (SRCD). To support and promote FIU graduate students in Clinical Science to attend professional conferences, all students are eligible for $500 in annual reimbursement for professional travel from the FIU Graduate and Professional Student Committee (GPSC) as well as an additional $200 in annual reimbursement for professional travel from the FIU College of Arts, Sciences & Education.

Teaching Opportunities: Students are encouraged but not required to teach during their graduate training. The Director of Graduate Studies is responsible for TA allocations that are intended to support the undergraduate mission of the university. All incoming students are required to complete a one-credit TA course during their welcome orientation. Students in their first or second year of training that are funded on a TA line will assist with undergraduate courses (typically when enrollment exceeds 100 students). Courses may be at the Modesto A. Maidique campus, Biscayne Bay Campus, or may be online. Students may be assigned to assist full-time faculty, adjunct faculty, or advanced graduate students. Responsibilities may vary but are expected to include the following: attend class, hold regular office hours, respond to student emails within 24 hours, assist with grading, proctor exams and occasionally, facilitate lectures or lead discussions. Some students may be assigned to the proctor pool rather than an individual course. Students that have completed their Master's degree en route to the Ph.D. are eligible to become an instructor of record. The Department of Psychology requires that students teach a section of Research Methods, with standardized syllabus and format, under supervision of Dr. Ryan Winter, before they are permitted to teach a larger lecture course (e.g., Abnormal Child Psychology) or upper-level seminar (e.g., Personality, Psychology of Parenting). Students preparing to teach their own course will participate in an annual department spring training workshop, facilitated by the Director of Graduate Studies, that will cover course and syllabus preparation, instructional and assessment techniques, grading and resources for handling student problems as they arise. Students are also encouraged to explore resources available at the Center for Advancement in Teaching, http://undergrad.fiu.edu/cat/.

IIIE. Multidisciplinary Training

Minor in Quantitative Psychology

Students may pursue a Minor in Quantitative Psychology. Common core requirements for the department require all students to complete Biostatistics I, Quantitative Methods II, and Multivariate Analysis. Clinical science students are required to complete one additional advanced analytic elective. Students who wish to complete a Minor in Quantitative Psychology are required to complete two additional advanced analytic electives, for a total of 6 statistics courses. Students must achieve a minimum of B- in the course in order for it to be counted toward the minor. Electives may be selected from the following list of approved courses. Students may request approval for courses not on the list from Dr. Stefany Coxe in the Department of Psychology. Dr. Coxe is also an Associated Faculty of the clinical science program and affiliated with both the CCF and the Integrated Biostatistics Center.

NOTE: The Ph.D. is awarded in Psychology. Neither the Clinical Science specialization nor the Quantitative Minor will be represented on your student transcript.

Introduction to SEM for Psychological Research (PSY 5939): This course is an introduction to structural equation models as applied to problems in the social sciences, broadly defined. The major purpose of the course is to familiarize you with the technique of structural equation modeling and to provide you with working knowledge of AMOS and MPLUS, computer programs designed to execute the analysis of a broad class of structural equation models. We consider numerous advanced topics, described below. The goal of the course is to expose students to a variety of analytical techniques so that they may become proficient in using SEM analyses to answer individual research questions.

Longitudinal Data Analysis (PSY 5939 / PHC 6056): This course covers topics related to statistical analysis of longitudinal data, focusing on methods used in the social sciences and health research. Topics build on a basic ANOVA and regression (general linear model) framework and include ANCOVA, mediation, multilevel modeling of longitudinal data, and latent growth modeling. Students will be able to analyze, interpret, and write up results using these methods.

Categorical Data Analysis (PSY 5939): This course covers topics related to statistical analysis of categorical outcome variables, focusing on methods used in the social sciences. Topics include chi-square and other non-parametric methods for categorical outcomes, the generalized linear model (GLiM, including logistic regression, Poisson regression, and survival analysis), and repeated measures extensions of GLiM (such as GEE and generalized linear mixed models). Students will analyze, interpret, and write up results using these methods.

Systematic Review & Meta-Analysis (PHC 6062): This course is designed to train students in the conduct of a systematic literature review and developing the skills critical for evidence-based clinical and public health practice. This course will provide a detailed description of systematic review process and will combine didactic sessions with in-class laboratory sessions. Students will be provided step-by-step guidance on how to perform a systematic review & meta-analysis. They will be expected to apply all the tools taught in the class to a topic of their choosing. The final deliverable for the course will be a systematic literature review with/without meta-analysis.

Dual Major with Cognitive Neuroscience (12 credits)

FIU Psychology launched the Cognitive Neuroscience Doctoral Program in fall 2014. Students in the Clinical Science program may explore the option of a double major. This opportunity reflects acknowledgement of the increasing importance of training in the biological bases of behavior so that students can access a broader literature relevant to their research area and develop skills necessary for participating in multidisciplinary research projects.

NOTE: The Ph.D. is awarded in Psychology. Neither the Clinical Science specialization nor the Cognitive Neuroscience dual major will be represented on your student transcript.

- *Eligibility*

Clinical Science students pursuing a program of research related to cognitive neuroscience are welcome to apply for the double major and must have permission of their primary mentor and DCT to apply. Students are encouraged to apply prior to their matriculation, but are welcome to apply at any time during their training. Current students must be in good academic standing. Eligibility will be determined by faculty of the cognitive neuroscience program, based on review of application materials as described below.

- *Application Process*

Clinical science students may apply to double major in Cognitive Neuroscience by completing the following steps:

1. Submit to the Cognitive Neuroscience program director a summary describing how completing the double major aligns with their research interests, training goals, and professional trajectory. The application must be approved and signed by the student's primary mentor and DCT.

2. Identify a faculty mentor within Cognitive Neuroscience that agrees to serve on masters project and dissertation committees. At least one faculty member in the Cognitive Neuroscience program must serve on each committee.

3. Provide an updated curriculum vitae to be considered along with student's original application to the Clinical Science program.

- *Obtaining Approval*

The faculty of the Cognitive Neuroscience program will review the student's original application to FIU (academic transcripts, resume, letters of recommendation) and updated curriculum vitae, and will consider the extent to which the student's proposed research interests reflects their program goals and faculty expertise. Students that are accepted for the double major will receive an official memorandum of acceptance from the Cognitive Neuroscience program director. The memorandum will be added to the student's file and forwarded to the University Graduate School.

- *Requirements*

In order to complete the double major in Clinical Science and Cognitive Neuroscience, students must fulfill all course requirements of both programs. Students will be able to accomplish this within the 6 year Clinical Science timeline by adding two courses to their schedule (tuition waiver covered) during their first or third year and by selecting approved Cognitive Neuroscience courses to fulfill Clinical Science breadth and elective course recruitments. In most cases, Clinical Science program milestones (Master's Project, Candidacy Paper, Dissertation Grant Application) should fulfill those of the Cognitive Neuroscience program, though students should discuss this with their primary mentor (Clinical Science) and committee member (Cognitive Neuroscience) to be sure.

- *Withdrawal from the Double Major*

There are three reasons why students may withdraw from the double major. First, students may determine during the course of their doctoral training that the double major no longer reflects their evolving research interests. These students should discuss this with their primary mentor and then, if deemed appropriate, request withdrawal from the Cognitive Neuroscience program. Second, students identified during the Clinical Science annual student performance review as requiring remediation may be recommended to withdraw from the Cognitive Neuroscience program. Remediation may reflect poor academic standing (grades fall below B- in required courses or overall GPA falls below 3.0), failure to meet program milestones in accordance with program timelines, or poor academic or professional conduct. Third, students identified during the Cognitive Neuroscience annual student performance review as under-performing in cognitive neuroscience courses (grades fall below B-) may be recommended to withdraw from the program.

