YALE UNIVERSITY CHILD STUDY CENTER

Psychology Training Program
Clinical Internship and
Postgraduate Fellowship

2017-2019

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# Table of Contents

- Introduction 3
- Yale Child Study Center Overview 3
- The University Setting 4
- Diversity and Making New Haven Your Home 5
- Program Model of Training and Education 6
- Goals and Objectives 7
- The Curriculum 7
- Clinical Internship Curriculum 8
- Second Year Curriculum 11
- Program Curriculum Summary 12
- Required Areas of Focus Training 13
  - Autism and Developmental Disabilities 13
  - Early Childhood 14
  - Pediatric Psychology 15
  - Children and Trauma 15
- Faculty 16
- Stipends, Benefits, and Resources 21
- Program Outcomes 21
- Application Procedures 25
**Introduction**

The Yale Child Study Center Psychology Fellowship consists of a two year integrated training sequence: an American Psychological Association (APA) accredited clinical internship and a (non-accredited) postgraduate Fellowship in clinical psychology. It is one of several training programs sponsored by the Child Study Center, Yale School of Medicine, including a child psychiatry training program and a social work training program. Doctoral candidates enrolled in APA Accredited programs in Clinical, Counseling, or School Psychology may apply. All candidates enter the program through the Association of Psychology Postdoctoral and Internship Centers (APPIC) match process. Successful applicants are accepted into the program for two years with the requirement that they obtain their doctoral degree prior to beginning the second year of training. Successful applicants are appointed as Fellows of Yale Medical School for the two year training experience. Most students matched to our program are able to meet their goals for licensure at the end of the two year training sequence.

The program’s didactic curriculum and clinical placements emphasize public service to underserved populations, including the urban poor, severely disturbed children and their families, and children with combined developmental, medical, and psychiatric disorders. Clinical settings include an urban child guidance clinic with multiple community-based intervention programs and a university teaching hospital with medical, surgical, and psychiatric services for children. Interns and Second Year fellows interface with other community agencies, including private and public schools, local law enforcement, and the state child welfare agency. Considerable emphasis is placed on the development of clinical skills related to evaluation and treatment. Interns receive extensive training in the psychological and neuropsychological assessment of children, and therapeutic interventions that embrace multiple theoretical perspectives, including developmental, psychodynamic, cognitive-behavioral, and family systems theory. Opportunities are available to assist in ongoing clinical research currently being conducted at the center, and to lecture about clinically related topics in child psychology.

The internship training year focuses on implementation of clinical services in community and outpatient settings through yearlong placements. In addition, interns spend approximately 10-15 hours per week working in a focused training area selected by them during the APPIC application process. Focused training areas include 1) Autism, 2) Early Childhood, 3) Pediatric Psychology, and 4) Trauma and Children.

Approximately 50% of the second training year focuses on hospital-based evaluation and treatment of children with serious psychiatric illness. Second year fellows work as primary clinicians on a child or adolescent psychiatry inpatient unit and consult to the pediatric emergency department. The remaining 50% of training is dedicated to the focused training area initiated during the clinical internship year. Continued clinical intervention with children and families, along with opportunities for involvement in ongoing research projects, is highlighted in the focused training area.

**Yale Child Study Center Overview**

Founded in 1911, the Child Study Center of the Yale University School of Medicine is a multidisciplinary department that brings together child psychologists, child psychiatrists, pediatricians, social workers, educators, nurses, attorneys, and other professionals to serve children and their families, to teach and train professionals and students, and to carry out a variety of research projects and treatment programs. The philosophy of the Center recognizes the importance of respecting all individuals and identifying the unique resources found in all children and families. The participation of the center’s faculty in a variety of institutions and professional organizations has extended the influence of the center from the local or...
community level to the national and international arena.

At the Child Study Center, the developing child is seen within the context of several levels of influence. The first level is that of the child—the child's biological endowment and modes of dealing with the environment. These characteristics influence and are influenced by a second level—the parents and siblings in the immediate family. The child and family levels interact with a third level—the near support system or community. All of these levels are influenced by the effect of policy decisions made at a fourth level—that of the far support system. Included in this level are the social policies of the city, state and federal governments. It is our conviction that the understanding of any individual child must include consideration of the interplay of these levels. With this model in mind, our training program emphasizes a developmental, multidisciplinary approach to training in clinical child psychology.

While psychologists have been training at the Child Study Center since its inception, the formal Clinical internship program began in 1977. APA approval was granted in 1981, and in 1989 the psychology faculty embarked upon a plan to develop a two year coordinated Clinical internship and post-graduate fellowship. For the upcoming training year, we anticipate enrolling all interns in the joint predoctoral-postgraduate training program. Thus, applicants are expected to complete all doctoral requirements, including their dissertation, by June 30, 2017.

The clinical internship and post-graduate fellowship of the Child Study Center offer focused training in clinical child psychology. Our training programs share the common goal of providing an understanding of the process of adaptive and maladaptive development in children and their families. This understanding is gained through supervised clinical interventions, didactic experiences focusing on normal and abnormal development, and involvement in research initiatives designed to increase knowledge and inform clinical decision-making.

The Yale Child Study Center itself is located on Yale’s Medical School campus, which is about a 10-15 minute walk from Yale’s main campus and the downtown New Haven Green. The Child Study Center Outpatient Clinic is located at 40 Temple Street, about three blocks away from the Child Study Center. Across the street from the School of Medicine is Yale-New Haven Hospital, which also offers several sites in which training activities occur, including the Pediatric Specialty Clinics, the Pediatric Inpatient Service, and the Children's Psychiatric Inpatient Service. During the second year of training, fellows spend a portion of their time placed on a psychiatric inpatient rotation at Solnit Center for Children South, a state supported facility for children and adolescents in Middletown, Connecticut, or at the Children’s Psychiatric Inpatient Service at Yale New Haven Hospital.

**The University Setting**

Yale is a 300 year old University in the medium-sized northeastern city of New Haven, Connecticut. Located on the Long Island Sound, it provides an excellent location for enjoying life in New England. New Haven is known for its theater, restaurants, festivals, and shops. It has a vibrant downtown anchored by Yale’s campus, with several distinct neighborhoods with their own cultural heritages and characters. Located about mid-way between New York City and Boston, about 2 hours in either direction, it is well-situated for visits to major cities in the Northeast.

Yale has a large graduate school community and New Haven welcomes thousands of new graduates students and young professionals each year. For more information about local attractions, visit:
http://www.visitnewhaven.com/. One highlight of each year is the two week International Festival of Arts and Ideas, held each June, which features talks and performances from around the globe, many of them free (See http://artidea.org/)

The Child Study Center, the School of Medicine, and the University are multi-faceted learning environments hosting a multitude of talks, concerts, films, invited speakers and events throughout the year. (See current offerings at: http://calendar.yale.edu/cal/opal)

**Diversity and Making New Haven Your Home**

Our program values diversity in its trainees and in the populations that we serve. We have a strong track record of matching with diverse students and work to provide an environment that supports diversity in all its forms. Yale attracts and welcomes faculty, staff, and students from extremely varied backgrounds, from across the country and around the globe. New Haven and its surrounding communities are home to ethnically diverse restaurants, grocers, and merchants. The University houses a number of museums, institutes, groups, clubs, and organizations which sponsor cultural events and activities that reflect the diversity of the Yale community, including speakers, films, plays, exhibits, and musical productions. The School of Medicine and the University host lectures, affinity groups, and social events that foster and support diversity on campus. For example, the office of Diversity and Inclusion sponsors affinity groups including, the Asian Network @ Yale, Yale African American Affinity Group (YAAA), Yale Latino Networking Group, and the Yale Lesbian, Gay, Bisexual, Transgender and Queer Affinity Group (LGBTQ). The University is home to a number of Cultural Centers and Councils, including the Afro-American Cultural Center, Asian American Cultural Center, LaCasa Cultural: The Latino Cultural Center, the Native American Cultural Center, and the Office of LGBTQ Resources. (see www.yale.edu/equalopportunity/documents/annual-supplement.pdf for more details). The Yale Women’s Center, the Office of Women in Medicine, and the Women’s Faculty Forum all provide resources and sponsor programming particularly of interest to women and those interested in women’s issues.

