

COUNSELLING TRACK

COORDINATOR: Dr. Kathryn Dance

NMS Code Number - (to be determined)

2 Resident Positions are available

The counselling track is designed to prepare residents for supervised post-doctoral practice in counselling psychology. This track is offered at one site, The Student Development Centre at The University of Western Ontario. Therefore, the client population is outpatient, primarily self-referred, undergraduate, graduate and part-time and mature students attending the University of Western Ontario. The typical age range is 17-22, although it is not unusual to see clients in their late 20s, 30s, and middle age.

This track will assist residents in furthering the competencies associated with counselling psychology including knowledge of adjustment and lifespan development (with an emphasis on late adolescent and young adult development), knowledge of psychopathology, psychological assessment, and psychotherapeutic intervention. Training can include opportunities to work with clients with a range of problems including affect regulation, adjustment issues, grief and loss, self-esteem, eating problems and body image concerns. Large numbers of clients meet diagnostic criteria for mood and anxiety disorders, and smaller portions of the population experience serious mental health concerns such as first episode psychosis. Therefore, skills in formulating and communicating a differential diagnosis for the purposes of developing an intervention or referring clients as needed will be also be a focus of attention.

Residents may customize their rotation by selecting two or three of the three rotations offered. One rotation focused on assessment/crisis intervention is strongly recommended, along with a rotation in intervention. Intervention rotations will include both individual and group psychotherapy, as well as the provision of psychoeducational workshops to the broader student population.

Supervisors within rotations will furnish opportunities for residents to focus on their areas of interest (e.g. grief, eating problems), and will be assigned cases to reflect the diversity of the student population (e.g., ethnicity, sexual orientation). Additionally, where possible residents will be given the opportunity to provide supervision to practicum students from programs such as the Bachelor of Social Work or the Master's of Education in Counselling. Residents will also be involved in the training of practicum students, via delivery of lectures or workshops on selected topics of interest.

To be considered, applicants must have the following credentials:

- A minimum of 600 hours of direct client contact including assessment, intervention, consultation, and supervision practicum experience, and
- experience with a range of psychotherapeutic modalities.

Major Rotations available:

Intake/crisis intervention
Humanist/experiential interventions
CBT/Integrative skills interventions

Intake / Crisis Intervention

All self-referred clients to SDC receive a two part intake, consisting of an initial intake interview, with a follow-up, and psychodiagnostic testing. Based on information acquired through this process, clients are triaged and treatment/intervention plans are formulated. Residents in this stream will have an opportunity to encounter a diverse array of presenting problems and personality types, and will gain experience in case conceptualization. They will also make treatment recommendations and referrals as necessary. Risk assessments are a routine aspect of every intake.

In addition, SDC is committed to the provision of same or next day crisis appointments, both for self-referred clients and those referred by concerned members of the university community. Clients self-refer for crisis appointments for a variety of reasons including loss of a relationship, academic failure, assault and sexual assault, and suicidal ideation. Clients are also referred by other sources for crisis appointments when there is concern about their affect regulation, self-care, or their impact on others. Intensified risk assessments may be required. Residents will follow crisis clients over the short-term, until such time as the crisis is ameliorated. Residents will gain experience with creating safety plans for clients, liaising with community agencies as needed, understanding and dealing with confidentiality issues, and evaluating the impact of their interventions.

Supervisors for this rotation vary in their theoretical orientation, but all employ active strategies for managing client crisis, with an emphasis on ensuring the formation of a strong therapeutic alliance.

Supervisors: Dr. Kathryn Dance
Dr. Elspeth Evans
Dr. Gail Hutchinson
Dr. Susan Ruscher
Dr. Beverly Ulak

Humanist / Experiential Interventions

This rotation will present residents with the unique opportunity to explore, broaden, and refine their understanding of counselling psychology from a humanistic perspective. At its core, this rotation will assist residents in attaining competencies in skills for promoting psychological health by helping individuals to recognize and to use their inherent strengths to effect meaningful and positive change in their lives.

Residents will familiarize themselves with the conceptual origins of humanistic personality theory in order to gain an appreciation of the breadth, depth, and timelessness of the humanistic tradition. An additional core component of this rotation will be the investigation and practice of informed, structured, and goal oriented experiential methods. There will be a focus on the theoretical and practical value of using interventions such as metaphoric language, imagery, expressive art, photo therapy, archetypes, folklore, narrative, dream work, and acceptance and commitment theory in psychotherapy. Residents will acquire an understanding of how such interventions can be utilized to facilitate personal growth and change, insight, articulation of feeling states, reframing of experience, affect regulation, trauma recovery, interpersonal effectiveness, and creative problem solving. There will be an emphasis on strategies for selecting appropriate interventions and evaluating their effectiveness. The experiential methods reviewed in this rotation will be presented in a contemporary/ holistic fashion, that integrates effectively with current practices in psychology.

Supervisor: Dr. Beverly Ulak

CBT / Integrative Skills Interventions

Clients seen in this rotation present with a variety of problems, including anxiety disorders, mood disorders, trauma histories, grief, drug and alcohol abuse, interpersonal problems and academic concerns. Individual Cognitive-Behavioural Therapy is the primary therapeutic approach, although other approaches (e.g., mindfulness meditation, affect regulation, relaxation training, skills development) are integrated in practice. Goal setting and monitoring of treatment progress and the therapeutic relationship are emphasized. Therapy is typically shorter-term (i.e., 12 sessions) but there may be opportunities for some longer-term therapy. Opportunities for leading groups (e.g., Mindfulness Meditation, DBT) may also be available.

Within this rotation, supervisors will provide opportunities for individualized training that meet the specific needs of the resident. Supervision styles vary across supervisors and may emphasize case conceptualization, training in specific skills (e.g., empirically-supported treatments) and the development of therapeutic process skills. Supervisors assure well-rounded experience by assigning cases that reflect client diversity in terms of ethnicity, socio-economic status, and other individual differences.

Competence in assessment and intervention skills is emphasized, and various theoretical perspectives are integrated.

Supervisors: Dr. Kathryn Dance
Dr. Elspeth Evans
Dr. Gail Hutchinson
Dr. Susan Rusche