UNIVERSITY OF DHAKA



Curriculum of the Department of Clinical Psychology

for

MS in Clinical Psychology

Sessions: 2020-21 to 2024-2025

and

MPhil in Clinical Psychology

Sessions: 2020-2021 and onward

and

PhD in Clinical Psychology

Sessions: 2020-2021 and onward

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Curriculum

Department of Clinical Psychology

University of Dhaka

The Department of Clinical Psychology is the only one of its kind in Bangladesh offering postgraduate studies and training in clinical psychology at international standards and producing professional Clinical Psychologists for the country. With tireless effort of the late Professor Anisur Rahman and support from Dr. Graham E. Powell, this post graduate professional training program was initiated as a new stream at the Department of Psychology in 1996 under a link project between the University of London and the University of Dhaka. The Department of Clinical Psychology was established later as a new discipline under the Faculty of Biological Sciences in 1997.

Vision

• Excellence in clinical Psychology by promoting quality in training, research and practice.

Mission

- Promoting Health and Psychological Wellbeing.
- Bringing global standard of Clinical Psychology teaching-training, research and practice in Bangladesh.

Aims

With the overarching objective to contribute to the psychological health of the nation, the department aims to achieve the followings,

- To produce qualified Clinical Psychologists.
- To contribute to the enhancement of efficiency in psychiatric, psychological, rehabilitative, and other allied health services.
- To broaden perspectives in the prevention of disease and promotion of wellbeing.
- To produce high quality research targeted to contribute in the enhancement of knowledge and practice related to health and mental health.
- To contribute in drafting and updating of policies relevant to health and mental health in Bangladesh.

Establishment

The Department of Clinical Psychology is the only one of its kind in Bangladesh offering postgraduate studies and training in clinical psychology at international standards and producing professional Clinical Psychologists for the country. This post graduate professional training program was initiated as a new stream at the Department of Psychology in 1996 (session 1993-94) under a link project between the University of London and the University of Dhaka. The Department of Clinical Psychology was established later as a new discipline under the Faculty of Biological sciences in 1997. Professor Anisur Rahman was the founder chairman of the Department.

Academic Programs

The Department offers a three and a half years integrated course (though two degrees - M.S. and M. Phil) as the qualifying degree in Clinical Psychology. Based on the scientist practitioner model, the courses incorporate a blend of intensive academic, clinical and research activities. Throughout the years the students engaged themselves in rigorous clinical work and receive in depth clinical supervision on their work with patients. The students gradually assume greater clinical responsibilities with increasing experience, knowledge and skills over the years as they pass through MS to MPhil course. The department is also offering PhD in Clinical Psychology as a post-qualification research degree.

Departmental orientation with a strong commitment to the training of clinical scientists as its foundation. With dual emphasis of developing clinical as well as research skills among the students, the department uses a combination of coursework, hospital-based clinical practices, and intensive research work. During the training, the students are placed at government institutions and provide physical health and mental health service to a diverse client population with a wide range of problems and needs. List of problem that is dealt by them include but are not limited to anxiety disorders, somatoform disorders, depression and other mood disorders, suicide, sleep disorders, sexual disorders, personality disorders, adjustment disorders, schizophrenia, paranoid disorders, dementia, diabetes, headaches, disorders of eating and weight, cardiovascular and respiratory diseases, chronic pain, drug and alcohol problems, disorders of childhood and adolescents, intellectual disabilities, problems of old age, marital conflicts etc. All the clinical activates carried out by the students are supervised by assigned clinical supervisors.

The students and graduates of the department are well versed and equipped with skills related to psychological assessments (e.g., questionnaires, and psychometric tests) and therapeutic intervention (e.g., CognitiveBehaviour Therapy,Behaviouralapproaches, Systemic and Family therapy, Psychodrama).

MS in Clinical Psychology program is targeted to train the students on treating full spectrum of mental health problems among adults. They learn treating mental health problems of the children and adolescents during their MPhil years along with carrying out specialist mental health placements (e.g., drug addiction, health psychology, psychosexual dysfunctions, trauma, and neuropsychology)

Core Competencies of the Graduates

Though the process of intensive professional training and supervision, the trainees acquire several core skills which includes but are not limited to the following

Knowledge. Being connected with updated knowledge and research findings, aspiring to attend workshop, seminar or training to enhance skills and knowledge.

Assessment. Being able to explore clients' problem with suitable tools learning to use and interpret psychometric tools.

Formulation. Being able to understand and formulate the clients' problems,

Treatment. Being able to devise treatment plan, provide intervention, assess progress, prepare for termination, and plan for relapse prevention.

Work load. Managing appropriate caseloads and keeping records as per suggested guidelines.

Supervision. Acknowledging need for supervision, acquiring ability to understanding and seek supervision.

Professional behaviour. Being reliable, trustworthy, being respectful to clients and colleagues, following the code of conduct, establishing and maintaining working professional relationships and communication.

Independence. Becoming independent in thinking, planning, solving problems; using creativity and innovation; being able to transfer and use skills in different contexts.

Facilities at the Department

Prof. Roquia Begam Research Laboratory. Eight workstations exclusively for student enrolled in advanced research degree (MPhil and PhD).

Prof. Anisur Rahman Resource Centre. A rich library with updated books and reference materials on clinical psychology and related areas.

Nasirullah Foundation Conference Hall. A modern conference hall suitable for arranging seminar, training and workshop with seating arrangement for 50-70 individual.

Clinical Consultation Room. A small room for conducting clinical sessions and psychological assessment. Opportunities of clinical consultation is also available through the Psychological Assessment Clinic and Nasirullah Psychotherapy Unit at the department of Clinical Psychology.

Awards and Fellowship

Dhaka University MPhil Scholarship. The major proportion of the MPhil researcher of the department receive Dhaka University MPhil Scholarship

Quinn-Hallway foundation scholarship. This is research scholarship where funding is provided for research in the area of neuropsychology

AzizunnessaMemorial Gold Medal. A gold medal awarded every year for the best scorer of MS in clinical psychology.

MPhil Research Fund. Every year the department offer one fellowship to deserving MPhil candidate for two years. It includes a monthly stipend of approximately Tk.5000. The funding money is arranged by the department though its various income generating activities.

Bilkis Jahan and Mahbubul Haque Scholarship. One student from the MS in clinical psychology will receive this scholarship. The details are currently being processed.

Dhaka University MPhil Research Fellowship. University has its own research fellowship for MPhil researchers. Students from the department of clinical psychology are among the moajor recipients of this fund.

Activities of the Department

The department in collaboration with Bangladesh Clinical Psychology Society (BCPS) regularly organizes large scale programs targeted to general public, professionals and academic audience. Celebrating World Mental Health Day, arranging trainings on clinical and research skills for professionals and academicians, organizing conferences are all part of regular activities of the department.

Admission to the Department

Enrolment in Clinical Psychology program is competitive. Students are enrolled through an admission examination process. Anyone with a bachelor in Psychology interested to develop career in application of psychology in mental health and having care for the distressed are encouraged to apply. Admission process starts between September-October with an announcement for application at the leading daily newspapers in Bangladesh. The announcement is also forwarded to the major psychology departments accord the country. Those interested can contact departmental office anytime for early information and preparation for admission test. Potential candidates are recommended to seek appointment with any teacher of the Department through the office to get advice and relevant information regarding the program and culture of the Department.

Eligibility

Four-year Bachelor degree in Psychology with a high second class from any recognized University. Students with three-year Bachelor degree in psychology can also apply in they also hold M.Sc. in Psychology. Students who have appeared in the 4th year final examination in Psychology are also eligible to apply.

Application form

The prospective candidates are advised to collect application form from the Departmental office, Room no. 5017, Arts Building, 4th floor, University of Dhaka after the announcement for admission is published.