The Yale Chaplain’s Office is home to Yale Religious Ministries which is focuses on the spiritual, ethical, intellectual, social, and physical welfare of students, faculty, and staff. Its mission is to foster “respect and mutual understanding among people of different faiths and cultures as well as actively promoting dialogue within the University towards that end”. On campus there are numerous religious services, observances, and events, including at an interfaith University Church, a Buddhist Shrine, the Episcopal Church at Yale, The Joseph Slivka Center for Jewish Life at Yale, the University Lutheran Ministry, the Black Church at Yale, the International Church at Yale, the Yale Graduate and Professional Schools Christian Fellowships, the Orthodox Christian Fellowship at Yale, St. Thomas More Roman Catholic Church, as well as sacred spaces hosting Hindu, Sikh and Muslim prayer. In New Haven, congregations include: Assemblies of God, Baptist, Christian Science, The Church of Jesus Christ of Latter-day Saints, Methodist, Presbyterian, and Quaker.

The arts and athletics provide additional avenues for joining the New Haven community. For example, the Neighborhood Music School offers music and dance ensembles for adults (http://neighborhoodmusicschool.org/about/welcome_to_nms/). The Creative Arts Workshop (http://www.creativeartsworkshop.org/) is New Haven’s community arts school and offers art classes for adults. Elm City Cycling organizes events for cyclists (http://elmcitycycling.org/).
Program Model of Training and Education

The psychology training program of the Yale Child Study Center takes a scientist-practitioner approach to clinical training and is based upon a developmental model of education. Just as we view the competencies and needs of our patients and clients from ecological and developmental perspectives, so too do we organize our curriculum around a developmental sequence of applied, didactic, and mentoring experiences aimed at preparing trainees for eventual independent practice in a range of settings. The psychology training program seeks to prepare professionals to successfully address the complexities associated with children and families who are psychologically vulnerable. Those trained at the Center work within traditional and nontraditional settings and are trained to embrace diverse roles and responsibilities. An over-riding goal of the training program is to demonstrate to interns, through a combination of applied and didactic experiences, that provision of mental health services to children requires intervention at multiple and interacting levels of influence.

The science of psychology provides a foundation on which the Child Study Center psychology training program is built. Opportunities are presented in didactic and clinical experiences to learn about and explore the relationship between the practice and science of psychology. This approach is infused into all aspects of the training program. Examples include seminars in autism and neuropsychology that highlight the interface between science and practice. Ongoing research conducted by the Center provides a unique opportunity for interns to see the importance of the relationship between science and clinical practice.

The faculty members responsible for the psychology internship program of the Child Study Center are committed to providing sequential, cumulative experiences that increase in complexity as the year progresses. During the first 6 weeks of the internship year, an intensive summer training period provides a theoretical and practical foundation for the work to be carried out during the year. The summer curriculum is designed to address gaps in training and is tailored to meet the needs of both the individual intern and the group as a whole. Special emphasis is given to psychological assessment and particularly to the assessment of social-emotional and adaptive development.

All interns participate in the core generalist training program, with year-long clinical training as part of the Yale Child Study Center Outpatient Clinic, the Psychological Assessment Service, and the Children’s Psychiatric Inpatient Service. In addition, each matched intern is affiliated with an area of focus over the two year integrated training experience. Our current areas of focus are Pediatrics, Autism, Early Childhood, Children and Trauma; each track involves distinct, specialized additional experiences related to the population served. Each area of focus also provides a comprehensive orientation to the role of the intern within their track. Typically, interns begin by learning through observation and through modeling of appropriate practices by a faculty mentor. Gradually, interns assume more responsibility as their knowledge base and clinical skills increase. Similar sequential, cumulative, and increasingly complex experiences are provided in both outpatient psychological assessment and outpatient psychotherapy. This approach is consistent across didactic seminars and clinical supervision.
Goals and Objectives
The Child Study Center Psychology Training Program seeks to provide a general clinical program with an emphasis on child clinical psychology. The program prepares professionals to successfully address the complexities associated with children who are psychologically vulnerable. Our program is aimed at candidates in clinical psychology who seek a coordinated two-year program which will meet their requirement for an APA accredited internship as well as provide preparation for licensure. The goals of our program are designed to develop competencies across the following areas:

1) Treatment and Intervention,

2) Psychological Assessment and Introductory Neuropsychological Assessment,

3) Consultation within Interdisciplinary Systems,

4) Knowledge and skill application regarding normal and abnormal development, cultural and ethnic perspectives, and serious neuro-psychiatric disorders, and

5) Professional Development.

Trainees are provided with feedback throughout the year by their individual supervisors in both formal and informal settings. Regular meetings of core faculty and triennial review meetings (conducted October, February, and June) by all supervisors provide a forum to monitor and evaluate student performance and make recommendation for future trainee goals and objectives, and when necessary, to suggest modifications in the training trajectory of an individual student. The Review of Fellow’s Progress form assessing each goal area is completed by each supervising faculty member, discussed with the intern, and then given to the Training Director. The student may respond in writing to the faculty member’s evaluations. The Training Director and Chief of Psychology meet individually with each trainee after each Fellow’s Review meeting to discuss the evaluations provided by the faculty regarding the trainee’s performance and make recommendations and suggestions that are relevant. This process is an opportunity for the Training Director to provide integrative feedback regarding the collective experience of others who have had significant interactions with the student. Both parties discuss how the training experience is progressing and the trainee is provided with an opportunity to provide reactions, critiques, and comments about supervision and other aspects of the training program. If it is deemed necessary, modifications to the training program for a particular student may be arranged at this time or at any time that the student or a faculty member deems it necessary.

The Curriculum
The curriculum consists of generalist training in assessment, treatment, consultation, knowledge of childhood disorders, and professional development. Each trainee also participates in training in one of our areas of focus, specializing in serving populations in specific settings, including both hospital-based and community-based treatment and service to medically underserved children and their families. Our integrated two-year program combines the clinical internship and a post-graduate fellowship. The first year of training meets the requirements for our APA accredited internship with the opportunity to conduct some clinical work in one area of focus. The second year provides the opportunity to meet licensing requirements by providing treatment and service to severely disturbed children and their families through hospital-based work and providing more opportunities for
continued clinical and research experiences within the area of focus. Currently the four areas of focus are: Early Childhood, Autism, Children and Trauma, and Pediatrics.

All students take part in both didactic and applied clinical experiences over the course of the two years. Courses vary in length, from an academic year to a few months. All intern’s clinical experiences are for the entire year, rather than rotations.

Clinical Internship Didactic Curriculum

Required Psychology Internship Seminars and Conferences

Summer Introductory Training Course: During the initial two months of training, clinical interns are introduced to a variety of topics that serve as an orientation to the program. Although summer seminars are tailored to meet the training needs of each individual internship class, topics generally covered include psychological and neuropsychological instruments and assessment techniques, theories of learning disorders, techniques in psychotherapy, cognitive-behavioral intervention, crisis intervention, and ethical issues for clinical psychologists.

Neuropsychology Seminar and Tutorial: This seminar is conducted weekly during the internship year and offers both an introduction to theory and practice in the neuropsychological assessment of children and group supervision. Modules include both the assessment of developmental/learning disorders and medical disorders of childhood.

Evidence-based Practices in Evaluation and Treatment of Autism: This seminar for clinical interns, taught by Michael Powers, PsyD, focuses on the evaluation and treatment of autism spectrum disorder and assures that all psychology interns will be afforded exposure to the evaluation and treatment of children with social disabilities.

Administration and Interpretation of the Autism Diagnostic Observation Schedule-2 (ADOS-2): This seminar for clinical interns by Kelly Powell, PhD focuses on the use of the ADOS-2 in the evaluation of suspected autism spectrum disorders.

