Introduction to Clinical Child Psychology
August 28, 2007

What is Clinical Psychology?
- The goal of psychology as a field is to “study and understand” behavior
- Largest sub-discipline of psychology
- “Clinical Psychology Is.............”

Unifying Definition
- American Psychological Association (APA) Division 12 - Society of Clinical Psychology
  “Integrates science, theory, and practice to understand, predict, and alleviate maladjustment, disability, and discomfort as well as to promote human adaptation, adjustment, and personal development...focuses on the intellectual, emotional, biological, psychological, social, and behavioral aspects of human functioning across the life span, in varying cultures, and at all socioeconomic levels.”

Emphasizes integration of...

1. Science and Research: 2 Assumptions
   - Determinism
     - All events have causes that can be discovered
     - Causes are not random, but follow set of discoverable rules
   - Empiricism
     - Events must be measurable and observable to study
     - Caveat, we also depend on hypothetical constructs that are difficult to directly observe (e.g., anxiety, self-efficacy).

2. Maladjustment
   - “abnormal behavior and emotional suffering”

3. The Individual
   - General principles (nomothetic) are applied to the individual (idiographic)
   - Unique perceptions, experiences, environments, biology, etc.

Emphasizes integration of...

4. Helping
   - Behavior is not only studied and understood, but clinical psychologists help those with psychological distress

Hecker & Thorpe (2005)
Clinical Psychology
- Training models
  - Scientist-Practitioner - most common
  - Practitioner
  - Practitioner-Scholar
  - Clinical Scientist
- How we define ourselves
  - Practitioners (assessment & intervention)
  - Researchers
  - Teachers and supervisors
  - Program development and evaluation
  - Public policy work
  - Consultants (e.g., industry, government agencies)

Clinical Psychology
- To be a clinical psychologist...
  - Doctoral Degree (4+ years): Ph.D., Psy.D.
    - UF Clinical Psychology program
      - Neuropsychology
      - Health Psychology
      - Child/Pediatric Psychology
    - Internship (1 year)
    - Post-Doctoral Fellowship (optional)
  - Licensure

Work Settings
- Hospitals
- Universities
- Private practice
- Mental health centers
- Managed health care
- Schools
- Legal systems
- Counseling centers
- Governmental agencies
- Veteran administration
- Military
- Industries

Other mental health service areas...
- Psychiatry
- Counseling Psychology
- School Psychology
- Social Work

Psychiatry
- Psychiatry
  - Can prescribe medication
  - Medical school training emphasizing biology, chemistry, etc.
  - "When they are through with their training they take an oath. When we are through we get into an argument" - Sanford Goldstone
  - Psychiatrists → Learn facts to treat patients
  - Psychologists → Trained as researchers, evaluating and defending their views by citing data and using evidence

New Mexico Governor Signs Landmark Law on Prescription Privileges for Psychologists
Louisiana Becomes Second State to Enact Prescription Privileges Law for Psychologists
RxP legislation made historic progress in Hawaii
A bill authorizing prescribing authority for psychologists was approved by the House but held back by a Senate committee.
Counseling Psychology

- Similarities
  - Doctoral degree, research, therapy, assessment
- Traditionally
  - Deal with minor maladjustments or relatively healthy individuals
  - Often conduct career and educational counseling
  - Prototypical setting: university counseling center
- Less emphasis on psychological testing
  - This distinction is beginning to blur...

School Psychology

- Traditionally
  - Work with educators to address academic, social, behavioral, & emotional needs of children within the school setting
- Training
  - Most have Masters degree
  - Heavy emphasis on testing (esp. academic, intelligence, and behavior testing)
- Smaller Number in Community/Hospital Setting
  - PhD + Clinical Psychology Internship + Licensure Examination
  - Testing, Therapy, Research

Social Work

- Roots in social service
- Emphasis: role of social factors in psychological distress
- Variable roles:
  - Resource facilitator
  - Therapist
- Training:
  - Masters level is acceptable (L.M.S.W - clinical)
  - Less emphasis on research
  - Doctoral level
  - Research, teaching, etc.
- The distinction between SW and Clinical Psychology is also blurring...

Differentiating Clinical Psychology

- Other fields similar to clinical psychology:
  - Marriage, Family, & Child Counseling (MFCC)
  - Licensed Mental Health Counselor (LMHC)
  - Licensed Clinical Professional Counselor

What is Clinical Child Psychology?

- "Brings together the basic tenets of clinical psychology with a thorough background in child and family development."
- Conduct research and provide services
- Goal: Understanding, preventing, and treating psychological, cognitive, emotional, developmental, behavioral, and family problems of children across the age range from infancy through adolescence."
- From the Petition for Recognition of a Specialty in Professional Psychology, submitted to APA, 1998
History of Clinical Child Psychology

• Some of the earliest examples of work in clinical psychology were with children
  - 1896: First psychology clinic opened by Lightner Witmer, devoted to work with children with learning disabilities, mental retardation, academic difficulties
  - 1905: Alfred Binet developed first normative reference scale of intelligence for children

1920s: The Child Guidance Movement
- Emotional disorders begin in childhood and thus interventions should target children at-risk
- Involved child-oriented clinicians working as part of an inter-disciplinary team to deal with psychological disorders of children.