Admission test

As Clinical Psychology is a post-graduate program, the student's enrolled need to have a sound knowledge in psychology. A written test is designed to asses knowledge and understanding on basic psychological concepts, theories, psychometrics, research methods and abnormal psychology. A separate multiple choice questions test is also used to test psychology knowledge. Apart from these, the admission test also involves testing for analytical ability and language comprehension both in English and Bengali. Those who pass the written test are invited for viva-voce where further assessment of their suitability for clinical psychology program is assessed.

Admission Timeline

Admission announcement : September – October

Admission test : October – November

Class begins : January

Faculty Members

We have ten full-time faculty members, three visiting faculty members and four [art-time faculty members. The name of the honourable academic persons is given below.

Full-time Faculties

Dr. Mohammad Mahmudur Rahaman

Kamal Uddin Ahmed Chowdhury

Dr. Farah Deeba

Dr. Mumammad Kamruzzaman Mozumder

S.M. Abul Kalam Azad

Mosammat Nazma Khatun

Jobeda Khatun

Md. Shahanur Hossain

Farzana Akter

Dr. Parveen Huque

Visiting Faculties

Dr. Graham E. Powel

Dr. David A Quinn

Dr. Glenda Fredman

Part-time Faculties

Dr. A A Munib

Dr.JhunuShamsun Nahar

Tarun Kanti Gayen

Salma Perveen

For more information please contact: Department of Clinical Psychology Room no. 5017, Arts Building, 4th floor, Dhaka University, Dhaka-1000 Phone: +88-02-9661920-73, Ext 7800 & 7801 E-mail: clinpsy@du.ac.bd

Curriculum for MS and MPhil in Clinical Psychology

Department of Clinical Psychology

University of Dhaka

1. Philosophy of the program

- That Clinical Psychologists integrate academic knowledge, clinical skills, and research expertise from within the discipline of Psychology.
- That Clinical Psychologists solve problems by the application of fundamental psychological principles.
- That the program is generic, covering all types of patient and setting and a wide range of assessment and treatment techniques.
- That the program should focus directly upon the needs. of the psychiatric services.
- That the course be conceived as a joint enterprise between academic and service institutions, i. e., the University of Dhaka, the Bangabandhu Sheikh Mujib Medical University (BSMMU), Dhaka Medical College Hospital (DMCH), the National Institute of Mental Health (NIMH), Dhaka. Additionally, the course will maintain close working liaison with Psychiatry, Neurology, Medicine, Surgery, Cardiology, Oncology, endocrinology, gastroenterology, Paediatrics and other departments of major public and private hospitals in Bangladesh.
- That ultimately all aspects of course organization and content are driven by service and client need.

2. Aims

- To contribute to the psychological health of the nation
- To contribute to the development and efficiency of psychiatric services.
- To produce a generation of Clinical Psychologists for Bangladesh.
- To train those who will become Clinical Psychology supervisors and trainers.

- To train those who will be mental health researchers from bio-psychosocial perspectives.
- To be the trainer and supervisor of counsellors, psychotherapists and mental health workers.
- To be the manager and director of clinical psychology, psychotherapy and counselling services in both health and non-health community settings.

3. Objectives

- To have a generic, thorough and intensive one and half-year program
- To combine academic courses, a range of supervised clinical work, and research supervision all in areas of service need.
- To foster a critical understanding of the empirical literature and fundamental theories.
- To achieve experience of a wide range of clients, problems and assessment and treatment methods.
- To create an understanding of the value of research in clinical practice and service development, and to be able to do such research.
- To produce Clinical Psychologists who achieve a high standard of professional conduct and understanding.
- To produce Clinical Psychologists who will be culture and gender sensitive.
- To produce Clinical Psychologists who will be capable to help government and nongovernment health sectors to adopt positive mental health policies and practices.

4. Basic Course Structure

This is an integrated course comprising MS (one and half years) and MPhil (two years) degree in Clinical Psychology, each consisting of three components, namely: theoretical, clinical, and research work. Students will gradually assume greater clinical responsibilities with increasing experience. It should be noted that the time devoted to clinical work includes supervision time and private study time in support of patient contacts.

Syllabus for MS in Clinical Psychology University of Dhaka

One and half years MS program in the Department of Clinical Psychology will follow Letter Grading System. Students will take a total of 42 Credit for the MS Degree. The course distribution will be as follows:

| Units | No. of Credit | Marks |
|----------------|---------------|-------|
| Theory | 22 | 550 |
| Clinical Work* | 10 | 250 |
| Thesis | 6 | 150 |
| Seminar | 2 | 50 |
| Viva Voce | 2 | 50 |
| Total | 42 | 1050 |

^{*}Clinical work involves Clinical Internship (CPSY 507) and Practice in Psychometrics (CPSY 508).

| Course No: | Course Title | Marks | Credit |
|------------|---|-------|--------|
| CPSY 501 | Introduction to Psychiatry | 100 | 4 |
| CPSY 502 | Fundamental Principles of Clinical Psychology | 50 | 2 |
| CPSY 503 | Psychology of Adult Mental Health Problems | 100 | 4 |
| CPSY 504 | Clinical Health Psychology | 100 | 4 |
| CPSY 505 | Clinical Research Methods and Statistics | 100 | 4 |
| CPSY 506 | Models of Therapy | 100 | 4 |
| CPSY 507 | Clinical Internship | 200 | 8 |

| Course No: | Course Title | Marks | Credit |
|------------|---|-------|---------|
| CPSY 508 | Practice in Psychometrics | 50 | 2 |
| CPSY 509 | Seminar | 50 | 2 |
| CPSY 510 | Thesis | 150 | 6 |
| CPSY 511 | Viva Voce | 50 | 2 |
| CPSY 512 | Professional Issues | (Non- | credit) |
| CPSY 513 | Contemporary Approaches to Psychotherapy | (Non- | credit) |
| CPSY 514 | Introduction to Child and Adolescent Mental Health | (Non- | credit) |
| | Total | 1050 | 42 |

To obtain M. S degree, students are required to take a total of 42 credit. Each four-credit course will be of 100 marks comprising of 60 lecture-hours, and two-credit course will be of 50 marks comprising of 40 lecture-hours.

CPSY 501: Introduction to Psychiatry

(Theory: 4 Credit, 100 Marks)

Course Objectives

This course will orient the students on psychiatry including classification, assessment,

diagnosis, medical treatment of major psychiatric disorders and psychopharmacology with

the aim to have better understanding on recent practices in psychiatry. This orientation will

help students to better understand and communicate with the key mental health

professionals regarding psychiatric conditions of clients.

Specific Objectives

This course aims to help the students learn

1. General ideas and approaches of medical model in dealing mental illness.

2. Different classification systems available for mental illness.

3. Contents and procedure of in-depth psychiatric interview for assessing individuals

with mental illness.

4. Basic ideas on neurological assessment and their use in helping individuals with

mental illness.

5. Understand the major psychopharmacological treatments along with their

indications, contraindications and effects.

6. Basic concepts of child psychiatry and community psychiatry.

Instructional Strategies

Theoretical Lecture: 60 credit hours.

Assessment Methods

Class Attendance: 5 marks

Mid-term examination: 35 marks (averaged marks obtained from 2 examinations)

Final Examination: 60 marks (examination at the end of teaching courses)

Learning Outcomes

After completing this course, the students will be able to

1. Will appreciate the medical model as one of the effective approaches in dealing

mental illness.

- 2. Will be able to use the classification systems for mental illness in their clinical practice.
- 3. Will be able to conduct in-depth psychiatric interview for assessing individuals with mental illness.
- 4. Will appreciate the need and be able to incorporate neurological assessment for individuals with mental illness.
- 5. Will understand the major psychopharmacological treatments along with their indications, contraindications and effects.
- 6. Will be oriented about child psychiatry and community psychiatry.