Family Therapy and Cultural Diversity Seminar: This seminar focuses on learning about family therapy within the context of culture and larger system considerations. It is focused on helping to further develop family therapy clinical skills in working with diverse populations. Therapists’ development involves the understanding of the use of self as a primary tool for engagement, assessment and treatment. Characteristics of the therapist/family relationship will be explored. A communication and exploratory oriented approach to family therapy will be the foundation for the course.

Evidence-based Treatment: Evidence-based Treatment is infused throughout the curriculum of the Child Study Center. All interns are trained in Trauma Focused CBT and CBT for Anxiety Disorders. In addition, other evidence-based treatments are incorporated into the clinical work in the outpatient clinic and/or in the areas of focus. Didactic content on evidence-based treatments is also presented through seminars, such as Departmental Conference and Autism Seminar.

Psychoanalytic Principles of Evaluation and Treatment: The seminar will explore psychodynamic perspectives on evaluation, diagnosis, treatment planning and psychotherapy with children and adolescents.
Group Therapy: During the clinical year, each intern has the opportunity to serve as a co-leader of a psychotherapy group with one of our faculty members. As a co-therapist, the intern focuses on theories related to group treatment and gains direct knowledge of therapeutic practice in the group context.

Multidisciplinary Seminars and Conferences

Seminar in Developmental Psychopathology: This elective multidisciplinary seminar provides interns with the opportunity to learn about diagnosis and treatment of a variety of childhood disorders through presentations by the Child Study Center's seminar faculty.

Psychopharmacology Seminar: This monthly seminar, taught by Robert McWilliam, M.D., covers the spectrum of childhood psychiatric disorders and the use of psychopharmacological agents as an adjunct to therapy. Didactic readings and case discussions are important components of the seminar.

Departmental Conference: Theoretical, research and clinical papers by faculty, trainees, and outside speakers are presented in a Grand Rounds format. All Child Study Center faculty and trainees attend this weekly conference.

Professional Development Curriculum

Fellows Seminar: Interns meet weekly with the training director and other faculty to discuss a broad range of clinical and professional issues relevant to the practice of psychology. Professional development, advances in assessment and treatment, diversity, consultation, theories of supervision, and program evaluation are examples of topics recently covered in this seminar. Interns are provided with a teaching opportunity during the year in order to receive feedback on their presentations and prepare them for dissertation defense or job talks. This weekly meeting also serves as a forum to discuss issues related to training and the training program.

Clinical Supervision: In keeping with the multidisciplinary orientation of training at the Child Study Center, trainees may receive supervision from professionals from varied disciplines. Currently, each clinical intern receives approximately 3 hours of individual supervision each week. A psychologist supervises ongoing treatment and evaluation of children and families seen through the Outpatient Clinic. For psychological assessment, interns are assigned two clinical psychology supervisors. An additional supervisor is provided for each specialty area. Second year fellows electing to continue seeing a child or family in treatment through the outpatient clinic may do so. Additional supervisors are assigned for all of the second year clinical placements.

Elective Opportunity

The Zigler Center in Social Policy and Child Development Social Policy. The Zigler Center has primary prevention as a main emphasis. It also focuses on issues surrounding serious mental health problems of children and their families. The Center's primary purpose is to hasten the development of constructive social policy for children. Center activities have two main facets; the training of individuals who will function at the intersection of research and policy, and the development of a public education program that provides information on critical children's issues. Among the topics currently being investigated are day care, child custody, child abuse, advocacy, children's health, mainstreaming, deinstitutionalization, and the effects of
early intervention programs. Both training and public education efforts are designed to positively affect the formulation and implementation of public policy. The Zigler Center, while administratively separate from the Child Study Center, is closely tied through faculty appointments and shared concerns. Participation in the Zigler Center is limited and may be chosen as an elective training experience. Trainees may seek to become Zigler Fellows (http://medicine.yale.edu/childstudy/ zigler/training/index.aspx) and/or to attend weekly lectures sponsored by the Zigler Center.

Applied Curriculum

Required General Clinical Settings

Psychological Assessment Service (PAS) (all interns and Second Year Fellows)
Under the direction of Laurie Cardona, Psy.D., psychology trainees conduct comprehensive psychological evaluations of children from age 5 to 18 referred to the clinic by schools, parents, pediatricians, and other practitioners. Interns receive intensive weekly supervision during the course of each evaluation. Referrals come from within and outside of Connecticut. A variety of referral questions are addressed including differential diagnosis, need for treatment, educational planning, and second opinions for difficult to treat patients. Test batteries are constructed to address the referral question. Commonly used measures include the WISC-V, educational achievement measures such as the WIAT III, parent and patient self-report measures, and projective measures (incomplete sentences, drawings, the TAT, and the Rorschach). Projective measures are used due to the nature of some referral questions, which are not as well addressed by other measures. Training in the assessment service allows interns to become proficient in comprehensive psychological assessment. Applicants with prior exposure to psychoeducational testing and projective assessment will be better prepared for the training experience. Clinical interns are required to complete up to 10 evaluations during the course of the year.

Children's Psychiatric Inpatient Service (CPIS) (all interns and two Second Year Fellows)
In response to concern about the increasing need for services for seriously disturbed children and adolescents, the Child Study Center and Yale-New Haven Hospital opened the Children's Psychiatric Inpatient Service in 1985. The 15-bed unit provides diagnostic evaluations and crisis intervention to children aged 4-13 whose severe psychiatric and developmental problems require 24-hour intensive care. While CPIS primarily serves children from Connecticut and surrounding states. Children with complex disorders requiring specialized diagnostic and treatment resources are referred from around the world. The service utilizes state-of-the-art methods of evaluation and treatment to minimize the length of hospital stay. An overriding goal of the service is to maintain the child's ties with family and community during hospitalization and to assure close linkages between the inpatient service and the other professionals, agencies and schools with which the child and family are already engaged. Laurie Cardona, Psy.D. is the Chief Psychologist for this service and provides supervision for all work conducted on the unit by psychology interns and Second Year fellows. During the training year, interns provide occasional psychological assessments on an as needed rotating basis for hospitalized youth. During the second year, fellows placed at CPIS as their psychiatric inpatient placement serve as primary clinicians on the unit. As primary clinicians, fellows develop skills as case managers and behavior consultants and work with unit staff in designing interventions that will generalize to home, school, and community settings.

Child Study Center Outpatient Clinic (all interns and elective for Second Year Fellows)
Funded in part by the State of Connecticut, Department of Children and Families (DCF), this clinic serves
approximately 900 families per year. While its patient population is varied, a majority of the families served are publicly assisted, ethnic minorities. Under the direction of Medical Director David Grodberg, M.D. and Director Michele Goyette-Ewing, PhD, multidisciplinary teams comprised of psychology, child psychiatry and social work provide therapeutic services to children and youth aged 5 to 18 within this clinic.

During the internship year, primary experience in outpatient evaluation and treatment is gained in the Child Study Center Outpatient Clinic. Interns are members of a multidisciplinary clinic team and are assigned cases through the team. Typically, each intern carries approximately 4 cases concurrently, encompassing child, parent, and/or family therapy. Additionally, interns actively assist social work and psychiatry team members in determining the appropriateness of psychological evaluation. Continued outpatient work in this clinic is open as an elective in the second year.

**Areas of Focused Training (all interns and Second Year Fellows).** During the first year each intern is involved in the clinical activities of their area of focus for approximately 10-15 hours per week. See below for specifics.

**Second Year Curriculum**

During their second year, each fellow serves as a primary clinician at either the Solnit Center South or the Yale New Haven Hospital Children’s Psychiatric Inpatient Service, responds to emergency department calls, conducts comprehensive psychological assessments, and attends a small number of seminars. In addition, each fellow devotes approximately 50% of their time to clinical and research activities within their area of focus.

**Required Second Year Psychology Seminars and Conferences**

**Departmental Conference.** Second Year Fellows continue to attend Departmental Conference during the second year.

**Fellows Seminar.** During the second year, Fellows attend selected meetings of the Fellows seminar and are invited to present and teach. Focus is placed on professional development issues.