After WWII, work with children declined because of the adult focus
However, in the past 20-25 years, child work has proliferated
1985: Hilton Head Conference
Focused on the training of clinical child psychologists

Hilton Head Conference
The goals of this conference were:
1. Demand services for children
   - 30% of population are children
   - 15% of children need psych services
2. Increase providers of child psychological services
   - 19,000 licensed psychologists
   - < 1% worked primarily with children

- Less than 500 trained clinical child psychologists
- No specialty recognition for clinical child psychology
- Many adult-trained psychologists worked primarily with children
- Only 25% of graduate programs offered training in clinical child psychology
- 30 formal programs in clinical child psychology in 1970s

49 people attended the conference, most had official roles in the conference:
- Dr. James Johnson
- Dr. Carolyn Schroeder
- Dr. Annette La Greca
- Dr. Thomas Ollendick
Recognition of Clinical Child Psychology

- CCP next up for renewal in 2012 (last 2005)
  - http://www.apa.org/crsppp

APA, Division 53

- Division of Clinical Child & Adolescent Psychology
  - "Represents psychologists who are active in teaching, research, clinical services, administration, and advocacy in clinical child psychology to the APA and the public."
  - Website: http://www.clinicalchildpsychology.org/
  - Journal of Clinical Child and Adolescent Psychology

Child Psychology different?

- Abnormal behavior and pathological processes with knowledge of normal development and family processes
- Foundations in:
  - Developmental psychology
  - Understanding individual differences in adaptation and coping

Populations Served

- Infants (birth-3 years)
- Children (3 years-9 years)
  - Early and Middle childhood
- Adolescents (10 years-18 years)
- Young Adults (19-21)
- Families (e.g., parents, other caregivers, siblings)

Types of Problems

- High-risk children compromised by biological vulnerabilities and/or psychosocial adversity
- Serious emotional and developmental problems
- Significant mental disorders as reflected in behavioral, emotional, cognitive, and/or developmental problems

Types of Problems

- Problems can be:
  - Biological
  - Emotional
  - Social
  - Behavioral
  - Developmental
  - Health-related
  - Academic
  - Family-based
Types of Problems
- High-risk behaviors
- Coping with stressful life events
- Coping with chronic illness
- Common childhood problems or parenting issues

Practice Settings - Varied
- Private practice
- School settings
- Mental health clinics
- Pediatric hospital settings
- Physician offices
- Community agencies
- Advocacy organizations

Procedures and Techniques
- 4 core areas practiced by Clinical Child Psychologists:
  1) Assessment
  2) Intervention
  3) Prevention
  4) Consultation

Assessment
- Used to evaluate:
  - Child and family problems
  - Children’s cognitive and language development
  - Academic functioning (achievement)
  - Psychosocial and emotional adjustment across contexts
  - Formal diagnoses and formulations of childhood disorders

Assessment
- Clinical child psychologists use:
  - Interviews
  - Historical data
  - Observations
    - Naturalistic, Analogue
  - Formal, age-normed psychological tests
  - Behavioral and emotional rating scales
  - Personality assessment instruments

Assessment
- In clinical child psychology, assessment is designed to provide “a delineation of the factors that may contribute to the development of these problems and identify targets for intervention”
**Intervention**

- Treatment of children and families with a recognized problem or disorder
  - Treatments may include:
    - Behavior management in various settings
    - Cognitive-behavioral approaches geared to self-regulatory deficits (anger management, peer problems, and mood disorders)
    - Play therapy for young children
    - Individual psychotherapy with older children and adolescents
    - Family therapy and family counseling

**Intervention (continued)**

- Parent training and parent education programs
- Collaboration with pediatricians, child psychiatrists, neurologists, and/or other health care providers
- Strong emphasis:
  - Research
  - Empirically-validated treatments

**Prevention**

- Prevent the onset of problems and disorders including:
  - Antisocial behavior and delinquency
  - Cognitive and language delay
  - Teen pregnancy
  - Substance abuse
  - Emotional distress during pediatric hospitalization or medical procedures
  - Health promotion (weight, diabetes, etc.)
  - Unintentional injury

**Consultation**

- Multidisciplinary: Consult with professionals from other disciplines
  - Goal: prevention and alleviation of children’s problems or their placement in appropriate care giving and educational environments
  - Team approach is optimal

**Theoretical & Scientific Knowledge**

1. Knowledge of normal developmental processes as they relate to emotional, behavioral, and social functioning.
   - Distinguishing between normal and abnormal behavior and development
   - Understanding developmental factors as they relate to assessment and intervention
   - Common behavioral, social, and emotional problems are often correlates of normal behavior

2. Normal family processes as they relate to the child’s development
   - The impact of family dynamics, normal family functioning, and childrearing practices on normal child development and on the development of problems.
3. Child and adolescent psychopathology:
   - Epidemiology of children’s problems as a function of age, gender, and risk factors
   - Developmental issues related to the assessment and classification of child’s problems
   - Classification of problems (e.g., DSM-IV)
   - Etiological models of child and adolescent psychopathology
   - Treatment options & efficacy → specific childhood problems and children of different ages knowledge of family and other problems requiring treatment.

4. Developmental psychopathology
   - Combines research and theory on normative developmental processes, the developmental course of disorders in children, and intergenerational transmission of maladaptive behavior patterns.

5. Ethical and legal issues related to informed consent and confidentiality with vulnerable populations that require special considerations
   - Infants, toddlers, and preschoolers who cannot give consent
   - Children who have been or may have been sexually and/or physically abused
   - Young children who are abusing substances
   - Children involved in custody battles.

6. Research methods and design:
   - Conducting clinical outcome research
   - Longitudinal studies involving high risk children and families, geared to studying the longitudinal course of disorder as well as different developmental pathways/trajectories as a function of risk and protective factors
   - The ethics of conducting research with children who can give assent but not consent to participate
   - Young children who cannot give consent or assent

Just a few research examples...
- Parent-training for children with oppositional defiant disorder (PCIT)
- Weight loss intervention for overweight children living in rural areas (Project STORY)
- Substance abuse intervention within the school system (Project CATCH)
- Volitional non-adherence in cystic fibrosis & asthma

Questions?