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Classification of mental illness: DSM-5 and ICD 10 | | |
| | History and development | 1 | TL |
| | Guiding principles | 1 | TL |
| | Strengths and weaknesses | 1 | TL |
| | Organic mental disorders (especially dementias) | 1 | TL |
| | Psychoactive substance use disorders | 1 | TL |
| | Schizophrenias | 1 | TL |
| | Delusional (paranoid) disorders | 1 | TL |
| | Mood disorders | 1 | TL |
| | Anxiety disorders | 1 | TL |
| | Somatoform disorders | 1 | TL |
| | Sexual disorders | 1 | TL |
| | Sleep disorders | 1 | TL |
| | Impulse control disorders | 1 | TL |
| | Adjustment disorders | 1 | TL |
| | Personality disorders | 1 | TL |
| 2 | Psychopharmacology | | |
| | Stimulants | 1 | TL |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Depressants | 1 | TL |
| | Hallucinogen | 1 | TL |
| | Antipsychotic drugs | 1 | TL |
| | Antidepressants | 1 | TL |
| | Anti-anxiety drugs | 1 | TL |
| | Mechanisms of action | 1 | TL |
| | Clinical use, efficacy and side effects | 1 | TL |
| | Advancement in Psychopharmacology | 1 | TL |
| | Ethical issues | 1 | TL |
| 3 | Psychiatric interview | | |
| | Presenting problems | 1 | TL |
| | History and effects of symptoms | 1 | TL |
| | History of treatment | 1 | TL |
| | Family history | | |
| | Personal history (early development, childhood, schooling, occupation, adolescence, sexual history, marital history, children, medical history, previous mental health, drug abuse, forensic, current life situation) | 2 | TL |
| | Personality | 1 | TL |
| | Presenting mental state | 1 | TL |
| 4 | Neurological examination | 2 | TL |
| | The cranial nerves | | |
| | Motor system | | |
| | Sensory system | | |
| | Investigations (interpretation of EEG, CT, PET, MRI report) | | |
| 5 | Introduction to child psychiatry | 2 | TL |
| | | | |

| | Content | | Class* | Method** |
|---|-----------------------------|-------|--------|----------|
| 7 | Diagnosis of mental illness | | 2 | TL |
| | | Total | 40 | |

Note: *Per class 90 minutes; ** TL = Theoretical lecture

Suggested readings

- American Psychiatric Association (1994) Diagnostic and Statistical Manual of Mental Disorders. Washington, DC: APA.
- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders, (DSM-5). American Psychiatric Association.
- Block S & Chodoff P (eds.) (1991). Psychiatric Ethics. New York: Oxford University Press.
- Casey, P. and Kelly, B. (2007). Fish's Clinical Psychopathology, 3rd edition, The Royal College of Psychiatrists.
- Cowen, P. Harrison, P. & Burns, T. (2012). Shorter Oxford Textbook of Psychiatry 6th edition. Oxford University Press.
- Kaplan, H. I. & Sadock, B. J. (2010). Pocket Hand Book of Clinical Psychiatry, 5th edition.
- Kaplan, H. I. & Sadock, B. J. (1996). Concise Textbook of Clinical Psychiatry, 7th edition.
- World Health Organization. International Statistical Classification of Disease and Related Health Problems, Tenth Revision (ICD-10) Geneva: World Health Organization; 1992.

CPSY 502: Fundamental Principles of Clinical Psychology

(Theory: 2 Credit, 50 Marks)

Course Objectives

This course will orient the students on psychiatry including classification, assessment, diagnosis, medical treatment of major psychiatric disorders and psychopharmacology with the aim to have better understanding on recent practices in psychiatry. This orientation will help students to better understand and communicate with the key mental health

professionals regarding psychiatric conditions of clients.

Specific Objectives

This course aims to help the students learn

1. How clinical psychology has emerged historically.

2. Role of clinical psychologists in mental health and health care services.

3. The interplay among different specialties of clinical psychology such as community psychology, neuropsychology, health psychology, clinical child psychology, and

forensic psychology.

4. Different scientific models of training in clinical psychology and their implications in

clinical practice.

5. The areas and method of clinical assessment and the ways to integrate data from

different sources.

6. Process of functional analysis and its use in clinical practice.

7. Case formulation utilizing data gathered from different assessment method and

perspectives.

8. Major principles of psychological treatment.

9. How to Identify and manage problems encountered in the treatment process.

10. Importance of scientific thinking in clinical practice.

Instructional Strategies

Participatory Lecture (20)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment

Assessment Methods

Class Attendance: 5 marks

Mid-term examination: 35 marks (averaged marks obtained from 2 examinations)

Final Examination: 60 marks (examination after completion of teaching period)

Assignment (non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. Describe the developmental process of clinical psychology as a profession.
- 2. Demonstrate the functions of clinical psychologists in their clinical practice.
- 3. Differentiate and appreciate the role from different specialties of clinical psychology profession.
- 4. Compare and contrast the different scientific models of training in clinical psychology and their implications in clinical practice.
- 5. Use different assessment approaches and techniques in clinical psychology and integrate assessment data in clinical practice and research purposes.
- 6. Analyse and formulate cases based on functional analysis.
- 7. Appreciate use of multiple perspectives in case formulation.
- 8. Recognize and utilize the principles of psychological treatment.
- 9. Learn skills to manage problems raised during the treatment.
- 10. Recognize the roles and boundaries of different specialties in clinical psychology such as community psychology, neuropsychology, health psychology, clinical child psychology, and forensic psychology.

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Foundations of Clinical Psychology | | |
| | Historical background of clinical psychology | 1 | PL |
| | Current issues in clinical psychology | 1 | PL |
| | Functions of a clinical psychology | 1 | PL |
| 2 | Specialties in Clinical Psychology | | |

| | Content | Class* | Method** |
|---|--|--------|----------|
| | Community psychology | 1 | PL, AS |
| | Health psychology and Behavioural medicine | 1 | PL, AS |
| | Neuropsychology | 1 | PL, AS |
| | Forensic psychology | 1 | PL, AS |
| | Paediatric and clinical Child psychology | 1 | PL, AS |
| 3 | Models of training in clinical Psychology | 2 | PL |
| | Scientist-Practitioner | | |
| | Local Clinical Scientist | | |
| | Applied Scientist | | |
| | Evidence-based Practitioner | | |
| | Clinical Scientist | | |
| 4 | Clinical Assessment | | |
| | Areas of Clinical assessment and goals of assessment | 2 | PL |
| | Issues to consider in clinical assessment: Rapport, Continuous assessment, Clinical Judgment, and other relevant aspects | 2 | PL |
| | Assessment of Physical organism | | |
| | General physical examination, | 1 | PL |
| | Neurological examination, | | |
| | Neuropsychological examination | | |
| | Psychosocial Assessment | | |
| | Clinical Interview | 2 | PL, PS |
| | Behavioural assessment | | |
| | Assessment of Intelligence | | |
| | Personality assessment | | |
| | Social Functioning | | |
| | Occupational assessment | _ | _ |
| | Integration of assessment data | 1 | PL |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Advancement in clinical assessment (computerized assessment) | 1 | PL |
| 5 | Models of training in clinical Psychology | | |
| | Functional assessment | 1 | PL |
| | Process of functional analysis | 2 | PL |
| | Using Functional analysis in Therapy | 2 | PL |
| | Making a formulation | 1 | PL |
| 6 | Clinical Interventions | | |
| | Process of being a scientific therapist: Defining aims, continuous assessment, definition of techniques, progress through investigation | 1 | PL |
| | Common principles of treatment: Realistic expectations, Reinforcement, Feedback, Graded approaches, Modelling, Rehearsal, Changing | 1 | PL |
| | Common treatment Problems: treatment compliance, Cure vs. control, prioritizing targets, Needing supervision, Discharge and Relapse | 1 | PL |
| | Total | 28 | |

Note: *Per class 90 minutes; **PL= Participatory lecture, **PS= Presentation by students, *AS= assignment

Suggested readings

- Barker, C., Pistrang, N., & Elliott, R. (2016). Research methods in clinical psychology: an introduction for students and practitioners. New York: John Willey & Sons.
- Brammer, H. M. ,Shostrom, E. L &Abrego, P. J. (1989). Therapeutic Psychology: Fundamentals of Counselling and Psychotherapy. Englewood Cliffs, NJ: Prentice Hall.
- Hersen, M &Bellack, A. S (eds.) (1988). A Dictionary of Behavioural Assessment Techniques. New York: Pergammon Press.
- Lindsay, S. J. E. & Powell, G. E. (eds.), (2007). The Handbook of Clinical Adult Psychology. Third Edition. London: Routledge.