**Required Placements**

**Solnit Center for Children (two Second Year Fellows)**

Solnit Center South, operated by the State of Connecticut's Department of Children and Families (DCF), has had a long affiliation with the Child Study Center. Located approximately 30-miles from the Child Study Center in Middletown, Connecticut, the Solnit Center provides inpatient psychiatric assessment and treatment for children and adolescents. Many of the children referred to this facility have been court ordered for evaluation or long-term treatment. The Fellows placed at the Solnit Center as their psychiatric inpatient placement, complete a two day per week year-long rotation on units serving older school agers or adolescents presenting with a variety of diagnostic and treatment concerns. Fellows serve as primary clinicians and share responsibility for psychological evaluations with the staff psychologist assigned to the unit. Clinical duties typically involve twice weekly individual psychotherapy, weekly family therapy, group therapy, and participation in multidisciplinary treatment teams. Staff psychologists provide supervision.
Children's Psychiatric Inpatient Unit (two Second Year Fellows)
Second year Fellows placed at CPIS as their psychiatric inpatient placement serve as primary clinicians on the unit during their rotation. As primary clinicians, Fellows develop skills as case managers and behavior consultants and work with unit staff in designing interventions that will generalize to home, school, and community settings.

Pediatric Emergency Department Consultation Service (ED Service—all Second Year Fellows)
The Child Study Center provides crisis evaluation and consultation to the Pediatric Emergency Department at Yale-New Haven Hospital. Hundreds of children receive psychiatric assessments each year in the Pediatric ED following indications of serious psychiatric impairment, including suicide and homicide. These assessments, conducted in collaboration with hospital social work staff, are the responsibility of psychology fellows and child psychiatry fellows. All second year psychology Fellows provide rotating clinical coverage to the ED.

Psychological Assessment Service (all Second Year Fellows). Second Year Fellows continue to participate in the Psychological Assessment Service by providing administrative triage, supporting case assignment and by completing up to three comprehensive evaluations over the course of the second year.

Areas of Focused Training (all Second Year Fellows). Each Second Year Fellow continues their involvement in the clinical activities of their area of focus and is able to develop a plan to meet their continued training goals in the context of the clinical needs of their track.

Elective Settings

Zigler Center for Child Development and Social Policy. Second year Fellows may elect to become Zigler Fellows.

Child Study Center Outpatient Clinic. Second year Fellows may elect to continue to see children and families through the Outpatient Clinic.

PROGRAM CURRICULUM SUMMARY
Listed below is the current program curriculum; it consists of both didactic experiences and clinical practica.

The following outline provides a brief overview of the program as anticipated for 2017-2018.

I. Required General Clinical Training

1. First Year clinical experiences
   a. Psychological Assessment Service (up to 10 batteries, 2 supervisors, one each semester)
   b. Children’s Psychiatric Inpatient Service Testing (as needed; minimal involvement)
   c. CSC Outpatient clinic (4 cases); Team weekly until December, then as needed, 1 supervisor for the full year
   d. Trauma Focused-Cognitive Behavioral Therapy—2 cases plus TF-CBT Supervision Rounds
   e. Evidenced-based treatments for Anxiety Disorders—2 cases plus Supervision Rounds
   f. Neuropsychology (Best) (weekly beginning in October)—1 assessment case from Dr. Best’s clinic
g. Group therapy (3 groups offered w/ Nancy Moss, weekly group supervision, 1 group offered with Julie Wolf)

h. Area of focus clinical experiences (approximately 10-15 hours per week)

i. Research mentorship as needed

2. First Year didactic experiences
   a. Assessment rounds (Cardona) (2 months: July-August)
   b. Departmental Conference (year long)
   c. Evidenced-based Assessment and Treatment of Autism seminar (Powers) (weekly Oct-January)
   d. Use of the Autism Diagnostic Evaluation Schedule-2 (Powell) (weekly Sept to December)
   e. Psychopharmacology (McWilliam) (monthly September to June)
   f. Family Therapy and Cultural Diversity (Singh, Akbar, Kahn) (1 hour per week, 4 months)
   g. Psychoanalytic Principles of Evaluation and Treatment Seminar (Marans and Goslin)
      (Sept to June weekly)
   h. Developmental Psychopathology (elective)
   i. Fellows Seminar (Goyette-Ewing) (1 hr weekly)

3. Second Year clinical experiences
   a. Emergency Department call—10 weekend days per year
   b. Inpatient Rotations—2 Fellows for Children’s Psychiatric Inpatient Service for 6 months each and 2 Fellows at Solnit South for the full year
   c. CSC Outpatient Clinic (elective)
   d. Psychological Assessment Service (up to 3 cases, 1 supervisor)
   e. Research mentorship
   f. Specialty area experiences (approximately 20-25 hours per week)

4. Second Year didactic experiences
   a. Departmental Conference (weekly)
   b. Fellows seminar (Goyette-Ewing; selected meetings)

**Required Areas of Focused Training**

Four areas of focused training are offered, with one intern selected and assigned to each area through the APPIC match process. During the internship year, the assigned intern will spend approximately 10-15 hours per week for the full year engaged in clinical and research activities. During the second year, involvement increases to approximately 2-3 days per week for the entire year. Focused training areas include 1) Autism, 2) Early Childhood, 3) Pediatric Psychology, and 4) Trauma and Children.

**Autism and Developmental Disabilities Area of Focus**

The Autism Program at the Yale Child Study Center is one of the leading clinical and research sites in the country, with a wide portfolio of federally-funded research. Fred Volkmar, M.D. is one of the most respected experts in the field of Autism and developmental disabilities. James McPartland PhD, Pamela Ventola, PhD, and Kasia Chawarska, PhD are well known autism researchers with long-standing records of scientific productivity who are pioneering the development of new approaches to understanding these childhood disorders. Ongoing research in this section integrates biological and behavioral strategies for studying and treating autism. The program of Autism research at the Child Study Center is broad in scope and has
included studies of the definition and classification of autism, neuropsychology, social cognition, early development and natural course, adaptive skills and outcome, neuroimaging, neurochemistry and neurobiology, family and molecular genetics, psycho-pharmacological, parent-training and behavioral treatments, and animal models.

Interns matched for the Autism and Developmental Disabilities area of focus spend a portion of their internship and their second year of training involved in the clinical and research activities of the section. A primary placement is the Yale Child Study Center Developmental Disabilities Clinic, which offers comprehensive, multidisciplinary evaluations for individuals from preschool through early adulthood, usually focusing on diagnosis and intervention. Trainees take an active role Clinic’s multi-disciplinary teams, including providing developmental/cognitive evaluations and the Autism Diagnostic Observation Schedule—Second Edition (ADOS-2). Prior experience with the ADOS-2 is essential to being able to take advantage of the training experiences offered within the Autism area of focus. Trainees are also involved in the implementation of evidence-based treatments for autism that are components of active research protocols. The clinic is highly integrated with the research program, and both involve highly experienced professionals from a variety of disciplines.

Research involvement may include training in standardized and novel methodologies, the grant-writing process, and integration of research into clinical practice. The program is individualized to meet the trainee’s interests and needs within the constraints of the clinical service and its research priorities. For additional information related to the Autism and Developmental Disabilities Program, please see http://www.autism.fm.

**Early Childhood Area of Focus**

Interns matched for the Early Childhood area of focus spend a portion of their time involved in the clinical and/or research activities of the Child Development Unit of the Child Study Center. Infancy and early childhood has been a long-standing focus of clinical services in the Center and the section provides services to pregnant families, parents, and children from infancy through early school age. All programs for infants and preschoolers are organized and directed by Linda Mayes, MD. The Child Development Unit provides a full range of evaluation and treatment services for young children (prenatal through age 5 years). The unit also sponsors consultation to local child care centers.

Early Childhood trainees provide developmental assessments, individual child and parent psychotherapy, and school based consultation to teachers for children under 5. They may also provide group based prevention and intervention services for parents. Trainees in the early childhood section also provide follow-up developmental and medical consultations to families of preterm infants and work collaboratively with pediatrics and early childhood educators.