IIIE. Psychology Internship

There are several ways in which we support our students to help them become competitive for the APPIC Clinical Psychology Internship match. First, two committees provide workshops, panel discussions, and presentations aimed at developing skills important to the internship match. The Professional Development Committee provides workshops to all students and includes information on CV preparation, tracking hours, ethics, and career paths and opportunities. The Internship Committee provides complementary workshops, panel discussions, and presentations (oftentimes in conjunction with the Professional Development Committee), but focuses more on supporting students during the year they are applying to internship. As such, the Internship Committee assists students with site selection, preparing the APPIC application, interviewing, and pre- and post-match support. Because our program is new, the Internship Committee coordinates with current faculty to contact internship sites of highest interest to our students. In this way, we can introduce our program to internship sites and inform them about the students we train. As noted in other sections of this manual, during the periodic planned evaluations of our students, we also review students' progress toward developing a strong internship application.

Steps Toward Applying for Internship

1. All students are required to enter the APPIC Internship Match.

2. Students are eligible to apply for internship during the fall semester of their 5th year. <u>Students must obtain written permission from the DCT in order to register for the match</u>. Students who have achieved the following by October 1st are eligible to register for the Match and accept an internship:
- Master's Project submitted for publication
- Competency Examination: Candidacy Paper submitted for publication; Dissertation grant under review
- Good Academic Standing (grades B- and above, overall GPA 3.0 or above)
- Submission to the University Graduate School of the following D-forms:
  - D1: Appointment of Dissertation Committee
  - D2: Application for Candidacy
- Dissertation Prospectus Meeting has been held and the appointed dissertation committee has approved the prospectus (or approval is pending, contingent on requested revisions and signature by chair). D3 form (Dissertation Proposal) is pending IRB approval.
- Coursework (75 credits) has been completed (or will be completed by December of the same year in which the student is applying)
- A minimum of 3 Advanced Clinical Practicum (15 credits and 500 clinical hours) have been completed, including one that provides training in assessment, one that provides training in treatment, and one that serves as a breadth practicum. Students must

have achieved a minimum level of competence in every domain, with at least one supervisor indicating scores of 3 (Intermediate Performance) or 4 (Advanced Performance) on items corresponding to Program Goals 2 (Competency to deliver evidence-based clinical Care) and 4 (Professionalism in research and practice)

Note: Students who wish to apply sooner than their 5th year are encouraged to discuss this with their primary mentor and then, with their mentor's permission, submit a petition to the Professional Development Committee for early application. This option is most relevant for students that entered the program with a Master's degree.

3. Students will submit to the Professional Development Committee a list of internship sites to which they wish to apply. Lists will be due no later than September 15th. Students will receive feedback from the committee within two weeks of submitting their lists.

4. Students will provide the DCT with materials (e.g., curriculum vitae, summary of research goals) to assist in preparation of the DCT statement. These materials are due no later than October 1st.

5. Students are encouraged to attend Internships on Parade at the annual Association for Behavioral and Cognitive Therapies conference, which provides an opportunity to meet faculty and training directors at sites to which they are submitting applications.

6. In the event of a non-match during Phase I, students will enter Phase II. In the event of another non-match, students will discuss with their primary mentor, the DCT, and the Professional Development Committee, several options may be considered including a possible in-house customized internship and reapplying the following year. These discussions will be held on a case-by-case basis and decisions will depend in part of funding available; training opportunities; and student goals, needs, and preferences.

Costs, Credits, and Fees during the Internship Year

Students will continue to register for dissertation credits during fall, spring, and summer of their internship year per the guidelines below. In addition, students will register for 0 credits of internship, allowing internship to appear on their transcripts.

Students that have completed all of their academic requirements, successfully defended their dissertations, and *submitted the FINAL ETD to the UGS* are required to register for one dissertation credit (PSY 7980) + 0 internship credit (CLP 6948).

Students that are still preparing their dissertations are required to register for three credits: 3 dissertation credits (PSY 7980) + 0 internship credit (CLP 6948). If a student defends their dissertation and submits the FINAL ETD to the UGS during internship, they may reduce their credits in the *subsequent semesters* to 1 dissertation credit + 0 internship credit.

Tuition credits will be charged to the student according to the in-state or out-of-state status under which they enrolled in the university, unless they have been approved for a change of residency status. Students are encouraged to apply for a change in residency status as soon as they are eligible to do so, beginning of their second year in the program.

University fees associated with tuition credits are waived for all students.

IV. Degree Requirements

A. Program Milestones
B. Competency Benchmarks

IVA. Program Milestones

Students are required to be enrolled full-time, receive training on-site for a minimum of 4 years, complete a total of 90 university credits and specific degree requirements designed strategically to ensure a balanced combination of breadth and depth of expertise in clinical research and to build scholarship that enhances student marketability for academic careers in psychological clinical science. Milestones include master's project, dissertation grant application, candidacy paper, dissertation and internship.

Course Completion

Grades: A grade of B- or above is considered passing. A grade below B- is considered failing. Students are required to attain a grade of B- or above in all courses in order to remain in good academic standing. Students are required also to maintain a GPA at or above 3.0 to remain in good academic standing.

Incompletes: Graduate students may receive an incomplete grade only for a serious interruption (e.g., extended illness) not caused by the student's own negligence. Coursework must be completed and an incomplete grade must be changed within two terms or it will automatically default to an F. There is no exception or extension of the two-term deadline, which includes summer term.

Master of Science (M.S.) in Psychology: Major in Clinical Science

The Clinical Science Program in Child and Adolescent Psychology does not offer a Terminal Master's degree. However, aligned with other programs in the Department of Psychology, an M.S. will be conferred en route to the Ph.D. following completion of the following requirements. The Master of Science Major in Clinical Science requires a minimum of 36 semester credits of graduate work beyond the baccalaureate, including a non-thesis research project based upon the student's original research. A maximum of 6 credits of post-baccalaureate course work may be transferred from another institution with the approval of the Director of Clinical Training (for additional information, please refer to Transfer of Credits in Policies and Procedures).

Training Requirements: In order to obtain their M.S., clinical science doctoral students will be required to complete the following departmental common core course requirements; clinical science course requirements; supervised research and practicum credits; and a non-thesis Master's Project as listed below:

(a) Common core requirements (9 credits of statistics/methodology courses)

        PSY 5939 Special Topics: Quantitative Methods I
        PSY 5939 Special Topics: Quantitative Methods II

PSY 5246 Multivariate Statistics

(b) Clinical Science courses (15 credits)

CLP 5007 Psychological Clinical Science I

PSY 6219 Research Methods in Clinical Psychology
CLP 6471 Assessment and Treatment I: Internalizing Problems
CLP 6472 Assessment and Treatment II: Externalizing Problems

(c) Affective Breadth Requirement (3 credits)

CLP 6060 Affective Bases of Behavior (3 credits)

(d) Foundation Practicum (6 credits)

CLP 6432 Foundation Practicum I (3 credits)
PSY 5939 Foundation Practicum II (3 credits)

(e) PSY 5918 Supervised Research (6 credits)

Master's Project: In order to obtain their M.S., clinical science doctoral students will be required to complete a Master's Project. The Master's Project is a _manuscript submitted for publication_ on which the student is lead author and based on the student's independent research during years one and two of graduate training. The manuscript may be an empirical, review or conceptual paper. The manuscript will require approval from the student's committee, consisting of their primary mentor and one additional reader (core or associated faculty). Students are expected to work closely with their mentor, exchanging drafts and revising the manuscript over the course of their second year. Students are required to provide their additional reader with a minimum of one month to review the manuscript and provide feedback. Readers may request a revised draft of the manuscript before providing approval. If the second reader remains dissatisfied with the quality of manuscript following revisions, they will communicate their concerns to the primary mentor and student. This will be followed by two options for consideration by the primary mentor, additional reader, and student: Option 1. The student may complete additional revisions, and resubmit the manuscript to their second reader for further review (corresponding to a "revise and resubmit' editorial process) or Option 2. The student may identify a third reader with relevant content expertise, approved by the DCT, to provide an independent review of the manuscript. Students should request that their primary mentor and additional reader complete the Master's Project Rubric for Evaluating Research Competency. Each faculty member will

complete an independent evaluation of the student's competencies. *Students are required to achieve performance levels of "3" and "4" on all criteria by both readers.* It is the student's responsibility to submit this rubric to Lara Wilson for their file.