- Lindsay, S. J. E. & Powell, G. E. (eds.), (1987). The Handbook of Clinical Adult Psychology. Second Edition. London: Routledge.
- Marziller, J & Hall, J (1999). What is Clinical Psychology? Oxford
- Mollins, C. R & Trower, P (eds.) (1988). Handbook of Social Skills Training: Clinical Applications and New Directions. Oxford: Pergammon.
- Oullette, R., Management of Aggressive Behaviour: A Comprehensive guide to Learning how to recognize, reduce, manage & control aggressive behaviour. Pref. Dimensions Pub.
- Powell, G. E, Young, R. & Frosh, S. (1993) Curriculum in Clinical Psychology. Leicester: BPS (DCP) Publications.
- Roth, A. & Fonagy, P. (1996). What Works for Whom. The Guilford Press.
- Sturmey, P. (1996). Functional Analysis in Clinical Psychology. John willey & Sons.
- Sturmey, P. (Ed.). (2020). Functional analysis in clinical treatment. Academic Press.
- Trull, T. J. and Prinstein, M. J (2013) Clinical Psychology, Eighth Edition, Wadsworth Cengage Learning, Belmont.

CPSY 503: Psychology of Adult Mental Health Problems

(Theory: 4 Credit, 100 Marks)

Course Objectives

Working with mental health issues requires understanding of mental health problems across life-span. This course aims to develop an understanding of the nature, causation and treatment of prevalent mental health problems in adults including elderly part of the lifespan. It will equip the students with theoretical knowledge as well as practical understanding of clinical psychological assessment and intervention techniques specific to each of these problems.

Specific Objectives

This course aims to help the students learn

- 1. To develop advanced clinical skills that prepare them for working in various health and mental health clinical settings.
- 2. Different types of disorders, their casual connection and evidence-based interventions.
- 3. Related theory for the common mental health disorders/ problems.
- 4. Core principles and concepts of mental health psychopathology.
- 5. Treatment modalities related to the mental health care of clients and their families are included in the course.
- 6. To identify suicidal risks and to manage them properly.
- 7. To implement the crisis intervention techniques in the case of suicide, self-harm and acute stress.
- 8. In-depth assessment strategies, therapeutic intervention and preventive approaches to minimize stress related reactions from traumatic events.
- 9. Early assessment of the trauma -related disorders and their intervention
- 10. Students will learn how to use evidence-based interventions to implement in their clinical practices and interventions.

Instructional Strategies

Theoretical Lecture (40 hours)

Practical demonstration of clinical skills

Group Discussion/ Debate / Problem solving

Audio-visual aids, oral presentations

Written Assignment

Assessment Methods

Class Attendance - 5 marks

Mid-term examination- 35 marks (averaged mark obtained from 2 examinations)

Final Examination - 60 marks (examination after completion of teaching courses)

Assignment (non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. Identify the core concept for assessing and implementing intervention strategies.
- 2. Identify the common mental health problems.
- 3. Assess and implement the treatment techniques for clients' problems.
- 4. Explain the formulation for the client's problem within the cultural context.
- 5. Differentiate common types of mental illnesses encountered in hospital settings.
- 6. Use treatment rationale, critical thinking and problem-solving skills in clinical practice.
- 7. Practice in a consistent, ethical, and responsible manner.
- 8. Practice with responsibility and be accountable for own behaviour.
- 9. Make ethical decisions in clinical practice.
- 10. Identify different types of treatment for mental disorders including the use of psychotherapy, medications and cognitive- behaviour therapy.
- 11. Use intervention technique in contextually sensitive manner.
- 12. Prepare cases for intervention delivery.
- 13. Demonstrate advanced clinical skills in dealing adult cases.
- 14. Identify suicide risk and manage case responsively.
- 15. Implement crisis intervention strategy of necessary cases.
- 16. Implement evidence-based intervention in clinical practice.

| | Content | Class* | Method** |
|---|---|--------|----------|
| 1 | Mental health problems across life span | 2 | PL |
| | Child and adolescent | | |
| | Adult | | |
| | Elderly | | |
| 2 | Panic disorder | | |
| | Investigation | 1 | PL, PS |
| | The symptoms | | |
| | Natural courses | | |
| | Causal factors | | |
| | Assessment | | |
| | Treatment | 2 | PL, PS |
| | Psycho-education | | |
| | Exposure | | |
| | Cognitive therapy | | |
| 3 | Social Phobia | | |
| | Investigation | 2 | PL, PS |
| | Defining features | | |
| | Casual factors | | |
| | Assessment | | |
| | Treatment | 2 | PL, PS |
| | Specific intervention: self-focus attention and safety behaviour experiment | | |
| | Behavioural experiment | | |
| 4 | Obsessive Compulsive and Related Disorders Areas of | | |
| | Investigation | 2 | PL, PS |
| | Defining features | | |
| | Causal factors | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Assessment | | |
| | Treatment | 2 | PL, PS |
| | Cognitive-Behavioural treatment | | |
| | Exposure and response prevention for those with overt compulsion | | |
| | Modelling | | |
| | Thought-stopping and thought- control | | |
| | Habituation/satiation | | |
| 5 | Other disorders of Fear and Anxiety | | |
| | Generalized anxiety disorder (GAD) | | |
| | Investigation | 1 | PL |
| | The symptoms Causal factors Assessment | | |
| | Treatment | 1 | PL |
| | Cognitive Therapy | | |
| | Somatoform Disorder | 2 | PL, PS |
| | Investigation | | |
| | Treatment | | |
| 6 | Trauma and stressor related disorders | | |
| | Post-Traumatic Stress Disorder (PTSD) | | |
| | Investigation | 2 | PL, PS |
| | Defining criteria Causal factors Psychosocial risk factors Assessment | | |
| | Treatment | 2 | PL, PS |
| | Psychological Treatment Exposure/reliving Processing of the trauma memory | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Restructuring Images | | |
| 7 | Crisis intervention | 2 | PL, PS |
| | Theoretical understanding of crisis | | |
| | Models of crisis intervention | | |
| | Clinical presentation of crisis | | |
| | Suicide | | |
| | Self-harm | | |
| | Disaster | | |
| | Violence and trauma | | |
| 8 | Major Depressive Disorders | | |
| | Investigation | 2 | PL, PS |
| | Defining features of Major Depressive Disorders | | |
| | Causal factors | | |
| | Assessment | | |
| | Treatment | 2 | PL, PS |
| | Cognitive behavioural Therapy | | |
| | Effectiveness of Cognitive behavioural Therapy | | |
| | Interpersonal Therapy | | |
| 9 | Bipolar and Related Disorders | | |
| | Investigation | 2 | PL, PS |
| | Diagnostic Criteria | | |
| | Causal factors | | |
| | Assessment | | |
| | Symptom profile | | |
| | Treatment | 2 | PL, PS |
| | Therapy Cognitive Therapy | | |
| | Medication management | | |

| | Content | Class* | Method* |
|----|---|--------|---------|
| 10 | Schizophrenia spectrum and other psychotic disorder | | |
| | Investigation | 2 | PL, PS |
| | Historical origins | | |
| | Symptoms | | |
| | Causal factors | | |
| | Assessment (e. g. questionnaires, behavioural tests, ratings) | | |
| | Assessing 'at-risk' mental states | | |
| | Treatment | 2 | PL, PS |
| | Family interventions | | |
| | Rehabilitation | | |
| | Social skill training | | |
| | Cognitive Behaviour Therapy | | |
| | Medication management | | |
| 11 | Substance Related Disorders | | |
| | Investigation | 2 | PL, PS |
| | Dependence and addiction | | |
| | Causal factors of substance related disorders | | |
| | Assessment (e. g. questionnaires, behavioural tests, ratings) | | |
| | Treatment | 2 | PL, PS |
| | Treatment approaches: Social – | | |
| | behavioural, Cognitive | | |
| | Relapse prevention | | |
| | Self-efficacy, Self-control training, Motivational interviewing, milieu therapy | | |
| | Conditioning therapies | | |