Research in the section focuses on basic developmental research and on testing the effectiveness of our prevention and intervention programs for parents and infants. Research themes include studies on:

- Research on the quality of early education programs at state, federal and global levels and efforts to improve early education and child care quality
- Effectiveness of early childhood mental health consultation systems infused into child care settings
- Impact of substance abuse on parental sensitivity
- Assessment of High-Risk Families (children born at high risk and/or exposed to cocaine); also opportunity for analysis of existing datasets
- Electrophysiology/EEG studies of social rejection, reward sensitivity, affect tolerance
- Minding the Baby (family based intervention using "mentalization" based treatment approaches)

**Pediatric Psychology Area of Focus**

Applicants matched to the Pediatric Psychology area of focus spend a portion of their time working with children and families experiencing medical illness. Psychology training in Pediatrics includes clinical work in multiple settings. During the internship year, the pediatric intern participates in the Child Study Center Pedi IICAPS program which delivers home-based treatment services to children and families with concurrent medical, psychological, and concrete needs. The Pedi IICAPS program was developed initially to meet the comprehensive needs of children with severe psychiatric disorders and co-occurring medical disorders. Children appropriate for Pedi IICAPS intervention may be returning home from hospitalization, at-risk for hospitalization, or unable to benefit from traditional outpatient treatment. The program makes use of a consistent treatment team to provide comprehensive assessments, case management, individual and family treatment, and crisis intervention. Intervention is informed by a synthesis of the medical model, developmental psychopathology, systems theory, and wraparound concepts.

Specifically, the first year Pediatric Psychology interns work within the Pedi IICAPS model, providing family centered care to children experiencing both medical and psychiatric illness with the goal of moving them to outpatient treatment. IICAPS programs offer a continuum of care including evaluation, assessment, individual psychotherapy, family treatment, parental guidance, medication management and case management and coordination. Program goals are to maintain the child's relationship with his or her primary caregiver whenever possible, reduce the need for out-of-home placements, and assist the family to provide a safe, stable environment for each child. In addition the Pediatrics fellow has a yearlong rotation in the Diabetes Clinic.

During the second year, the Pediatrics Fellow will become a member of the Child Study Center's Pediatric Consultation-Liaison Service. The Child Study Center provides all mental health consultations to Yale-New Haven Hospital, Department of Pediatrics. Under the direction of child psychiatry and psychology faculty, second year Pediatrics psychology fellows, child psychiatry fellows, and developmental pediatricians consult to the inpatient wards, Primary Care Clinic, and Pediatric Specialty Clinics. Patients seen by this service are severely disturbed by virtue of their combined medical and psychological disorders. Services provided include staff consultation, diagnostic evaluations, and behavioral and psychotherapeutic interventions. Laurie Cardona, Psy.D. is the Chief Psychologist of this service. Additionally, the second year Pediatrics fellow participates in several outpatient pediatric clinics (e.g. diabetes, oncology).

**Children and Trauma Area of Focus**

Interns matched for the Trauma and Children area of focus spend a portion of their time in the activities of the Trauma section. In 1991, the Yale Child Study Center and the New Haven Department of Police Service (NHPD) began the Child Development-Community Policing (CD-CP) program under the direction of Steven Marans, Ph.D. and leaders from the NHPD. CD-CP represents a unique collaboration between law enforcement, child protection, and mental health professionals on behalf of children and families exposed to violence in their communities. The partnership between the Yale Child Study Center, the NHPD, and the
Department of Children and Families (DCF) provides opportunities to develop more effective ways for intervening in the lives of traumatized children and families. This work has been supported and developed in partnership with the United States Department of Justice and resulted in the establishment of the National Center for Children Exposed to Violence (NCCEV) at the Child Study Center. Core elements of the CD-CP Program include seminars for clinicians on community policing and law enforcement strategies, seminars for police officers on basic theories of child development, a weekly multidisciplinary case conference, clinician ride-alongs with police, and a Consultation Service staffed by clinicians who respond immediately to homes and community settings where children and families have been exposed to violence.

The psychology specialty area in Childhood Trauma provides strong, multi-faceted training through the Child Development-Community Policing Program and the Childhood Violent Trauma Clinic (CVTC). The CVTC is focused on the development, evaluation, and dissemination of early/acute interventions for children exposed to violence and trauma. During the internship year, the trauma intern participates in acute interventions for children and families exposed to violence. This includes training in the CD-CP Acute Trauma Response Protocol, ride-alongs and joint intervention with New Haven Police Officers, introductory training in police practices, participation in the on-call service for the NHPD, and training and provision of the Child and Family Traumatic Stress Intervention (a 4-6 session secondary prevention model for children exposed to violence which was developed at the CVTC).

Clinical interns also provide assessment and longer-term treatment for children exposed to violence, including Trauma Focused Cognitive Behavioral Therapy (TF-CBT), psychodynamic treatment, and other trauma informed treatments. Interns also participate in a weekly multidisciplinary team meeting with police officers and DCF personnel. They receive individual clinical supervision and attend a weekly clinical team meeting to support these activities.

In the second year, each fellow continues to provide therapeutic services to children exposed to trauma and to participate in the on-call service for the NHPD. Additionally, the fellow will develop and pursue an individualized professional development plan, in consultation with their faculty mentor. This plan may include participation in research, clinical teaching, and/or additional clinical training within the specialty area, in line with the fellow’s individual strengths and needs and his/her career goals. For additional information related to the Trauma and Children Program, please see http://www.nccev.org.

Faculty

Psychology trainees at the Child Study Center enjoy the opportunity to work with faculty from all disciplines. Chief Psychologist Laurie Cardona and Michele Goyette-Ewing, Director of Training, have served on the faculty for more than 20 years. The psychology training program is coordinated by a group of more than ten core faculty. In addition, more than twenty other psychologists provide supervision, lectures, consultation or other training opportunities for interns and fellows. Core and associated faculty are listed below.
Core Faculty

Laurie Cardona, Chief of Psychology, Child Study Center; Chief Psychologist, Children's Psychiatric Inpatient Service; Coordinator, Pediatric Psychology, Yale New Haven Hospital. Psy.D. Rutgers University, 1986. Primary training site: Child Study Center. Major areas of interest: School psychology; group therapy, pediatric psychology.

Michele Goyette-Ewing, Director of Psychology Training, Child Study Center, Ph.D., Interim Director of the Yale Outpatient Psychiatric Clinic for Children, Yale University, 1992. Major areas of interest: program development; assessment of learning and developmental disorders, clinical training and supervision.


Mary Best, Assistant Clinical Professor, Child Study Center, PhD, Hahnemann University, 2000. Major areas of interest: Neuropsychological assessment of children with medical disorders.

Nancy Close, Assistant Professor, Child Study Center. Ph.D., Bryn Mawr College, 1983. Primary training site: Child Study Center. Major areas of interest: Early childhood development; daycare and preschool education.

Walter Gilliam, Associate Professor, Child Study Center and Psychology, Ph.D., University of Kentucky, 1996. Primary training site: Child Study Center. Major areas of interest: Early childhood development and assessment; Preschool mental health consultation; Preschool and early intervention effectiveness research; child social policy.


James McPartland, Associate Professor, Child Study Center, PhD, University of Washington, 2005. Primary training site: Child Study Center. Major areas of interest: Autism spectrum disorders.

Steven Marans, Harris Professor of Psychoanalysis, Child Study Center. Ph.D., University of London, 1993. Primary training site: Child Study Center. Major areas of interest: Child and adult psychoanalysis; violence, aggression and trauma; collaborative work between mental health and police professionals.

Angela Maupin, Associate Research Scientist, Child Study Center, PhD, Michigan State University, 2012. Major areas of interest: early childhood development, early intervention and treatment.

Kelly Powell, Associate Research Scientist, Child Study Center, PhD, American University, 2012. Major areas of interests: Autism spectrum disorders, early identification, promotion of executive functioning skills.
Cecilia Singh, Assistant Clinical Professor, Child Study Center. Ph.D., Northeastern University, 2006. Primary training site: Child Study Center. Major areas of interest: cultural considerations in treatment; impact of trauma on development.