Students are expected to complete course requirements and submit their Master's Project for publication by the end of spring semester of their second year. Completion of an approved Master's Project is required for receiving the M.S. degree on their transcript and for advancing to doctoral candidacy. Students who have not completed an approved Master's Project by the end of spring semester of their second year will be notified in writing of this *Benchmark Pending* following the annual student performance review and will meet with their primary mentor to plan systematically for timely completion of this requirement. Students who have not completed an approved Master's Project by end of fall semester of their third year may risk losing their funding.

Advancing to Doctoral Candidacy

Advancing to doctoral candidacy requires completion of the M.S.; course, research, and practicum requirements described above; additional course requirements; research and practicum credits; and successful completion of the 2-part competency examination as described below.

Training Requirements: In addition to the requirements listed above for the M.S., the following credits are required for students to advance to doctoral candidacy.

(a) Clinical Science courses (6 credits)

> CLP 6473 Assessment and Treatment III: Developmental, Learning, and Pediatric
> > Disorders
> CLP 6530 Dissemination and Implementation Research

(b) Breadth / Analytic / Elective courses (9 credits from the list below or alternative course selection with program director approval). These courses are designed to fill specific breadth requirements (cognitive, social, and biological bases of behavior), the advanced analytic requirement, and one course elective.

> PSY 5605 History and Systems

> Breadth Courses:
> DEP 5058   Biological Basis of Behavior Development
> CLP 6426   Clinical Neuropsychology

PSY 5939   Cognitive Development
EXP 5667   Cognitive Neuroscience
SOP 5058   Proseminar in Social Psychology

Advanced Analytic Courses:
PSY 5939   Structural Equation Modeling
PSY 5939   Categorical Data Analysis
PSY 5939   Longitudinal Data Analysis
PHC 6062   Systematic Review and Meta-Analysis
PHC 6907   Biostatistical Data Management Concepts and Procedures

(b) PSY 5918 Supervised Research (6 credits)

(c) PSY 6943 Advanced Clinical Practicum (6 credits)

Competency Examination: The competency examination in clinical science requires (1) a dissertation grant application (NRSA, R36, or equivalent) and (2) a candidacy manuscript submitted for publication. First, students will submit a dissertation grant application by the end of spring semester of their third year (corresponding to grant deadlines and in consultation with their primary mentor). Second, students will submit a second manuscript on which they are lead-author ("candidacy paper") for publication. The manuscript may be an empirical, review, or conceptual paper, *but at least one of the two papers fulfilling program requirements (i.e., Master's Project and Candidacy Paper) must be an empirical paper*. The submitted manuscript will require approval from the student's primary mentor and one additional reader (core or associated faculty). Students are expected to work closely with their mentor, exchanging drafts and revising the manuscript over the course of their second year. Students are required to provide their additional reader with a minimum of one month to review the manuscript and provide feedback. Readers may request a revised draft of the manuscript before providing approval. If the second reader remains dissatisfied with the quality of manuscript following revisions, they will communicate their concerns to the primary mentor and student. This will be followed by two options for consideration by the primary mentor, additional reader, and student: Option 1. The student may complete additional revisions, and resubmit the manuscript to their second reader for further review (corresponding to a "revise and resubmit' editorial process) or Option 2. The student may identify a third reader with relevant content expertise, approved by the DCT, to provide an independent review of the manuscript. Students should request that their primary mentor and additional reader complete the Candidacy Paper Rubric for Evaluating Research Competency. Each faculty member will complete an independent evaluation of the student's competencies. *Students are required to achieve performance levels of "3" and "4" on all criteria by both readers.* It is the student's responsibility to submit this rubric to Lara Wilson for their file.

Students will submit the manuscript for publication by the end of spring semester of their third year. Students who have not completed their candidacy requirements by the end of spring semester of their third year will receive written notification of this *Benchmark Pending* following annual student performance reviews and will meet with their primary mentor to plan systematically for timely completion of this requirement. Students who have not completed their candidacy requirements by the end of fall semester of their fourth year may risk losing their funding.

Please Note: Students that have advanced to candidacy are required to enroll in a minimum of 3 credits of PSY 7980 each semester to comply with the Board of Governors Continuous Enrollment policy. Students must advance to candidacy before their dissertation prospectus meeting with their committee.

Doctoral of Philosophy (Ph.D.) in Psychology: Major in Clinical Science

Graduation with a Ph.D. in Psychology: Major in Clinical Science requires completion of the requirements listed above for the M.S. and for advancing to doctoral candidacy. In addition, students are required to complete additional coursework and a dissertation as listed below.

Training Requirements: In addition to the requirements listed above for advancing to candidacy, the following credits are required for students to complete their doctoral degree.

(a) Breadth / Analytic / Elective courses (9 additional credits from the list below or alternative course selection with program director approval). These courses are designed to fill specific breadth requirements (cognitive, social, and biological bases of behavior), the advanced analytic requirement, and a course elective.

PSY 5605 History and Systems

Breadth Courses:
DEP 5058   Biological Basis of Behavior Development
CLP 6426   Clinical Neuropsychology
PSY 5939   Cognitive Development
EXP 5667   Cognitive Neuroscience
SOP 5058   Proseminar in Social Psychology

Advanced Analytic Courses:

PSY 5939	Structural Equation Modeling
PSY 5939	Categorical Data Analysis
PSY 5939	Longitudinal Data Analysis
PHC 6062	Systematic Review and Meta-Analysis
PHC 6907	Biostatistical Data Management Concepts and Procedures

(b) PSY 7980 Dissertation Research (15 credits)

(c) PSY 6943 Advanced Clinical Practicum (3 credits)

(d) Internship

Dissertation: Following advancement to candidacy, students will adhere to the University Graduate School requirements for a doctoral dissertation. This includes a specific timeline and completion of D-forms detailed on the UGS website (gradschool.fiu.edu/student-forms.shtml):

- D-1 Appointment of a dissertation committee
- D-2 Advancing to candidacy (Note: D-2 will already have been submitted)
- D-3 Approval of dissertation prospectus
- D-5 Dissertation approved for defense

Committee: Per UGS guidelines, dissertation committees will include three faculty members from within the psychology department (including but not limited to the clinical science program) plus one external member (must be FIU faculty). Students may invite a fifth member to join their committee from outside of FIU, with approval from UGS.

Prospectus: Students will submit to their committee a copy of their dissertation grant application (including: abstract, specific aims, research design, references, and any appendix material referenced in those documents) plus an amendment that details how the research design will be revised in the absence of funding (e.g., changes to sample size, compensation guidelines, recruitment, or analytic method). Dissertation committee members should receive the prospectus at least 2 weeks prior to the committee meeting. Students will defend their prospectus during a 2-hour meeting planned with the dissertation committee that includes a brief slide presentation (approximately 30 minutes) followed by question / answer period. Students are not permitted to serve food during their prospectus meeting. Potential modifications to research questions and design will be discussed. Based on the extent of modifications requested by committee members, they may ask to review the revised prospectus or, alternatively, defer final approval to the

committee chair. *Consensus is required among committee members for approval.* The final approved prospectus should reflect all required modifications and becomes a contract between the student and their committee for work to be completed. Students should bring the Dissertation Prospectus Rubric for Evaluating Research Competency to their proposal meeting. Each committee member will complete an independent evaluation of the student's competencies. *Students are required to achieve performance levels of "3" and "4" on all criteria by all committee members on the Dissertation Defense Rubric.* It is the student's responsibility to submit this rubric to Lara Wilson for their file.