| Content | Class* | Method** |
|--|--------|----------|
| Group therapies | | |
| Pharmacological treatment | | |
| 12 Problems during Elderly | | |
| Investigation | 2 | PL, PS |
| Normal Aging | | |
| Multi-dimensional changes | | |
| The assessment of cognitive abilities, mood and well being | | |
| Practical considerations for cognitive assessment | | |
| Treatment | | |
| Psychological treatment of the dementias | 2 | PL, PS |
| Challenging behaviour | | |
| Interventions with family and caregivers | | |
| Treatment of affective disorders | | |
| 13 Sexual dysfunctions | 2 | PL, PS |
| Sexual anatomy and sexual response | | |
| Bio-psycho-social aspects of sexuality | | |
| Nature effects and causes of sexual problems | | |
| Male and female sexual dysfunction | | |
| Management of Sexual problems (assessment, formulation, homework assignments, helping with general relationship problems and co-morbid problems) | | |
| Total | 45 | |

^{*}Note: Per class 90 minutes; ** PL= Participatory lecture, **PS= Presentation by students

Suggested readings

Bancroft, J. (2009). Human Sexuality & Its Problems. Churchill Livingstone.

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- Champion, L & Power, M. (2000). Adult Psychological Problems: An Introduction. Psychology Press.
- Clark, D. A. ,& Beck, A. T. (2011). Cognitive therapy of anxiety disorders: Science and practice. Guilford Press.
- Colman, A. M. (ed) (1994) Companion Encyclopaedia of Psychology Volumes I and II. London: Routledge.
- Davey, G. & Tallis, F. (eds.). (1994) Worrying: Perspectives on Theory, Assessment and Treatment. Chichester: John Wily & sons.
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- Fonagy, P. & Higgitt, A. (1984). Personality theory and Clinical Practice.
- Fowler, D. ,Garety, P. , &Kuipers, E. (1995). Cognitive behaviour therapy for psychosis: Theory and practice. Wiley.
- Glass, I. (ed) (1991). Addiction Behaviour. London: Routledge.
- Goldberg, S. et al (eds.) Attachment Theory: Social, Developmental and Clinical Perspectives. London: The Analytic Press.
- Hawton, K. (1985). Sex Therapy: A Practical Guide. New York: Oxford University Press.
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- Herbert, M. (1998) Clinical Child Psychology. John Willey & Sons.

- Jenike, M. A., Baer, L. & Minichiello (eds.) (1990) Obsessive Compulsive Disoders: Theory and Management. Chicago: Year Book Medical Publications.
- Kennedy, G. J., (1996) Suicide and depression in later life. Wiley.
- Kingdon, D. G. & Turkington, D. (2000) Cognitive behaviour therapy of schizophrenia. Guilford Press.
- Kirana, P. S; Tripodi, F. Reisman, Y. PorsT, H. (editors). (203): The EFC and ESSM Syllabus of Clinical Sexology. Medix. Amsterdam, ISBN/EAN: 978-94-91487-10-1
- Lindsay, S. & Powell, G. (eds.), (2007). The Handbook of Clinical Adult Psychology. Third Edition. London: Routledge.
- Maris, R. W., Berman, A. L., Masltsberger, J. T., & Yufit, R. I. (eds.). (1992). Assessment and prediction of suicide. New York: Guilford Press.
- Masters, W. H., Johnson, V. E., & Kolodny, R. C. (1986). On sex and human loving. Little, Brown.
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- Watts, F. N. & Bennet, D. H. (eds.) (1991). Theoryand Practice of Psychiatric Rehabilitation. Chichester: Wiley & Sons

CPSY 504: Clinical Health Psychology

(Theory: 4 Credit, 100 Marks)

Course Objectives

This course aims to teach the students on contemporary issues in clinical health psychology. The students will gather knowledge on how clinical psychologists can contribute in medical settings by offering psychological services to medically ill and by incorporating psychological principles in health care and health policy.

Specific Objectives

This course aims to help the students learn

- 1. History and development of health psychology.
- 2. The interplay between psychology and health and the biopsychosocial system.
- 3. Different theoretical aspects of health psychology.
- 4. Role of health psychologists in health care services.
- 5. Stress and it's impacts our health, managing stress and stress reactions effectively.
- 6. The classification of chronic health conditions such as chronic pain, diabetes, cardiovascular diseases, terminal illnesses, HIV AIDS and the biopsychosocial determinants of those diseases.
- 7. Learn assessment strategies, different treatment and preventive approaches to minimize sleep disorders, eating disorders, cardiovascular problems, chronic pain, diabetes and other psychophysiological disorders.
- 8. The psychosocial aspects of disaster and its impacts on mental and physical health.
- 9. Different assessment and therapeutic aspects of crisis management related to trauma and disaster.
- 10. Understanding pandemic outbreak and coping with mental health consequences.
- 11. Role of clinical psychologists to develop health psychology in the context of Bangladesh.

Instructional Strategies

Instructional Strategies

Participatory Lecture (40)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment

Assessment Methods

Class Attendance - 5 marks

Mid-term examination (2)- each 35 marks (Scores obtained in 2 mid-terms will be averaged)

Final Examination - 60 marks (examination after completion of teaching period)

Learning Outcomes

After completing this course, the students will be able to

- 1. Describe the developmental process of health psychology as a profession.
- 2. Implement theoretical knowledge of health psychology in their everyday life and influence others to develop health protective behaviour.
- 3. Make people aware how psychology and health are related and how healthy behaviour can be optimized.
- 4. Compare and contrast stress related reactions from psychiatric disorders.
- 5. Appreciate the use of different assessment approaches of chronic health condition and their use in clinical practice and research.
- 6. Integrate the role of health psychologists in determining the level of chronic health conditions and formulate psychological intervention.
- 7. Formulate preventive approaches in the community level to improve healthy lifestyle and minimize chronic diseases.
- 8. Assess psychosocial aspects of HIV AIDS and design appropriate services.
- 9. Design and implement crisis intervention programs in response to natural or manmade disaster or victims of trauma.
- 10. Summarize coping with mental health consequences during and after pandemic outbreak.
- 11. Take role in establishing health psychology in Bangladesh.

| | Content | Class* | Method** |
|---|--------------|--------|----------|
| 1 | Introduction | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Health related behaviour and health promotion | 1 | PL |
| | An overview of psychology and health | 2 | PL |
| | Illness, hospitalization and its effects on children, adults and elderly | 2 | PL |
| | Future direction for health psychology? | 1 | PL |
| 2 | Psychobiological Systems | 2 | PL |
| | Importance of Biological Systems | | |
| 3 | Stress and Coping | | |
| | Concept of stress | 1 | PL |
| | Biopsychosocial determinants of stress | 2 | PL |
| | Assessment of stress | 1 | PS |
| | Management of stress | 1 | PS |
| 4 | Sleep disorders | | |
| | Defining sleep and sleep disorders | 1 | PL |
| | Biopsychosocial determinants of sleep and classification of sleep disorders | 1 | PL |
| | Assessment of sleep disorders | 1 | PL |
| | Management of sleep disorders | 1 | PL |
| 5 | Cardiovascular problems | | |
| | Types of Cardiovascular problems/diseases (CVD) | 1 | PL |
| | Assessment of CVD | 1 | PL |
| | Management of CVD | 1 | PL |
| | Prevention of CVD | 1 | PL |
| 6 | Chronic pain | | |
| | Dimensions of chronic pain | 1 | PL |
| | Theories of chronic pain | 1 | PL |
| | Assessment and management of chronic pain | 1 | PS |

| | Content | Class* | Method** |
|----|---|--------|----------------------------------|
| 7 | Diabetes | | |
| | Symptoms, types and causes of Diabetes | 1 | PL |
| | Psychological management of diabetes | 1 | PL |
| 8 | Problems of Eating and weight | | |
| | Classification of eating disorder | 1 | PL |
| | Assessment and management of eating disorder | 1 | PL/PS |
| 9 | STD and HIV/AIDS | | |
| | Symptoms, assessment and management of STD and HIV AIDS | 6 | Training by Guest Lecturer |
| 10 | Psychosocial aspects of disaster management | | |
| | Types of disaster and its impact | 1 | PL |
| | Phases of disaster | 1 | PL |
| | Assessment strategies | 1 | PL |
| | Crisis intervention | 1 | PL |
| | Prevention and management strategies | 1 | PL |
| 11 | Psychology of Pandemic | 2 | PL. PS |
| | Understanding | | |
| | Management | | |
| | Coping | | |
| 12 | How to integrate psychology into health services | 1 | PL |
| | Total | 42 | |