Sherin Stahl, Associate Research Scientist, Child Study Center. Ph.D., University of South Florida, 2002. Primary training site: Child Study Center. Major areas of interest: Psychological Assessment, pediatric psychology, adherence to treatment recommendations, early childhood, preschool mental health, autism, cognitive and behavioral effects of lead poisoning, group psychotherapy.


Lawrence Vitulano, Clinical Professor, Child Study Center. Ph.D., Catholic University, 1977. Primary training site: Child Study Center. Major areas of interest: Behavioral therapy; psychological assessment; professional ethics.

Julie Wolf, Assistant Clinical Professor, Child Study Center, Ph.D., University of Connecticut, 2005, Primary training site: Child Study Center. Major areas of interest: Autism spectrum disorders, group therapy, siblings of children with autism spectrum disorders.

**Associate Psychology Faculty**

Jean Adnopoz, Clinical Professor, Child Study Center. MPH, Yale University, 1981. Primary training site: Child Study Center. Major areas of interest: Family support; low income minority families; mental health; child and family intervention.


Katarzyna (Kasia) Chawarska, Associate Professor in the Child Study Center and of Pediatrics (General Pediatrics); Director, Toddler Developmental Disabilities Clinic Ph.D., Yale University. 2000. Primary Training Site: Child Study Center. Major areas of interest: developmental disabilities and early childhood development.

John Collins, Assistant Clinical Professor, Child Study Center. Ph.D., University of Michigan, 1983. Primary training site: Child Study Center. Major areas of interest: Adolescent development; crisis intervention; family therapy; psychoanalytic theory.
Michael Crowley, Assistant Professor, Child Study Center. PhD, University of Maryland, 2004. Primary training site: Child Study Center. Major areas of interest: T32 research training program; child anxiety and the neural substrates of avoidance, threat detection and worry.

Dawn Flanagan, Assistant Clinical Professor, Child Study Center, Professor of Psychology St. John’s University. Ph.D., The Ohio State University, 1992. Primary Training Site: St. John’s University. Major areas of interest: intellectual assessment, CHC cross-battery approach, psychoeducational assessment, learning disabilities.


Howard Kahn, Assistant Clinical Professor, Child Study Center. Ph.D., University of Rochester, 1970. Primary training site: Child Study Center. Major areas of interest: Family systems; child psychotherapy.


Robert King, Professor, Child Study Center. MD. Harvard University, 1968. Primary training site: Child Study Center. Major areas of interest: Anxiety disorders, Obsessive-Compulsive disorder, Tourette’s Syndrome.

Jason Lang, Instructor, Child Study Center. PhD, University of California, Los Angeles, Primary training site: Child Study Center. Major areas of interest: Evidenced-based treatment dissemination, Implementation science, trauma-informed care delivered through community mental health agencies.

Eli Lebowitz, Assistant Professor in the Child Study Center PhD. Bar Ilan University, Israel, 2002. Primary training site: Child Study Center. Major areas of interest: Treatment of Anxiety Disorders.


Robert McWilliam, Assistant Clinical Professor, Child Study Center, MD, University of Vermont, 1977. Primary Training Site: Yale University: Major areas of interest: General child and adolescent psychiatry, autism spectrum disorders, depression, and anxiety.

Linda Mayes, Professor, Child Study Center. M.D., Vanderbilt University, 1977. Major areas of interest: child development, behavioral neuroscience, psychophysiology and neurobiology, developmental psychopathology, and neurobehavioral teratology.
Nancy Moss, Assistant Clinical Professor, Child Study Center. Ph.D., University of California, Davis, 1986. Primary training site: Child Study Center. Major areas of interest: Pediatric psychology; group psychotherapy; psychological assessment.

Michael Powers, Assistant Clinical Professor, Child Study Center. Psy.D., Rutgers University. Major areas of interest: specializes in the diagnosis, evaluation, and treatment of individuals with autism and related developmental disabilities.

Cecilia Rowland, Clinical Instructor, Child Study Center; Ed.D., Rutgers University, 1998. Primary training site: Child Study Center. Major areas of interest: family support; low income minority families; mental health; child and family intervention

Denis Sukholdolsky, Assistant Professor, Child Study Center, PhD, APBB, Hofstra University, 1997. Primary Training Site: Child Study Center. Major areas of interest: T32 research mentorship; cognitive behavioral therapy for anger and aggression; cognitive behavioral therapy for anxiety in ASD.

Caley Schwartz, Instructor, Child Study Center, PhD, University of Miami, 2009. Primary training site: Child Study Center. Major areas of interest: evaluation and treatment of autism spectrum disorders, psychological assessment.

Wendy Silverman, Alfred A. Messer Professor in the Child Study Center; Director, Yale Child Study Center Program for Anxiety Disorders. PhD. Case Western Reserve, 1981. Primary training site: Child Study Center. Major areas of interest: Assessment and treatment of childhood anxiety disorders.

Adrienne Smaller, Assistant Clinical Professor, Child Study Center. Ph.D., New York University, 1989. Primary training site: Child Study Center. Major areas of interest: Psychological assessment; Pervasive Developmental Disorders.


Sherrill Werblood, Assistant Clinical Professor. Director, Yale Child Study Center School. Ph.D., New York University, 1977. Primary training site: Child Study Center. Major areas of interest: Clinical treatment and evaluation of children and adolescents and their parents; school consultation; gifted and learning disabled children.

Joseph Woolston, Albert J. Solnit Professor in the Child Study Center and Professor of Pediatrics M.D., University of Pennsylvania, 1973. Primary training site: Child Study Center. Major areas of interest: development, implementation and evaluation of effective treatments for childhood onset mental disorders.

STIPENDS, BENEFITS AND RESOURCES
We anticipate that the stipend level for the coming year will be $30,900 for interns and $32,641 for second year fellows. In addition all trainees receive medical insurance. Four weeks of vacation/personal time, all Yale holidays, and a holiday recess between Christmas and New Year's Day are granted to all trainees. Finally, all psychology trainees are appointed Fellows of the Yale University School of Medicine. With this appointment they receive all the privileges and rights of membership in the Yale University community including access to libraries and other facilities. Each cohort of students shares an office space within the Child Study Center, where they have access to their own telephone with voicemail, two networked computers, a wireless network, testing materials and scoring programs.

Mrs. Debra Federico, our Administrative Assistant, provides half time clerical and technical support to the Chief of Psychology, Director of Training, and the Psychology trainees. Her duties include providing triage for the Psychological Assessment Service, supporting admissions and orientation for incoming interns, ordering and maintaining supplies. A receptionist is provided by the Child Study Center to greet patients and contact clinicians. There is a large staff in the Outpatient Clinic who greet patients, contact clinicians, and support billing. An Information Technology Specialist for the Child Study Center is available to provide support for computer problems on request.

Yale has an extensive library system, which all trainees can readily access. There are numerous trainings offered by the library in order to assist trainees in using the library resources. Yale has a large software library available at https://secure.its.yale.edu/cas/login?service=http://software.yale.edu/Library/.

All trainees receive a Yale email account. The university has an extensive IT department which trainees can call should they have problems with any Yale equipment. During the first week at the Child Study Center, all interns will have the opportunity to have their laptops, iPads, and iPhones configured to meet Yale security requirements.