   Dissertation: A doctoral dissertation can be based on varied methodology (e.g., quantitative or qualitative studies; original data collection, secondary data analysis, or meta-analysis; open trial or randomized trial; experimental or quasi- experimental designs). As is becoming the norm in this field, the doctoral dissertation can be a submission-ready manuscript in style and length. Accompanying the dissertation study is a curriculum vitae and reprints of the student's publications that demonstrate the body of scholarship pertaining to or supplementing the dissertation. Students may request additional meetings with committee members as needed. In addition to content and formatting requirements set forth by the UGS, the final dissertation portfolio should include the following: (a) curriculum vitae, (b) reprints of student publications that demonstrate the overall body of scholarship pertaining to the dissertation, (c) dissertation study and (d) appendix materials, as appropriate, including copies of all measures used for data collection. Students should supply their committee members with a full copy of their dissertation at least 2 weeks prior to requesting their signature on the D-5, and a revised copy of their dissertation at least 2 weeks prior to the planned defense. Students will defend their dissertation during a 2-hour meeting planned with the dissertation committee that includes a brief slide presentation (approximately 30 minutes) followed by question / answer period. Students are not permitted to serve food during their defense. Students should bring the Dissertation Defense Rubric for Evaluating Research Competency and CAS Graduating Graduate Student Assessment to their defense meeting. Each committee member will complete independent evaluations of the student's competencies. It is the student's responsibility to submit both rubrics to Lara Wilson for their file. *Students are required to achieve performance levels of "3" and "4" on all criteria by all committee members on the Dissertation Defense Rubric and minimum performance levels of "3" or above on all criteria by all committee members on the CAS Assessment.* Students are *encouraged* to complete and defend their dissertations by the end of their 5th year, before leaving for internship. Students are *expected* to complete and defend their dissertations by the end of their 6th year in order to graduate upon completion of internship.

Note: Dissertation credits (PSY 7980) will be listed as IP (In Progress) on student's Panther Degree Audit (PDA) until the semester during which the student will graduate. Following the defense, students are no longer required to complete the annual UGS evaluation.

Attached below is a curriculum worksheet that will be reviewed individually with each student as they progress through the program. Students should keep a copy of the worksheet in order to monitor their progress towards meeting the various milestones that are required in the program. As you can see from the worksheet, some courses meet multiple categories. Please consult with the DCT when completing the worksheet to ensure courses are meeting requirements.

Name:_____

Competency Requirements	Requirements		List Foundational Kno... applicable)
Discipline Specific Knowledge			
Category 1: History and Systems	PSY 5605		
Category 2: Basic Content Areas	"Foundational" met	"Foundational" not met	
2a. Affective Aspects of Behavior	CLP 6060		
2b. Biological Aspects of Behavior	DEP 5058, CLP 6426		
2c. Cognitive Aspects of Behavior	DEP 5065, EXP 5661, EXP 5508		
2d. Developmental Aspects of Behavior	DEP 5065		
2e. Social Aspects of Behavior	SOP 5058		
Category 3: Advanced Integrative Knowledge	DEP 5065 Cognitive Development EXP 5667 Cognitive Neuroscience; maybe others		
Category 4: Methods of Inquiry/Research			
4a. Research Methods	PSY 6219 (Research Methods), CLP 6530 (D&I)		
4b. Statistical Analysis	PSY 5939 (Quant 1), PSY 5939 (Quant 2), PSY 5246 (Multivariate), other quant offerings		
4c. Psychometrics	PSY 5939 (Quant 2), PSY 5246 (Multivariate), PSY 6219 (Research Methods), Foundations prac I		
Profession-Wide Competencies			
1. Research	PSY 6219, PSY 6530, dissertation, masters requirement, comp requirement		
2. Ethical and Legal Standards	required coursework, e.g., D&I, Research Methods, Foundation Practicum I & II, completion of CITI training		
3. Individual and Cultural Diversity	required coursework, Professional development brownbag		
4. Professional values/attitudes/behavior	Foundations Practicum I & II, participation in lab activities, CCF orientation		

Dissertation Timeline Example: Summer Graduation

Submit draft dissertation to committee	May 13
Last Day to Submit D5 to Department	May 27
Last Day to Submit D5 to CASE	June 3
Last Day to Submit D5 to UGS	June 10
Submit final dissertation to committee	June 17
Defense	July 1
Last Day to Submit Final ETD to Department	July 15
Last Day to Submit Final ETD to CASE	July 22
Last day to submit Final ETD to UGS	July 29
Graduation	August 8

IVB. Competency Benchmarks

Training in Clinical Science at FIU is competency and outcome driven. Annual Performance Reviews are used to assess student progress at the end of each year, with benchmarks corresponding directly to competencies, program milestones, and professional conduct.

Annual Student Performance Reviews

Faculty members meet annually for one full-day meeting in May to review progress by all students. Benchmarks for each year in training are described below. Students are expected to remain in good academic standing and complete program requirements in accordance with the planned timeline. Students will receive a letter following the annual performance review, informing them of their standing in the program. A copy of the letter will be placed in the student's file.

Good Academic Standing: Students will be required at all years of training to remain in good academic standing. This is defined as satisfactory performance in coursework (i.e., student maintained "A"s and "B"s in all courses) and a cumulative GPA at or above 3.0, corresponding to UGS policy. Additional criteria, related to achievement of program requirements and professional conduct, are denoted below for each year. Note: Students must achieve a grade of "B-" or higher to pass each course. Students who receive below a B- in any course will be required to enroll in that course again.

Written Notification of Progress: Following the annual student performance review meeting in May, students will receive a letter documenting their progress. Students are required to meet with their mentor (and dissertation committee if appropriate, as described below) to review their past year's performance and plan for the subsequent year, including completion of the Annual Student Evaluation and Mentoring Plan, described next.

Annual Student Evaluation and Mentoring Plan

Students are required to submit the Annual Student Evaluation and Mentoring Plan to the University Graduate School by end of May. (The Director of Graduate Studies in the psychology department will need to review each student's evaluation and mentoring plan before its submission to the UGS; therefore, students are encouraged to pay close attention to department deadlines for this form). Students in their first, second, and third years of doctoral training will complete the self-evaluation and then meet with their mentor to discuss progress and training goals. Students that have advanced to candidacy and have an approved D-1 form on file with UGS will complete the self-evaluation and then meet with their entire dissertation committee to assess progress and timeline for completion. It is the student's responsibility to schedule meetings, obtain required signatures, and submit the evaluation to the Director of Graduate

Studies in the Department of Psychology at least two weeks prior to the UGS deadline (typically last week of May). *Note: Once students have defended their dissertations, they are no longer required to complete the annual UGS Student Evaluation and Mentoring Plan.*

Performance Improvement Plans: Department policy regarding the University Graduate School Annual Evaluation and Mentoring Plan is described in the Department of Psychology Student Handbook and reads as follows: "Any student who receives "occasionally does not meet expectations" in one or more areas must have a performance improvement plan in the evaluation. The student and major professor must identify ways to address the shortcomings. The Director of Graduate Studies will summarize the evaluation and performance improvement plan in a memo that will be placed in the student's file. The student has one year to meet the requirements of the performance improvement plan. Students may lose funding or be dismissed from the program if they are not maintaining satisfactory progress in the program, their assistantships, and if they do not meet the expectations in the performance improvement plan."

Year 1 Benchmarks

Met Benchmarks: Good academic standing AND Faculty mentor reports adequate progress toward their Master's Project (e.g., research question identified, data set identified, literature review in progress) AND "B-" or above in Foundation Practicum I AND No faculty concerns

Benchmarks Pending: Poor academic standing (e.g., student needs to repeat a course) OR Progress toward Master's Project is inadequate (e.g., student has not identified a research question or topic for review) OR Below "B-" in Foundation Practicum I OR Faculty report concerns about students' overall or inconsistent performance, professionalism, or commitment to training

Remediation Required: Poor academic standing OR Progress toward Master's Project is inadequate OR Below "B-" in Foundation Practicum I AND Faculty report concerns about students' overall performance, professionalism, or commitment to training

Year 2 Benchmarks

Met Benchmarks: Good academic standing AND Master's Project is submitted for publication AND permission to enroll in advanced clinical practicum (reflecting a grade of "B-" or above in Foundation Practicum I and II) AND No faculty concerns