Note: *Per class 90 minutes; **PS= Presentation by students, ** PL= Participatory lecture

Suggested readings

- Baum, A. Newman, S. Weinman, J. West, R & McManus, C. (1997). Cambridge Handbook of Psychology, Health & Medicine. Cambridge
- Broome, A (ed) (1989). Health Psychology: Process and Applications. London: Chapman
- Davis, M., Eshelman, E. R and Mckay, M. (2019). The Relaxation and Stress Reduction Workbook. New harbinger Publications, Inc.
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- Fontana, D. (1989). Managing Stress. The British Psychological Society and Routledge Ltd.
- Lindsay, S. & Powell, G. (eds.), (2007). The Handbook of Clinical Adult Psychology. Third Edition. London: Routledge.
- Molzman, A. D & Turk, D. C (eds.) (1986). Pain Management: A Handbook of Psychological Approaches. New York: Pergammon
- Pearce, S & Wardle, J (eds.) (1989). The Practice of Behavioural Medicine. Oxford: Oxford University Press.
- Sarafino, E. P., & Smith, T. W. (2017). Health Psychology: Biopsychosocial Interactions. New York: John Wiley & Sons, INC.
- Taylor, Shelley E (2012). Health psychology. Eighth edition. McGraw-Hill.

CPSY 505: Clinical Research Methods and Advanced Statistics

(Theory: 4 Credit, 100 Marks)

Course Objectives

This course aims to upgrade knowledge on clinical research and to make students skilled on research process- groundwork, measurement, design, analysis, interpretation and dissemination.

Specific Objectives

This course aims to help the students learn

- 1. Philosophical and Scientific aspects of research.
- 2. Qualitative and quantitative measures and their uses.
- 3. Classification of research designs: experimental and non-experimental.
- 4. Specific research designs for clinical psychology.
- 5. Concepts associated with designing, conducting and analysing data in qualitative and quantitative research.
- 6. Scientific write up and dissemination of research work.
- 7. General and specific ethical aspects of health and mental health research.

Instructional Strategies

Theoretical Lecture (40)

Group Discussion/ Debate / Problem solving (infused into the lecture classes)

Assignment,

Practical training on computerized data analysis: 2 days (14 Hours)

Assessment Methods

Class Attendance - 5 marks

Mid-term examination- 35 marks (Averaged marks obtained from 2 examinations)

Final Examination - 60 marks (examination after completion of teaching period)

Assignment (non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. Comprehend the philosophical paradigms that guide research activities.
- 2. Appreciate availability of different types of research designs and their utilities in conducting research in clinical psychology.
- 3. Comprehend the logic behind different types of research design.
- 4. Select appropriate design for their intended research.
- 5. Conduct qualitative and/or quantitative research that is methodologically sound.
- 6. Appreciate the use of different approaches of measurement and their use in clinical research.
- 7. Develop valid and reliable measurement instrument for research.
- 8. Use different statistical procedures for their research.
- 9. Carry out computerized analysis of their research data.
- 10. Write research proposal.
- 11. Write comprehensive research reports.
- 12. Comprehend and appreciate core ethical principles and take measures to adequately address those in clinical research.

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Theoretical perspective of Research in Clinical Psychology | | |
| | Research, research cycle and research process | 4 | PL |
| | Philosophical aspect of research: Empiricism, rationalism, inductivism, deductivism, ontology, epistemology, methodology | | |
| | Foundation of qualitative methods | 2 | PL |
| | Phenomenological approach | 2 | |
| | Social constructionist approach Foundation of quantitative methods | 1 | PL |
| 2 | Groundwork for research | 2 | PL |
| | Research question, topics and literature review Defining and controlling variables | | |

| | Content | Class* | Method** |
|---|---|--------|------------|
| | Practical issues in research (time, resource, funding,) | | |
| 4 | Research Design | 3 | PBL |
| | Non-experimental designs | | |
| | Descriptive designs | | |
| | Correlational designs | | |
| | Experimental designs | | |
| | Nonrandomized/quasi-experimental designs (pretest-posttest, nonequivalent control group, time series) | | |
| | Randomized designs (group design, block design, factorial design) | | |
| 4 | Sampling | 1 | Quiz/Tasks |
| | Sampling in quantitative research | | |
| | Sampling in qualitative research | | |
| 5 | Classifying research | | |
| | Outcome research | 2 | PL |
| | Small –N research | 3 | PL |
| | Epidemiology and survey research | 3 | PL |
| | Research in service planning and evaluation | 3 | AS |
| | Patient series research | 2 | PL |
| 6 | Measurement in Clinical Research | | |
| | General aspects of measurement | 2 | PL |
| | Theories of measurement | | |
| | Classical test theory | | |
| | Generalizability theory | | |
| | Item response theory | | |
| | Types of Measure | 1 | PL |
| | Methods of Self-Report measurement | | |

| Content | Class* | Method** |
|--|--------|------------|
| Methods of Observational measurement | | |
| Methods of Physiological measurement | | |
| Construction of a measures | 4 | PL |
| Process of developing psychometric tools | | |
| Factor analysis | | |
| Psychometric properties of measure | | |
| Norms Development | | |
| Adaptation of measures | | |
| 7 Analysis, Interpretation and Dissemination | | |
| Quantitative Data Analysis | 4 | PL |
| Conceptual and analytical understanding | | |
| Scales of measurement | | |
| Foundation of hypothesis testing | | |
| Descriptive statistics | | |
| Non-parametric tests | | |
| Chi-Square test Parametric tests: | | |
| t-test | | |
| F-test | | |
| Correlation | | |
| Regression | | |
| Qualitative Data Analysis | 1 | PL |
| Discourse analysis | | |
| 8 Use of software in Clinical Psychological research | 10 | Training(2 |
| Qualitative data analysis (NVivo) | | Days) |
| Quantitative data analysis (SPSS) | | |
| Others supportive software (End Note, G*Power) | | |
| 9 Ethical issues in clinical psychology Research | 1 | |
| 10 Writing a research proposal and research report | 2 | |

| Content | | Class* | Method** |
|---------|-------|--------|----------|
| | Total | 51 | |

Note: *Per class 90 minutes; **PBL= Problem based learning, **PL= Participatory lecture

Suggested readings

- American Psychological Association. (2012). APA style guide to electronic references.
- American Psychological Association. (2009). Publication manual of the American psychological association. Sixth edition. American Psychological Association (APA).
- Auerbach, C. F. & Silverstein, L. B. (2003. Qualitative Data an Introduction to Coding and Analysis. New York University Press.
- Barker, C., Pistrang, N., & Elliott, R. (2002). Research methods in clinical psychology: an introduction for students and practitioners. New York: John Willey & Sons.
- Barlow, D. H & Hersen, M (eds.) (1984). Single-case Experimental Designs: Strategies for Studying Behaviour Change. New York: Pergammon.
- Charmaz, K. (2006). Constructing Grounded Theory. A Practical Guide through Qualitative Analysis. Sage Publication.
- Collican, H. (2006) Research Methods and Statistics in Psychology, 2nd edition. Hodder and Stoughton.
- Cook, T. D. & Campbell D. T. (1979) Quasi Experimental Design and Analysis Issues for Field Setting. Boston: Houghton Miffin Company.
- Corbin, J. M. , & Strauss, A. L. (2008). Basics of qualitative research: Techniques and procedures for developing grounded theory (3rd ed.). Los Angeles: Sage.
- Craig, J. R., & Metz, L. P. (1986) Methods of Psychological Research. Monferey, California: Brooks/Cole Publishing Company.
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- Hays, W. L. (1977). statistics for the Social Science. New York: Holt Reinhart and Winston. Inc.
- Higgins, R. (1996). Approaches to Research: A Handbook for those writing a thesis. London: Jesica Kingsley Publishers.
- Krippendorff, K. (2004), Content Analysis an introduction to its methodology, 2nd Edition. Sage Publication.