Program Outcomes
The Yale Child Study Center Psychology Training program was specifically designed to train leaders in the field of child psychology who will go on to careers in research, teaching, clinical services, and advocacy for medically underserved populations. The training model provides clinical and didactic training experiences which allow interns to work with underserved populations across a range of areas. Training experiences emphasize gaining expertise in areas of focus (AOF), while participating in a generalist curriculum of psychological assessment, intervention, interdisciplinary consultation, and professional development. These experiences increase access to clinical services and address the needs of underserved populations, including:

- Children exposed to violence
- Children with serious psychiatric illness
- Children with significant developmental disabilities
- Children with school-related problems
- Children diagnosed with serious physical illness

Each intern has an individualized course of study that incorporates didactic and clinical experiences. Interns are based at the Yale Child Study Center, but engage in multi-agency and multi-disciplinary collaborations through linkages with hospital and community based initiatives. These experiences are designed to increase the workforce of culturally competent psychologists who can effectively work with, and teach others to work with, medically underserved populations.
This two-year integrated approach has demonstrated promise in developing a cadre of practitioners prepared to go on to provide leadership in the areas of clinical service, teaching, and research to medically underserved children and families. Thus far the model has demonstrated its success in a number of ways:

- One hundred percent of program participants work extensively with underserved populations, in both the generalist training curriculum and in their area of focus, including working with children from Health Professions Shortage Areas (HPSAs).
- One hundred percent of program completers continue to work with underserved populations during their second year at the Child Study Center, including working with children from HPSAs.
- Career choices following completion of the two-year program model suggest that participants begin career trajectories which will enable them to make significant contributions as leaders in improving knowledge, skills, competencies, and outcomes both in the development of the health professions workforce and in the delivery of services to underserved populations.

### Graduate Outcomes

<table>
<thead>
<tr>
<th>Intern ID and Area of Focus (AOF)</th>
<th>Internship Year</th>
<th>Initial Employment Setting</th>
<th>Initial Job Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: Trauma</td>
<td>2003-2004</td>
<td>University</td>
<td>Assistant Professor, University of North Carolina</td>
</tr>
<tr>
<td>3: Early Childhood</td>
<td>2003-2004</td>
<td>Medical School</td>
<td>Clinical Instructor, Stanford University, Division of Child and Adolescent Psychiatry, CA</td>
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<tr>
<td>4: Pediatrics</td>
<td>2003-2004</td>
<td>Children's Hospital</td>
<td>Psychology Fellow in Child Health and Behavior Research, Rainbow Babies Hospital, Cleveland, Ohio</td>
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<tr>
<td>6: Early Childhood</td>
<td>2004-2005</td>
<td>Group practice</td>
<td>Psychologist, Boston Neuropsychological Services, Newton, MA</td>
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<tr>
<td>7: Trauma</td>
<td>2004-2005</td>
<td>University</td>
<td>Postdoctoral Research Fellow, John Jay College of Criminal Justice, NY</td>
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<tr>
<td>8: Autism</td>
<td>2004-2005</td>
<td>Medical School</td>
<td>Associate Research Scientist, Autism Program, Yale Child Study Center, New Haven, CT</td>
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<tr>
<td>9: Autism</td>
<td>2005-2006</td>
<td>Medical School</td>
<td>Assistant Professor, University of Illinois at Chicago</td>
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<tr>
<td>10: Trauma</td>
<td>2005-2006</td>
<td>Foundation/Advocacy Agency</td>
<td>Psychologist, Center for Effective Practice, Middletown, CT; Faculty UConn Medical Center</td>
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<tr>
<td>11: Early Childhood</td>
<td>2005-2006</td>
<td>Medical School</td>
<td>Postdoctoral Fellow Boston Children's Hospital</td>
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<td>---------------------</td>
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<td>-----------------------------------------------</td>
</tr>
<tr>
<td>12: Pediatrics</td>
<td>2005-2006</td>
<td>Medical School</td>
<td>Psychologist, Baystate Medical Center, Assistant Professor Tufts</td>
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<td>13: Autism</td>
<td>2006-2007</td>
<td>Medical School</td>
<td>Associate Research Scientist, Autism Program, Yale Child Study Center</td>
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<tr>
<td>14: Trauma</td>
<td>2006-2007</td>
<td>State Children's Hospital</td>
<td>Psychologist, Riverview Hospital for Children, Middletown, CT; Instructor, Yale Child Study Center</td>
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<tr>
<td>15: Early Childhood</td>
<td>2006-2007</td>
<td>Medical School</td>
<td>Boston Children's Hospital, Faculty Harvard Medical School</td>
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<td>16: Pediatrics</td>
<td>2006-2007</td>
<td>Medical School</td>
<td>Postdoctoral Fellow, Emory University Medical School</td>
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<td>17: Autism</td>
<td>2007-2008</td>
<td>Medical School</td>
<td>Psychologist, UCLA Autism Treatment Center</td>
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<td>18: Trauma</td>
<td>2006-2007</td>
<td>University</td>
<td>Assistant Professor, University of Notre Dame</td>
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<tr>
<td>19: Early Childhood</td>
<td>2007-2008</td>
<td>University</td>
<td>Assistant Professor, Northern Illinois University</td>
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<td>20: Pediatrics</td>
<td>2007-2008</td>
<td>Medical School</td>
<td>Assistant Professor, University of Utah</td>
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<td>21: Autism</td>
<td>2008-2009</td>
<td>Medical School</td>
<td>Associate Research Scientist, Yale Child Study Center</td>
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<tr>
<td>22: Trauma</td>
<td>2008-2009</td>
<td>Medical School</td>
<td>Outpatient Clinic, Yale Child Study Center</td>
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<td>23: Early Childhood</td>
<td>2008-2009</td>
<td>Medical School</td>
<td>Assistant Professor, Arkansas Medical Center</td>
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<td>24: Pediatrics</td>
<td>2008-2009</td>
<td>Medical School</td>
<td>Pediatric Psychologist, Healthbridge Hospital, Houston, TX</td>
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<td>25: Autism</td>
<td>2009-2010</td>
<td>Psychology Dept.</td>
<td>Director Autism Assessment Clinic, University of California, Santa Barbara</td>
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<tr>
<td>26: Trauma</td>
<td>2009-2010</td>
<td>Medical School</td>
<td>Postdoctoral Associate, Yale Child Study Center</td>
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<tr>
<td>27: Early Childhood</td>
<td>2009-2010</td>
<td>Medical School</td>
<td>Psychologist, University of Iowa Center for Disabilities and Development</td>
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<tr>
<td>28: Pediatrics</td>
<td>2009-2010</td>
<td>Hospital</td>
<td>Fellow, Dept of Psychosocial Oncology and Palliative Care Dana Farber Clinic</td>
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<td>29: Autism</td>
<td>2010-2011</td>
<td>Medical School</td>
<td>Fellow, Children’s Hospital of Philadelphia</td>
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<tr>
<td>31: Early Childhood</td>
<td>2010-2011</td>
<td>Nonprofit Agency</td>
<td>Fellow, Kempe Center for the Prevention and Treatment of Child Abuse, Denver CO</td>
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<td>Position</td>
<td>years</td>
<td>Institution</td>
<td>Experience Description</td>
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<tr>
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<tr>
<td>Pediatrics</td>
<td>2010-2011</td>
<td>Medical School</td>
<td>Fellow, Stanford Medical School, Pediatric Pain Management Fellowship</td>
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<tr>
<td>Anxiety Disorders</td>
<td>2011-2012</td>
<td>University</td>
<td>Assistant Professor, Northwestern University, Family Institute</td>
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<tr>
<td>Autism</td>
<td>2011-2012</td>
<td>Medical Center</td>
<td>Associate Research Scientist, Yale Child Study Center</td>
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<td>Trauma</td>
<td>2011-2012</td>
<td>University Hospital</td>
<td>Faculty, New York University and Bellevue Hospital</td>
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<td>Early Childhood</td>
<td>2011-2012</td>
<td>Medical Center</td>
<td>Fellow, Yale Child Study Center T-32 Fellowship</td>
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<td>Pediatrics</td>
<td>2011-2012</td>
<td>Community Agency</td>
<td>Pediatric Psychologist in Primary Care, Integrated Wellness, New Haven, CT</td>
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<td>Anxiety Disorders</td>
<td>2012-2013</td>
<td>Group Practice</td>
<td>Clinical Psychologist, Center for Anxiety and Behavior Change, Rockville, MD</td>
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<tr>
<td>Autism</td>
<td>2012-2013</td>
<td>Medical School</td>
<td>Faculty, New York University Child Study Center, Autism Program</td>
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<tr>
<td>Autism</td>
<td>2012-2013</td>
<td>Medical School</td>
<td>Postdoctoral Associate, Yale Child Study Center and Yale Department of Psychiatry</td>
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<td>Trauma</td>
<td>2012-2013</td>
<td>Medical School</td>
<td>Postdoctoral Associate, Yale Child Study Center Trauma Program</td>
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<td>Early Childhood</td>
<td>2012-2013</td>
<td>University</td>
<td>Assistant Professor, Tulane University Department of Psychology</td>
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<td>Pediatrics</td>
<td>2012-2013</td>
<td>Children’s Hospital</td>
<td>Pediatric Psychologist, Children’s Hospitals and Clinics of Minnesota, St. Paul, MN</td>
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<tr>
<td>Autism</td>
<td>2013-2014</td>
<td>Children’s Hospital</td>
<td>Psychologist, Developmental Disabilities Unit, Hospital for Special Care, New Britain, CT</td>
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<tr>
<td>Trauma</td>
<td>2013-2014</td>
<td>University</td>
<td>Assistant Professor, Hebrew University, Israel</td>
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<td>Early Childhood</td>
<td>2013-2014</td>
<td>Community Agency</td>
<td>Director of Training, Child First, Shelton, CT</td>
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<td>Pediatrics</td>
<td>2013-2014</td>
<td>Children’s Hospital</td>
<td>Pediatric Psychologist, Connecticut Children’s Medical Center</td>
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<td>Autism</td>
<td>2014-2015</td>
<td>Medical School</td>
<td>Assistant Clinical Professor, Yale Child Study Center</td>
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<td>Trauma</td>
<td>2014-2015</td>
<td>University</td>
<td>Adjunct Professor, The Chicago School</td>
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<td>Early Childhood</td>
<td>2014-2015</td>
<td>University</td>
<td>T32 Research Post-Doctoral Fellow, University of Michigan</td>
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<td>Pediatrics</td>
<td>2014-2015</td>
<td>Medical School</td>
<td>Pediatric Psychologist, Stanford University Inpatient Unit</td>
</tr>
</tbody>
</table>
APPLICATION PROCEDURE