Benchmarks Pending: Poor academic standing OR Master's Project is incomplete OR Grade below "B-" in Foundation Practicum I or II interferes with readiness for advanced clinical practicum OR Faculty report concerns about students' overall performance,

professionalism, or commitment to training

Remediation Required: Poor academic standing OR Master's Project is incomplete OR Grade below "B-" in Foundation Practicum I or II interferes with readiness for advanced clinical practicum AND Faculty report concerns about students' overall or inconsistent performance, professionalism, or commitment to training

Year 3 Benchmarks

Met Benchmarks: Good academic standing AND Candidacy Paper is submitted for publication AND Dissertation grant application is submitted AND Completion of at least 2 advanced clinical practicum, performing at levels of "2" and "3" on all domains of the Advanced Practicum Student Evaluation Rubric AND No faculty concerns

Benchmarks Pending: Poor academic standing OR Candidacy paper is incomplete OR Dissertation grant application is incomplete OR Completion of fewer than 2 advanced clinical practicum or performing below levels of "2" and "3" on all domains of the Advanced Practicum Student Evaluation Rubric OR Faculty report concerns about students' overall performance, professionalism, or commitment to training

Remediation Required: Poor academic standing OR Master's Project is not complete OR Completion of fewer than 2 advanced clinical practicum or performing below levels of "2" and "3" on all domains of the Advanced Practicum Student Evaluation Rubric AND
Faculty report concerns about students' overall performance, professionalism, or commitment to training

Year 4 Benchmarks

Met Benchmarks: Good academic standing AND Submission to the University Graduate School of the following D-forms: D1: Appointment of Dissertation Committee and D2: Application for Candidacy; and D3: Doctoral Dissertation Proposal. In addition, a prospectus meeting has been held AND the appointed dissertation committee has approved the prospectus (or approval is pending, contingent on requested revisions and signature by chair). Coursework (75 credits) has been completed AND Minimum 3 advanced clinical practicum (15 credits and 500 clinical hours) has been completed, performing at levels "3" or "4" on all domains of the Advanced Practicum Student Evaluation Rubric.

Benchmarks Pending: Poor academic standing OR incomplete D-forms (reflecting that the student's dissertation prospectus has not been approved by committee) OR Fewer than 3 advanced clinical practicum (15 credits and 500 clinical hours) have been completed

or performing below levels "3" or "4" on all domains of the Advanced Practicum Student Evaluation Rubric OR Faculty report concerns about students' overall performance, professionalism, or commitment to training.

Remediation Required: Poor academic standing OR Student has not advanced to candidacy OR Fewer than 3 advanced clinical practicum (15 credits and 500 clinical hours) have been completed or performing below levels "3" or "4" on all domains of the Advanced Practicum Student Evaluation Rubric AND Faculty report concerns about students' overall performance, professionalism, or commitment to training

Year 5 Benchmarks

Met Benchmarks: Dissertation prospectus approved, including revisions and signature by chair; IRB approval obtained; D-3: Doctoral Dissertation Proposal submitted and approved by UGS; and data collection is in progress. Student entered the APPIC Internship Match and is on target to graduate during summer following internship.

Year 6 Benchmarks

Met Benchmarks: Student is performing well on internship (by report of the internship director); Dissertation defense is complete and committee approved the dissertation.

Unique Circumstances

We acknowledge that several unforeseen circumstances may interfere with students' timely completion of program requirements. These include, but are not limited to, severe or extended illness, family circumstances, or change of primary mentor. Unique circumstances will be considered on a case-by-case basis. When deemed appropriate, students who maintain acceptable academic performance and conduct may remain in good academic standing even if they fail to complete program milestones in accordance with the timeline stated above.

Process for Remediation

Students that require remediation will meet with their mentor within two weeks of receiving their performance review letter to complete a Remediation Plan. The appropriate worksheet (related to program requirements or clinical competencies) will be used to summarize barriers that have interfered with meeting benchmarks and to generate options for removing barriers and facilitating

progress (e.g., reduced lab responsibilities, research credits, withdrawal from advanced practicum). These worksheets also will be used to plan a detailed timeline for completion of milestones or reassessment of clinical competencies. Students requiring remediation during one performance review cycle will meet with their mentor and obtain approval of the Remediation Plan from the DCT. Students requiring remediation during two or more consecutive review cycles (representing a full year) will meet with their mentor and the DCT. In these cases, discussion will focus on reasons for the student's ongoing difficulties, and this discussion in turn will inform a course of action. In cases where unique circumstances (e.g., severe or extended illness, family circumstances, change of mentor) have interfered with a student's progress, a modified timeline may be initiated (even in cases where a student elected not to request a formal leave of absence). In cases where unique circumstances have not interfered, and a student's slow progress instead reflects some combination of poor fit, motivation, or aptitude, then alternatives may be considered (e.g., change of mentor), or, the student may be at risk for dismissal. For students that have a Remediation Plan on file, progress will be discussed by all faculty in 6 months' time (during the subsequent mid-year or annual performance review meeting), and their performance review letter will include feedback on their adherence to (and when appropriate, completion of) the Remediation Plan.

Dismissal from the Program

Students who fail to meet benchmarks in accordance with the planned timeline may risk losing their funding. Students who require remediation for two consecutive reviews (e.g., May and the following January, representing a full year) may risk dismissal from the program. Academic misconduct and professional misconduct may place students at immediate risk for dismissal (refer to policy for Academic Misconduct in VB.).

Appeal Process

Unsatisfactory performance in the academic program reflects failure to meet benchmarks as described in detail above (benchmarks refer to academic performance as assessed by GPA, on-time completion of program milestones, demonstration of clinical competencies, and academic and professional conduct). Under circumstances by which a student is dismissed from the program, that student will have ten working days to appeal the dismissal decision. This appeal must be made in writing to the Dean of the University Graduate School (UGS). To appeal, a Petition for Exception to Graduate Requirements form, which can be found on the UGS website, must be completed. Dismissal from the university is for a minimum of one year and prohibits students from registering for any courses. After one year, the student may apply for readmission to the university for the same or a different program, or register as a non-degree-seeking student if applicable. Dismissed students who are readmitted or who register as non-degree-seeking students are placed on academic probation.

V. Resources and Procedures

      A. Facilities and Resources
      B. Potpourri of Policies and Procedures

VA. Facilities and Resources

Florida International University (FIU) is a four-year public research university, and one of the 25 largest public universities in the country. FIU offers more than 180 Bachelor's, Master's, and Doctoral programs across two main campuses and several academic centers. FIU is #1 in the nation in awarding Bachelor's and Master's degrees to Latino students. University research expenditures exceed $100 million per year. FIU emphasizes research, training, and mentorship as major components of its mission providing administrative resources for grants management, opportunities for training and career enrichment (e.g., through a newly-established faculty mentoring program in the College of Arts and Sciences), continuing education opportunities (e.g., through Office of Research Integrity, Department of Research), logistical support for the implementation of research (e.g., through the College of Arts and Sciences and University Technology Information Center), and support for protected research time.

School of Integrated Science and Humanity

The psychology department is part of the School of Integrated Science and Humanity (SISH). Established in 2009 by the College of Arts and Sciences, SISH brought together academic departments and innovative research centers to create a multi-disciplinary home for the study of biomedical, behavioral, cognitive, and neurosciences. SISH includes 165 faculty members from departments of Chemistry and Biochemistry, Forensic Science, Mathematics and Statistical Science, Philosophy, Physics, Psychology, and the Women's Studies Center. In partnership with colleges of Medicine, Education, and Engineering, and with state-of-the-art research facilities, the school fosters initiatives in biomolecular and cognitive neurosciences, developmental and clinical science, and science and mathematics education and supports an environment for innovation and intellectual exchange. SISH is housed in the newly constructed, $43 million Academic Health Center-4 (AHC-4) building with auditorium & small group instruction classrooms, wet and dry labs, office space, 2 conference rooms per floor each equipped with audio-visual meeting and teleconferencing technology, copy rooms, large common areas facilitating interactions between scientists with diverse backgrounds, and secure wireless networking.

Center for Children and Families

The Center for Children and Families (CCF) is an interdisciplinary research, clinical, and training facility with goals to advance basic knowledge of developmental processes and treatment of mental health and learning problems for children and adolescents. The CCF is part of the Department of Psychology, located on the Modesto A. Maidique campus of Florida International University.