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- Miles, J. & Shevlin, M. (2001). Applying Regression & Correlation. Sage Publication, London
- Pallant, J. (2013), SPSS Survival Manual, A. Step by step guide to data analysis using IBM SPSS, 5th edition, Allen & UNWIN. London
- Parry, G., & Watts, F. N. (1996). Behavioural and Mental health Research: A Handbook of Skills and Methods. Earlbaum, UK: Taylor & Francis.
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- Shaughnessy, J. J., Zechmeister, E. B., Zechmeister, J. S. (2000). Research Methods in Clinical Psychology. New York.
- Suffian, A. J. M., (1998). Methods and Techniques of social Research. Dhaka: University Press Limited.
- Tabachnick, B. G., &Fidell, L. S. (1989). Using Multivariate statistics. New York: Harper & Row Publications.

CPSY 506: Models of Therapy

(Theory: 4 Credit, 100 Marks)

Course Objectives

This course aims to help the students to conceptualize the development of psychopathology from different theoretical perspectives and to understand the treatment principles specific to different theories. This course also helps students to learn to relate theories into different techniques of specific models of therapy.

Specific Objectives

This course aims to help the students learn

- 1. Theoretical perspectives relevant to maladaptive behaviour, its causation and process of recovery from it.
- 2. To understand how specific models of therapy are organized under broader theoretical approaches.
- 3. The way specific constructs are translated and used in different theoretical models of intervention.
- 4. How techniques are derived from theoretical models and constructs.
- 5. Specific knowledge and skills from psychological perspectives- (psychodynamic, behaviour, cognitive).
- 6. Specific knowledge and skills from humanistic perspective.
- 7. Specific knowledge and skills from biological perspectives-genomic, endophenotypic and brain perspectives of psychopathology.
- 8. Specific knowledge and skills from social perspective.
- 9. Ways to incorporate theoretical knowledge into practice.

Instructional Strategies

Theoretical Lecture (60 hours)

Each theory will be presented with relevant psychopathology best explained by the theory along with assessment, formulation and treatment strategies. Course teacher will present initially. After that students will observe, assess and deal those types of case and they will offer presentation based on their learning.

Group Discussion/ Debate / Problem solving (infused into the lecture classes)

Assignment,

Practical training on different models of therapy: 7 days (50 Hours)

Assessment Methods

Class Attendance - 5 marks

Mid-term examination- 35 marks (Averaged marks obtained from 2 examinations)

Final Examination - 60 marks (examination after completion of teaching period)

Assignment and case study report following different models (no marks will be distributed here since same activity will be evaluated in practical course)

Learning Outcomes

After completing this course, the students will be able to

- 1. Appreciate the importance of understanding different theoretical perspectives relevant to maladaptive behaviour, its causation and process of recovery from it.
- 2. Identify the process of organization of specific models of therapy under broader theoretical approaches.
- 3. Recognize the translation process and application of specific constructs into different theoretical models of intervention.
- 4. Identify the derivation process of intervention techniques from theoretical models and constructs.
- 5. Describe, identify and critically evaluate the different psychopathology, its development and management from biological perspective.
- 6. Summarize, select and critically evaluate different psychopathology, its development and management from psychoanalytic perspective.
- 7. Analyse, identify and critically evaluate different psychopathology, its development and management from cognitive and behavioural perspective.
- 8. Describe, select and critically evaluate different psychopathology, its development and management from humanistic perspective.
- 9. Implement different therapy with individual, family and couple.

Course Content and Class Distribution

| Content | Class* | Method** |
|---------|--------|----------|
| | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| 1 | Introduction to the therapeutic approaches | 1 | PL |
| | Historical overview | | |
| | Major schools of therapy | | |
| 2 | Biologically Based | 1 | PL |
| 3 | Psychodynamic Therapy | 2 | PL |
| 4 | Behavioural Approaches | | |
| | Postulates of behaviour therapy | 1 | PL |
| | Classical and operant conditioning strategies | 2 | PL |
| | Other techniques of behaviour therapy | 2 | PL |
| | Evaluation of behaviour therapy | 1 | PL |
| 5 | Cognitive Approaches to Therapy | | |
| | Cognitive Therapy | 2 | PL |
| | Rational –Emotive Behaviour Therapy | 2 | PL |
| | Stress inoculation Therapy | 1 | PL |
| | Personal Construct Therapy | 2 | PL |
| | Social Cognitive Therapy | 2 | PL |
| 6 | Cognitive-Behavioural Therapy | | |
| | Basic characteristics and techniques of CBT | 2 | PL |
| | Evaluation of cognitive-behaviour therapy | 1 | PL |
| 7 | Proliferation of CBT based Therapies | | |
| | Dialectical Behaviour therapy | 2 | PL |
| | Acceptance and Commitment Therapy | 2 | PL |
| 8 | Humanistic – experiential Theory and Therapy | | |
| | Person- Cantered Therapy | 3 | PL |
| | Existential Therapy | 2 | PL |
| | Gestalt Therapy | 2 | PL |

| | Content | | Class* | Method** |
|----|--|-------|--------|----------|
| 9 | Systemic approaches to therapy | | 2 | PL |
| 10 | Other approaches to therapy | | 4 | PL |
| | Transactional Analysis | | | |
| | Medistic therapy | | | |
| | Psychodrama | | | |
| | EMDR | | | |
| 11 | Integrating different approaches to therapy | | 2 | PL |
| | Integrative approaches | | | |
| | Eclectic approach | | | |
| | Multimodal therapy | | | |
| 12 | Modalities of therapeutic interventions | | | |
| | Individual Therapy | | 1 | PL |
| | Group Therapy | | 1 | PL |
| | Couple Therapy | | 1 | PL |
| | Family Therapy | | 1 | PL/PS |
| 13 | Overall approaches to Therapeutic intervention | | 1 | PL |
| | Skill focused approach | | | |
| | Resource focused approach | | | |
| | | Total | 45 | |

Note: *Per class 90 minutes; **PL= Participatory lecture, **PS= Presentation by students

Suggested readings

Ahmed,M. U. (1984). Learn to Hypnotize & Cure: Oriental Methods. Bangladesh: Psyche Prokashani.

Ahmed, M. U. (1986). Psychology Helps You Develop Strong Personality. Bangladesh: Psyche Prokashani.

Brammer, H. M. ,Shostrom, E. L &Abrego, P. J. (1989). Therapeutic Psychology: Fundamentals of Counselling and Psychotherapy. Englewood Cliffs, NJ: Prentice Hall.