Applicants are recruited from programs meeting APA accreditation standards across the country. While our program is designed for trainees from clinical programs, candidates from other accredited programs may apply if their prior experience, training, and future career goals are consonant with our program. Re-specialization candidates are also welcome to apply for admission. All candidates must have a plan to complete the doctoral degree before the beginning of their second year of training with us. We anticipate accepting four interns for the 2017-2018 training year.

Applicants must have completed all coursework toward the doctorate and all practicum experiences required prior to internship. Most successful applicants have extensive therapy and psychological assessment experience with children and have worked in multi-disciplinary settings.

The following experiences, while not required, are preferred:

- Training in the bio-psycho-social model and the ability to formulate cases from multiple theoretical perspectives
- At least 5 comprehensive evaluations with children and/or adolescents (a comprehensive assessment one that includes cognitive, achievement, adaptive, and social-emotional data that is integrated through a formulation and provides specific recommendations and clinical feedback to the family)
- Individual therapy experience with children
- Practicum experiences in multi-disciplinary settings
- Dissertation proposal approved by the application deadline (November 1)
- Clinical and/or research experience with the populations in the area/s of focus to which you apply, for example, experience with children and families facing medical illness for the Pediatrics track, experience working with children under 5 for the Early Childhood track, experience providing evidenced-based treatment and evaluation (the Autism Diagnostic Observation Schedule-2) to children for the Autism track, or clinical work with children who have experienced trauma for the Children and Trauma track.

The Admissions Committee seeks to admit students who seem best suited for the educational program, looking for intelligent, mature, and highly motivated candidates who show the greatest promise for becoming leaders and contributors in psychology. When evaluating candidates, the Committee takes into consideration several different factors such as, the applicant’s intellectual abilities, academic and non-academic accomplishments, personal qualities, and their compatibility with the Psychology Training program. Committee evaluations are based on the applicants’ academic record, research experience, activities and accomplishments, recommendations, and personal interviews. The Admissions Committee also considers personal qualities necessary for the successful study and practice of psychology. These include integrity, common sense, personal stability, dedication to the ideal of service, and the ability to inspire and maintain confidence. The Committee seeks to admit students who will be able to function within the psychological training program and, therefore, looks for evidence of maturity, self-discipline, strong motivation, creativity, and enthusiasm.

The Yale Child Study Center Psychology Training Program encourages applications from individuals from all backgrounds and has a solid record of recruiting and training individuals from under-represented populations such as racial and ethnic minorities and the handicapped. We aspire to training a diverse
population of scientists and practitioners. The faculty, staff, and trainees of the Child Study Center include individuals from many cultural and racial backgrounds. Admission to the Psychology Internship Training Program at the Yale Child Study Center is open to all qualified individuals and the Center is committed to a policy of equal opportunity for all applicants for employment. Yale University is committed to basing judgments concerning the admission, education, and employment of individuals upon their qualifications and abilities, and affirmatively seeks to attract to its faculty, staff, and student body qualified persons of diverse backgrounds. In accordance with this policy and as delineated by federal and Connecticut law, Yale does not discriminate in admissions, educational programs, or employment against any individual on the basis of that individual's sex, race, color, religion, age, disability, status as a special disabled veteran or veteran of the Vietnam era or other covered veteran, sexual orientation, or national or ethnic origin.

The Child Study Center Psychology Training Program requires the AAPI Online, which may be accessed at www.appic.org, click on "AAPI Online". Your online application should include: a cover letter, a Curriculum Vitae, the actual application (which includes essays and the DCT's verification of eligibility and readiness), all graduate transcripts. Please include three letters of recommendation, at least two of which should be from supervisors familiar with your clinical work. In addition, each applicant is asked to upload and attach to your electronic application:

A cover letter that explicitly states the following:

1) IN THE FIRST PARAGRAPH, please list and enumerate in order of your preference the tracks that are your top TWO choices (if you only wish to be considered for one track, please indicate that).

2) Please indicate the reasons why you are a good match for both the overall program and for the track or tracks for which you seek consideration, including any relevant experiences during or prior to graduate training.

3) Please note the number of comprehensive psychological assessments you have provided to date. We consider a comprehensive assessment one that includes cognitive, achievement, adaptive, and social-emotional data that is integrated through a formulation and provides specific recommendations and clinical feedback to the family.

4) A de-identified psychological assessment report, preferably one for a child.

5) A de-identified case formulation and treatment summary, preferably one for a child. We realize that different programs and clinics provide differing opportunities for learning to write case formulations and treatment summaries. Please choose your best available example of a treatment write-up that includes: the presenting problem, your clinical assessment, and your formulation of the client’s difficulties.

Applications are due at 9:00 AM Eastern Standard Time on November 1, 2016. Early applications are encouraged and may be reviewed upon receipt. All applications are screened by early December and will be notified of their status by December 15 by phone and/or e-mail.

Top candidates are invited to the Child Study Center for interviews in January. Interviews are a very important part of the application process. Applicants will receive a general program overview, have lunch with current psychology trainees, and meet individually with one trainee and several members of the faculty, including faculty currently working in the focused training area. Applicants who are not granted interviews
after review of written materials are notified by e-mail. Interview dates for this year are: January 4, 5, 6, 11, 12, and 13. As we interview a numerous applicants over a short period of time, we do ask that candidates allow us to take a quick photo when they visit. The purpose of this photo is merely to jog the memory of the interviewers.

As a member of APPIC we adhere to all APPIC regulations concerning the selection of interns. Our institutional and state requirements call for a criminal history, background, and child abuse clearance prior to beginning the internship. An individual who does not pass these background checks will have their offer rescinded prior to the start date. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking–related information from any intern applicant. The starting date for the fellowship is July 1, 2017.

Questions regarding the psychology fellowship or the application process should be addressed to:
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Yale Child Study Center
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230 South Frontage Road
New Haven, CT 06520–7900
Email: michele.goyette–ewing@yale.edu
Phone: (203) 785–6227

The clinical internship is APA Accredited. To contact APA regarding this program:
Education Directorate Program Consultation & Accreditation
750 First Street NE
Washington, DC 20002
Phone: (202) 336–5979
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