Frequently Asked Questions (FAQs) about Training to be a Psychology Practitioner

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1. *What is the difference between clinical psychology, counseling psychology and clinical social work?*

Many of the differences are historical, but <u>in general</u>…

Clinical Psychology programs are housed in Departments of Psychology and train students to assess and treat a broad range of clients/patients, from those with more minor psychological problems through severe psychotic conditions.

Counseling Psychology programs are often housed in Schools of Education and train students to assess and treat those with counselling needs in educational settings as well as in private practice.

Clinical Social Work is not under the umbrella or 'jurisdiction' of the American Psychological Association. Clinical Social Workers are trained in treatment techniques (not as much emphasis on assessment as psychologists have) but are more connected to community resources (e.g., GED programs, support groups, Department of Social Services) than most psychologists.

The venn diagrams of these degrees overlap greatly depending on the programs.

2. *What is the difference between master's programs and doctoral programs?*

Most master's programs are in counselling (MCs) and social work (MSWs). Depending on the licensure laws of the state and insurance companies' whims, master's level practitioners can have fewer opportunities, equal opportunities, or more opportunities than Ph.D. practitioners.

Graduate programs are typically very clear about their options of getting "terminal" master's degrees or the possibility to stay on for a Ph.D. so you need to evaluate your personal circumstances prior to applying.

3. *What courses do I need to enter graduate school to become a practitioner?*

The only course that is <u>required</u> across the board in clinical, counselling, and social work application materials is Research Design.

Why? Being a practitioner is about a great deal more than being a "people person." When called upon to assess a client, a practitioner needs to know about tests' psychometrics (reliability, validity, etc.). A practitioner needs to be current on empirically-based treatment methods for clients, requiring one to be able to read and critically evaluate journal articles on

therapy techniques. An ethical practitioner needs to know the current techniques in the field, but in addition to ethics, a practitioner never knows when a client (and therefore the practitioner's treatment) will be called in to the legal system and s/he called as an expert witness. A practitioner needs to show that s/he knows standards of care (that change annually) and understand the admissability of evidence in legal situations (Daubert or Frye standards of assessment techniques, for example) – all of this requires understanding of journal articles, methods, and statistics.

We would also (highly) recommend taking Abnormal Psychology and/or Personality in order to determine if this is the material you really wish to build a career upon, but it is not required.

The next course that would come in handy in being a practitioner is Neuroscience as understanding the "machine" you are trying to fix, and invariably the medications that have been poured in to that machine, is invaluable.

4. *What are Psy.D. programs?*

Psy.D. programs are programs that more heavily emphasize clinical technique instruction (vs. scientific methods and research) than do Ph.D. programs. As the "scientist-practitioner" model (called the "Boulder Model") is the industry standard, some of these programs stray from that standard. Programs that award Psy.D. degrees are very variable (some are excellent, some are not) and great care should be taken to make sure that you are getting adequate training in the scientific aspects of the profession (for many of the reasons already stated above). At the very least, see if the program adheres to the Boulder Model and is accredited by the American Psychological Association (apa.org).