Resources and Equipment. The physical facilities and resources of the CCF are state of the art, enabling CCF collaborators, including clinical child psychology graduate students and postdoctoral trainees, to conduct both large- and small-scale research and clinical activities with children and families with on-site, community, and school-based components. The CCF has facilities in the Academic

Health Center (AHC)-1, AHC-4, and AHC-5 complex, as well as in the building that houses the psychology department at FIU. The AHC-1 is the primary CCF clinical research facility with 11,000 square feet that houses 11 testing and clinical treatment rooms (with observational windows and wired for sound and video) ranging in size from individual testing rooms to a large group playroom and a space that can be configured as a living area for *in vivo* interventions, three fully equipped medical examination rooms (stadiometers, scales, exam tables, Dinamap blood pressure monitors), a locked medication facility, waiting rooms for parents and children, a journal library, two conference rooms and a larger presentation room equipped with audio-visual meeting and teleconference technology, a copy room, two large cubicle-equipped (each with a VOIP phone and networked computer) bullpen rooms for research staff and graduate students, a controlled access room for patient files, and 29 offices for faculty and staff equipped with VOIP telephones and networked computers. The CCF, in conjunction with the Department of Psychiatry at Herbert Wertheim College of Medicine at FIU, runs an outpatient child mental health clinic providing services for children and families. The clinic and developmental science laboratories house a large collection of assessment materials and treatment manuals. In the psychology building, Deuxieme Mason (DM), developmental science faculty laboratories also house two Tobii X-60 table-mounted eye-trackers, and an avian experimental laboratory fully equipped for developmental psychobiology research. These laboratories use approximately 5,000 square feet and are equipped with computer workstations for graduate students, a 6 TB networked data storage system, waiting room space for visiting families, and dedicated parking. Through the Department of Biomedical Engineering, CCF faculty has access to a MagVenture MagPro R30 Transcranial Magnetic Stimulation (TMS) System, and Advanced Neuro-technology (ANT) 64-electrode Electroencephalography System (EEG). Both systems are equipped with the Visor2 System with the NeuroNavigation Package, which facilitates TMS coil positioning and EEG source localization.

Personnel and Partnerships. There are currently35 Ph.D. faculty affiliates of the CCF representing the College of Arts, Sciences & Education, the Herbert Wertheim College of Medicine, and the Robert Stempel College of Public Health. Faculty brings a broad range of expertise in infant, child, and adolescent mental health and developmental psychology. In addition to the Ph.D. faculty, the CCF is home to 1 M.D. faculty (developmental pediatrician), severak postdoctoral fellows in clinical child or developmental psychology, a licensed clinical social worker, 4 licensed mental health counselors, 60 graduate trainees in clinical child and developmental science, numerous full-time research assistants/associates, and numerous undergraduate trainees. CCF administrative support staff includes several full-time grants management specialists, a data management specialist team, a clinical director, two clinic coordinators and numerous full time administrative support staff. The CCF has extensive relationships within the Miami-Dade County Public Schools; with primary care and specialty physicians; with The Children's Trust, the largest funder of child-focused services in Miami-Dade County; and with mental health facilities in South Florida all of which facilitate recruitment of target populations for child- and family-focused research and treatment.

Computers. Faculty members have personal computers equipped for word processing, data analysis, and graphics, and CCF buildings have full access to secure wireless networking. They also have access to a laser printer, digital scanner and color printer. All

computers have access to the Internet, E-mail, library information, and database searches. The CCF houses a large centralized data storage system, and FIU has an excellent computer facility with a DEC Alpha 7620 and VAX mainframe system. The facility is site licensed for a wide range of statistical software packages (MPLUS, SAS, SPSS, and others) available to researchers. The University Technology Services (UTS) and the College of Arts and Sciences Technology Information Center (CASTIC) provide instructional workshops as well as maintenance, updates, and repairs of computer hardware and software as needed. CCF faculty members receive support via Microsoft Sharepoint services provided by UTS. Data server space is provided via collaboration with the Center for Advanced Technology and Education in the FIU department of Engineering and Computer Science.

Research Electronic Data Capture (REDCap). Florida International University, in collaboration with Vanderbilt University and a consortium of more than 850 institutional partners (REDCap Consortium: http://www.project-redcap.org/), has developed a software toolset and workflow methodology for electronic collection and management of research and clinical trial data called Research Electronic Data Capture (REDCap; Harris, Thielke, Taylor, Payne, Gonzalez, & Conde, 2008). REDCap is a scalable, secure, enterprise-level application. Planning, configuration and end-user support for REDCap (https://cateredcap.fiu.edu/) is provided by the Center for Children and Families (CCF; http://ccf.fiu.edu) and the Department of Biostatistics (http://rscphsw.fiu.edu/biostatistics). The software is delivered via 256 bit SSL-encryption, and features: 1) an intuitive interface for the creation of case report forms (CRFs) and validated data entry; 2) audit trails for tracking data manipulation and export procedures; 3) procedures for importing data from external sources; the ability to relate CRFs to study events and schedule subjects via a calendar function; 4) extensive survey tools; and 5) automated export procedures for seamless data downloads to common statistical packages (SPSS, SAS, STATA, R). REDCap resides on servers within the Center for Advanced Technology and Education (CATE) (http://www.cate.fiu.edu) within the College of Engineering and Computing. This centrally-located data center features redundant, high availability infrastructure components, including more than 1 TB of SAN storage capacity, HP ProLiant DL380 G7 servers, VMWare Virtual Infrastructure Clusters and a system-wide Smart-UPS 3000VA Uninterrupted Power Supply. Full and incremental data backups are performed to our HP StorageWorks MSL2024 1 LTO-5 Ultrium 3000 FC Tape Library via the SAN; tapes are then stored in a locked safe within the CATE center. Software engineers within CATE group perform software maintenance and upgrades under the direction of, and in concert with, the Director of Data Services. The Division of Information Technology Security Office (http://security.fiu.edu) provides Policies and Standards related to physical and technical security, contingency planning and incidence response that align with the University Compliance Office policies and procedures regarding Health Information Privacy (http://policies.fiu.edu/browse.php?l=university_area&t=1&letter=1435) and Security (http://policies.fiu.edu/browse.php?l=university_area&t=1&letter=1439).

The Integrated Biostatistics Center

The Integrated Biostatistics Center (IBC) (formerly the Biostatistics Resource Laboratory) supports the university's research mission by providing infrastructure support relevant to biostatistics, data management and data quality enhancement. The IBC provides biostatistical support for research investigators and graduate students for preparing proposals, study design, data collection and management, statistical analyses, report and manuscript preparation and data archival. Facilities include computer workstations, server setups, access to data storage facilities plus relevant data management and statistical analysis software. Software available includes SAS, SPSS, M+, R, S+, REDCap, Qualtrics, etc, all the standard office software, plus a wide array of free ware for enhancing analyses and data explorations. Staffing includes the Director and Deputy Director, both faculty in the Department of Biostatistics, plus three other Biostatistics, Psychology and Statistics faculty, nine graduate students and two key staff that provide statistical and data management support. Also included is the server facility and associated staff, located in the Center for Advanced Technology and Education of the College of Engineering and Computing. Space includes offices for participating faculty, a conference room and cubicles for graduate students.

VB. Potpourri of Policies and Procedures

The Clinical Science Program in Child and Adolescent Psychology adheres to policies and procedures of the Department of Psychology, College of Arts, Sciences & Education and University Graduate School of Florida International University. Procedures described herein are intended to supplement - not to replace - department, college, and university procedures. In particular, procedures and details related to financial support, student grievances, misconduct, and others are available in the Graduate Student Handbook.

Committees

The Clinical Science Program maintains five faculty committees to ensure continuous quality improvement in the areas of Curriculum, Diversity, Practicum, Professional Development, and Student Life. Each committee consists of a chair and 2-3 additional faculty members. They meet several times each year and as need arises. Student cohort representatives are invited to participate in committee meetings.

Curriculum: The curriculum committee (new in 2016) is responsible for reviewing student feedback on required clinical courses and making recommendations to the faculty regarding possible adjustments to course content or timeline. The committee is expected to be familiar with the APA Commission on Accreditation Implementing Regulation on Discipline Specific Knowledge to ensure that our curriculum remains in compliance. Related, the curriculum committee is responsible for specifying competencies related to program breadth requirements and reviewing the syllabi of new courses that may satisfy those requirements, to ensure that all students receive equitable knowledge and competency evaluation. The curriculum committee will work closely with the diversity committee to ensure that curriculum related to diversity and ethics are similarly well specified, comprehensive, and equitable across students.

Diversity: The diversity committee (new in 2016) is comprised of equivalent numbers of faculty and students, and is responsible for supporting the successful recruitment and retention of students from diverse racial, ethnic, disability, sexual identity or orientation, economically or educationally disadvantaged, or other groups underrepresented in mental health science and service. Specifically, the committee is charged with (1) ensuring that competencies related to diversity training are well specified and evaluated (through interface with the curriculum committee) and (2) enhancing the experience of diverse students within our program through program and professional development opportunities including but not limited to the following examples: website link to materials and announcements related to diversity conference and fellowship opportunities; recruitment day activities for applicants from underrepresented groups; facilitating meetings and inviting speakers to contribute to our program dialogue on issues of diversity, cultural humility, and ethics; ensuring that our annual student and alumni surveys adequately assess the extent to which our program meets training needs and evaluates competencies in this area.

Practicum: The practicum committee is responsible for compiling and updating advanced practicum opportunities, managing and responding to student requests for specific practicum, and supporting students to balance needs for depth and breadth of training. In the event that there are several students pursuing a specific Advanced Practicum during a semester when not all of them can be accommodated (e.g., not enough clinic cases), the practicum committee will be responsible for assignments. This committee is additionally charged with ensuring faculty and student compliance with practicum evaluations and with facilitating linkages with community-based externships.

Professional Development: The professional development committee is responsible for ensuring that empirically informed cohort-appropriate professional development goals and opportunities are strategically integrated into doctoral training via mentor teams, course curriculum, speaker series, and regularly scheduled faculty panels that highlight a range of topics including but not limited to scholarship (e.g., curriculum vitaes, authorship, manuscript submission, grant writing, research ethics), clinical service delivery (e.g., diversity, ethics), and health and well-being (e.g., work-life balance, time management). Their task is to ensure that graduates enter the clinical science marketplace with the core foundation, advanced training, requisite skills, and professional savvy, responsibility, and humility to competitively pursue postdoctoral and junior faculty positions. Beginning in 2016, the professional development committee absorbed responsibilities of the prior internship committee; hence, this committee is now responsible for supporting advanced students throughout the entire process of planning for internship. They begin meeting with students during spring of their fourth year to introduce a timeline and plan for internship applications (e.g., navigating through APPIC, CV preparation, internship selection, essay writing, interviewing, preparing for the match, and post-match support).

Student Life: The student life committee (new in 2016) helps to ensure that our students benefit from a program culture that recognizes and celebrates accomplishments and acknowledges our role in the broader community. The committee is responsible for planning the annual fall welcome party and spring rising intern celebration. The committee also works with the rising 2nd year cohort to plan incoming orientation activities for new students, organizes presentation of the annual award for Graduate Excellence in Clinical Science, maintains the program website (with ongoing attention to maximizing its utility for students), and organizes other program events (e.g., NAMI Walks).

Credit Transfer

We adhere to FIU's University Graduate School policy regarding credit transfer toward a doctoral degree (http://gradschool.fiu.edu/documents/Graduate_Transfer_Credit.pdf). However, it is policy of the Clinical Science Program to require all students to participate in the core clinical science courses. Students may apply to transfer credits for courses that overlap substantively in learning objectives and content with core analytic courses or breadth requirements. Research and practicum credits may be considered for transfer as well. Students enrolling in doctoral training with a Master's degree or other advanced, post-

baccalaureate training are required to follow these steps if they wish to transfer credits.

1. Prepare a list of course titles & accompanying syllabi that may be eligible for transfer
2. Review with primary mentor, complete the University Graduate School Request for Credit Transfer, and submit the request to the Director of Clinical Training
3. The Director of Clinical Training will review the request and plan with the student for a competency assessment related to the course under consideration for waiver. This may include review of past assignments or assessment (written or oral examination) by the course instructor.
4. The course instructor will submit a memo to the DCT detailing how the student has demonstrated competency for each learning objective and recommending (or not) that the student be permitted to request a course waiver from the University Graduate School.
5. Following a positive recommendation from the course instructor, the DCT will submit a memo of approval to accompany a transfer request by the Director of Graduate Studies to the University Graduate School

Student Contribution to Program Governance

We believe continuous program improvement relies on input and feedback from students regarding curriculum and instruction (including coursework and practicum), faculty and student recruitment, and professional development. Therefore, we have created a system by which students provide ongoing and frequent input via the following mechanisms.

Cohort Representatives: Each cohort is asked to identify a student representative to serve as a liaison to the Director of Clinical Training. Cohort representatives are most frequently in contact with the DCT to share information with their cohort and to represent the views of their cohort on a variety of decisions that require immediate input. Cohort representatives are invited (minimum once/semester) to meetings of the Practicum, Professional Development, and Internship Committees. Their input has helped to shape the current design of those training opportunities, including the content and format of the Foundation Practicum sequence and the invited speakers and planned panel discussions for CCF Brown Bags.

Cohort Meetings with the DCT: Every semester the DCT plans a meeting with each cohort to provide updated information regarding program development, field questions related to program requirements most relevant to their current stage of training, and invite input on evolving procedures. Occasionally the DCT replaces or supplements individual cohort meetings with combined-cohort or student-wide meetings when the most critical and urgent information holds equal relevance across cohorts.

Graduate Recruitment Day: Current students are encouraged to engage actively in the recruitment of prospective students first by participating in the interview process (via phone and Skype) and, for accepted students invited to Graduate Recruitment Day, hosting

students overnight, participating in the student panel or campus tour, and sharing meals. Students are especially encouraged to speak candidly about program experiences, procedures, mentorship, requirements, strengths, and processes for continuous quality improvement.

Student Graduate Education Committee: One graduate student, elected by their peers, will represent the Clinical Science Program on the Student Graduate Education Committee. Director of Graduate Studies Leslie Frazier will chair this committee. The student representative will be expected to represent the needs of clinical science students during committee meetings and to communicate items discussed at the SGEC with classmates and colleagues, keeping them informed of new developments or changes at the department level that may impact them. These may include but are not limited to issues related to course availability and sequencing; teaching assignments, funding, and assistantships; and faculty and student recruitment. The student representative will serve as liaison between Dr. Frazier (and faculty and department administration) and clinical science students (all cohorts).

Change of Mentor

The clinical science program relies on a mentor model to provide students with guidance and support from the very beginning of their graduate careers. Changes in mentor-student relationships occur for a variety of reasons, including changes in student interests and focus, faculty leaving the department or sometimes conflicts in the mentoring relationship that make ongoing work together untenable.

If, for any reason, a student no longer has a Primary Mentor, the student should consult with the DCT and seek a new Mentor immediately. If there is an unavoidable delay in finding a new Mentor, the DCT will temporarily fill that post for up to one academic semester until a new Mentor has been identified. Individual faculty retain the right to approve or deny student requests for advising or directing research, and establish boundaries regarding the types of research they are willing to supervise. At the end of that term the student must have found a permanent
Mentor in order to continue in the graduate program. If the loss of a Mentor is out of the control of the student (e.g., the Mentor leaves FIU), the DCT will help the student find a new Mentor.

If a student in good academic standing is unable to successfully secure a research mentor within one semester, the relevant training committee will convene and work toward a solution that provides the student with an opportunity to accomplish program requirements under the supervision of an assigned research mentor. However, it should be noted that a student's ability to identify and secure a research mentor is one indicator of the capacity to form and maintain professional relationships, which is an important aspect of professional suitability for a career in psychology.

(Policy adopted from the Idaho State University Clinical Psychology Program and the University of Illinois at Chicago Clinical Psychology Program)

Trainees Who Experience Conflicts Working with Diverse Families

We are committed to a training process that ensures that graduate students develop the knowledge, skills, and attitudes to work effectively with children and families who embody intersecting demographics, attitudes, beliefs, and values. When graduate students' attitudes, beliefs, or values create tensions that negatively impact the training process or their ability to effectively treat members of the public, program faculty and clinical supervisors are committed to a developmental training approach that is designed to support the acquisition of professional competence. We support graduate students in finding a belief- or value-congruent path that allows them to work in a professionally competent manner with all families.

For some trainees, integrating personal beliefs or values with professional competence in working with all families may require additional time and faculty support. Ultimately though, to complete our program successfully, all graduate students must demonstrate competence to work with any family placed in their care in a beneficial and noninjurious manner. Professional competencies are determined by the profession for the benefit and protection of the public; consequently, students do not have the option to avoid working with particular client populations or refuse to develop professional competencies because of conflicts with their attitudes, beliefs, or values. This statement reflects dialogue in clinical science related to training and education in professional psychology (see Behnke, 2012; Bieschke & Mintz, 2012; and Forrest, 2012).

Behnke, S. H. (2012) Constitutional claims in the context of mental health training: Religion, sexual orientation, and tensions between the first amendment and professional ethics. *Training and Education in Professional Psychology, 6*(4), 189-195. DOI 10.1037/a0030809

Bieschke, K. J. & Mintz, L. B. (2012). Counseling psychology model training values statement addressing diversity: History, current use, and future directions. *Training and Education in Professional Psychology, 6*(4), 196-203.

Forrest, L. (2012). Educators' and trainers' responsibilities when trainees' personal beliefs collied with competent practice. *Training and Education in Professional Psychoogy, 6*(4), 187-188. DOI: 10.1037/a0030799

Electronic and Social Media Policy

The Council of University Directors of Clinical Psychology has discussed the implications of trainee information on websites, social media, email signatures, and voicemail messages. As technology changes, professional training includes becoming aware of the implications such information might have. Please consider the following:

- Internship programs report conducting web searches on applicants' names before inviting applicants for interviews and before deciding to rank applicants in the match.

- Clients are conducting web-based searches on trainees' names and finding information about therapists (and declining to come to clinics based on what they find).

- Employers are conducting on-line searches of potential employees prior to interviews and job offers.

- Legal authorities are looking at websites for evidence of illegal activities. Some prima facie evidence may be gained from websites such as photographs, but text may also alert authorities to investigate further.

- Postings to listservs might reflect poorly on oneself and the program

- Although signature lines are ways of indicating your uniqueness and philosophy, one is not in control of where the emails will ever end up and might affect how others view you as a professional. Quotations on personal philosophy, religious beliefs, and political attitudes might cause unanticipated adverse reactions from other people.

- Greetings on answering machines and voicemail messages that might be entertaining to your peers, express your individuality, and indicate your sense of humor may not portray you in a positive professional manner. If you ever use your cell phone or home telephone for professional purposes (research, teaching, or clinical activities), be sure your greeting is appropriate and professional in demeanor and content.

- Emails that are believed to be confidential can be found, forwarded, and potentially published (on listservs, in newspapers, etc.).

- Information that seems to be fun, informative, and candid might put the program and the student in a bad light. What might be seen as "private" self-disclosure indicating your perceptions of yourself, among friends is actually very public. This includes blogs, personal pages on social networking sites like Facebook and Instagram, etc. Anything on the World Wide Web is potentially available to all who seek it. Be mindful of your postings that are not only self-disclosing, but also other-disclosing. In other words, think twice before posting pictures of, or information pertaining to, your friends (who may or may not also be graduate students) without their permission.

Trainees are reminded that if you identify yourself as a graduate student in the program, then we have some interest in how you portray yourself. If you report doing something unethical or illegal on the internet, then the website may be used by the program to influence performance review of professional conduct and, depending on the nature and severity of the misconduct, to result in dismissal from the program. As a preventive measure, the program advises that students (and faculty) approach online blogs, websites, and social media outlets (e.g., Twitter, Facebook) that include personal information carefully. Is there anything posted that one would not want the program, faculty, employers, family, or clients to read or view? Students are advised to engage in "safe" web practices and be concerned about professional demeanor and presentations.

(Policy adopted from the University of Kansas Clinical Child Psychology Program, University of Nebraska Psychology Program, and SUNY Binghamton Clinical Psychology Program)

Panther Degree Audit

Students are encouraged to retrieve a real-time status of their academic career progress at my.fiu.edu using Panther Degree Audit (PDA). PDA provides a record of academic progress toward completion of the academic degree program. Students can review courses they have taken, including in-progress courses, and review and plan for courses required to complete their degree. PDA will assist students and their mentors in planning for coursework, practicum, and research credits as they pertain to the M.S. and the Ph.D. To view and validate your PDA, log into my.fiu.edu. From your Student Center, under the Academics drop down menu, select "Academic Requirements" and click "go". This will take you to your PDA page. For further details, instructions, and tutorials, please review materials on the intranet of the program website or visit http://degreeaudit.fiu.edu/Students/Pages/TutorialsTraining.aspx.

(From the FIU Panther Degree Audit webpage: http://degreeaudit.fiu.edu/default.aspx)

Academic Misconduct

We adhere to FIU's University Graduate School policy regarding Academic Misconduct (http://gradschool.fiu.edu/academic-misconduct.shtml). Graduate students at FIU are expected to adhere to the highest standards of integrity in every aspect of their lives. Honesty in academic matters is part of this obligation. Academic integrity is the adherence to those special values regarding life and work in an academic community. Any act or omission by a graduate student that violates this concept of academic integrity and undermines the academic mission of the University shall be defined as academic misconduct and shall be subject to the procedures and penalties for resolution of matters within the University judicial system.

(From the FIU Graduate Academic Misconduct Definitions and Procedures http://academic.fiu.edu/AcademicBudget/misconductweb/Graduate_academic_misconduct_final.pdf)

Due Process and Grievance Procedures

We adhere to FIU's policy on due process and grievance procedures as described in the FIU Student Handbook (http://globaldatebooksonline.com/flipbooks2014/fiu2014/) and Code of Conduct (http://academic.fiu.edu/academicbudget/misconductweb/1acmisconductproc.htm).

XII. Future Directions

We are extremely delighted to join a small number of programs devoted to Clinical Science in Child and Adolescent Psychology. We are proud of our emphasis on science and our dedication to advancing knowledge that contributes to reducing the mental health burden. We are working hard to ensure that our students obtain a breadth of research, clinical, and professional training experiences that align with professional benchmarks, facilitate scholarship, and ensure their timely completion of substantive and meaningful program milestones to prepare them for careers in clinical science. Our faculty brings expertise that spans the continuum from basic to applied science, prevention to intervention, neuroscience to community, and infancy to young adulthood, with a wide range of interests in assessment and intervention across multiple psychopathologies.

As we continue to grow, we have several additional goals in mind by which to improve and expand the training we can offer our students. First, we recently received American Psychological Association accreditation. Second, we are exploring community settings that may provide new opportunities for external clinical practicum with care to ensure that our students continue to receive the close, empirically-informed supervision they receive now related to implementation of evidence-based practice. Third, we are aware of a need to plan for students who may not be successful in the APPIC internship match, and we are discussing a vision for an in-house customized internship that would help to facilitate those students' timely completion of program requirements. Finally, ongoing self-assessment includes regular collection of both proximal data (student performance and outcomes during the program, with respect to stated program goals, objectives and competencies) and distal data (performance and outcomes achieved by students following graduation from the program, with respect to program goals, objectives, and competencies). We will use both proximal and distal data, along with faculty and student feedback, teaching and practicum evaluations, and the annual program quality survey to leverage our strengths, improve on weaknesses, and identify areas for growth toward becoming one of the nation's topic clinical science programs in child and adolescent psychology.