- Burnham, J. B. (2002). Family therapy: first steps towards a systemic approach. Routledge.
- Carr, A. &Mcnulty, M. (2006). The Handbook of Adult Clinical Psychology: An Evidence based Practice Approach. London: Routledge.
- Carson, R. C., Butcher, J. N., Mineka, S., & Hooley, J. M. (2007). Abnormal Psychology (13th ed.). India: Pearson Education, Inc.
- Crowe, M. J. & Ridley, J. (1990). Therapy with Couples. Oxford: Blackwell.
- Gurman, A. &Kniskern, D (eds.) (1991). Handbook of Family Therapy. Vol. 1 & 2. New York: Brunner Mazel.
- Jacobson, N. & Gurman, A. (1986). Clinical Handbook of Marital therapy. New York: Guilford Jacobson N. S. S. & Gurman, A. S., (2002). Clinical Handbook of Couple therapy. New York: Guilford.
- Kaplan, H. I. & Sadock, B. J. (1996). Concise Textbook of Clinical Psychiatry, 7th edition.
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CPSY 507 Clinical Internship

Practical: 8 Credit, 200 Marks

Course objectives

This practical course aims to equip the students in therapeutic skills needed for assessing and treating mental health problems. They will get in-depth exposure in dealing with a variety of client population. It will also give them opportunity to learn professional communication, conduct and collaboration through working in a multidisciplinary team.

This is a special course intended for development of core technical and professional skills therefore the requirement and assessment are different from other courses.

Specific objectives:

This course aims to help students learn

- 1. general presentation of mental health problems in the hospital settings
- 2. different roles of clinical psychologists
- 3. to link theoretical knowledge with practical application
- 4. to use different models of assessment and acquire the skills of assessment,
- 5. to be able to devise appropriate formulation of client's problem utilizing data from assessment,
- 6. to plan intervention/treatment according to the problem formulation and goals,
- 7. to deliver intervention in an individually tailored manner,
- 8. to evaluate outcome of intervention/treatment
- 9. integrate different skills required to work with individuals with mental health problems
- 10. to communicate and collaborate with multidisciplinary professionals in ensuring service delivery for individuals with mental health problems
- 11. to appreciate need for clinical supervision and use supervision effectively

Instructional Strategies

Clinical skills training

Placement at mental health (psychiatry and clinical psychology) service setup

Handling cases with mental health problems

Individual clinical supervision from designated professionals

Group clinical supervision from designated professionals

Case presentation and discussion

Assignment on clinical topic and tasks

Assessment Methods

Case report – 40 marks

Log of individual clients – 15 marks

Treatment record – 30 marks

Supervision record log – 30 marks

Log of other clinical activities – 10 marks

Practical viva – 50 marks

Attendance to clinical meetings – 10 marks

Attendance at placement- 10

Timely submission of reports – 5 marks

Placement report - Mandatory requirement (Non-credit)

Completion of placement – Mandatory requirement (Non-credit)

Completion of two case presentations at the department - Mandatory requirement (Non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. distinguish between different presentations of mental health problems
- 2. integrate theory and practice of working with individuals with mental health problems
- 3. assess, formulate, plan and deliver intervention, and evaluate progress and outcome from intervention

- 4. comprehend the interaction and importance of biological, psychological and social model in working with cases
- 5. form therapeutic alliance with client and relevant other stakeholders as needed to implementing interventions
- 6. communicate and collaboration with professionals from different disciplinary background regarding their cases
- 7. identify areas of improvements in clinical and professional skills and appreciate need for further development
- 8. appreciate the need for clinical supervision and use supervision skilfully in working with cases
- 9. write case report
- 10. present cases comprehensively and hold an interactive discussion.
- 11. demonstrate comprehensive understanding of ethical aspects and challenges in clinical work
- 12. practice in an ethically sound and professional manner.

Outline of the Course Activities

1. General Adult Mental Health Placement

Minimum of 800 hours internship in approved placements. The list of approved placement includes,

- Bangabandhu Sheikh Mujib Medical University (BSMMU)
- National Institute of Mental Health (NIMH)
- Dhaka Medical College Hospital (DMCH)
- Dhaka Community Hospital (DCH)
- Other BMDC approved clinical placements (should also be approved by the Department of Clinical Psychology and Bangladesh Clinical Psychology Society)

The full age range must be seen from 18 to over 65 years.

At least one case should be seen in each of the following categories (which are not mutually exclusive):

- Obsessional disorder
- Depression

- Fear or generalized anxiety
- Schizophrenia
- Acute psychotic state
- Substance misuse
- Senile dementia
- Long term, chronic disorder
- A problem requiring long term institutional care
- A health problem (e. g. pain, blood pressure, sleep)

The following techniques should have been used:

- Assessment interviews
- Psychometric assessment
- Behavioural approach
- Cognitive-behavioural approach
- Cognitive therapy approach
- One other psychotherapeutic approach (e. g. rational emotive therapy, personal construct therapy, person-centred therapy, psychodrama, systemic and family therapy)

Other Requirements

- Satisfactory case load
- Careful record keeping (clinical record, supervision record)
- Professional behaviour/conduct
- Satisfactory placement report

Complete records of clinical activities must be submitted according to the prescribed formats (see Appendix 1 & Appendix 2)

2. Clinical Supervision

Throughout the MS studies each student will be assigned to a clinical supervisor by the Dept. of Clinical Psychology to guide him/her in regular clinical work in the placements. All works carried out at the placement must be supervised by the clinical supervisor designated by the department. Two forms of supervision are offered by the department which are as follows

Individual supervision:

One to one discussion on clinical work carried out by the student. Such discussion will include reporting of works carried out, discussing difficulties and solutions, deciding next plan of action, finding out scope for improvement, and any other professional issues that warrant a discussion.

Group supervision:

Discussion on clinical work carried out by the students in a group of peers led by the designated group supervisor. The focus of discussion may include, overview of clinical work, professional issues, general therapeutic principles and strategies, common difficulties, group development and other pertinent issues raised by the students

Complete records of clinical supervision must be submitted according to the prescribed format (see Appendix 3)

3. Case Presentation

Students will present at least two (02) clinical cases through which they will demonstrate

- Skill of case presentation
- Conceptualization of case by thinking theory and practice
- Ability to apply skills of assessment, formulation, treatment planning, intervention delivery and outcome evaluation
- Awareness and understanding of relevant clinical and professional issues
- Ability to respond properly to the methodological and professional issues in applied settings.
- Ability to receive support from professional colleagues

Students shall regularly attend clinical meetings at the department to master the skills of case presentation by giving presentations themselves and observing others doing so.

4. Case Report

Three case reports must be submitted following the prescribed guideline (see Appendix 7)

5. Practical viva

Student's clinical understanding and capacity to conduct clinical interview and formulation will be assessed though a viva-voce on clinical skills and relevant professional aspects. The viva will be conducted by a panel of three independent experts designated by the department.

CPSY 508 Practice in Psychometrics

Practical: 2 Credit, 50 Marks

Course Objectives

As a requirement for the MS in Clinical Psychology, each student will have to acquire and demonstrate comprehensive psychometric assessment skills on different psychological issues including diagnosable psychological disorders (e. g. , anxiety, depression, obsessions and compulsions, social skill deficit, and stress related disorders), associated problems (e. g. , risk of suicide, and marital adjustment), psychological abilities and aptitudes (e. g. , memory, and intelligence) personality and other psychological aspects relevant to mental health and wellbeing.

Specific Objectives

This course aims to help students learn

- 1. an understanding of various purposes of clinical assessment
- 2. knowledge on the use different models of assessment
- 3. ability to integrate data from different assessment method
- 4. the skills of conducting clinical assessment,
- 5. the skills of preparing assessment report
- 6. understanding the impact of clinical assessment
- 7. to appreciate need for clinical supervision and use supervision effectively

Instructional Strategies

Clinical skills training

Roleplay on assessment techniques

Assignment on clinical assessment

Supervision on clinical assessment

Placement at mental health (psychiatry and clinical psychology) service setup

Assessment Method

A student has to prepare and submit a minimum of three complete assessment reports. One of these should be a comprehensive (multi-modal) clinical assessment report of a single client. (it should incorporate findings from mental state examination (MSE or MMSE), clinical interview, standardized test and any other assessment techniques). The

other two should be assessment report of two psychometric instrument including one on intelligence or on personality.

- A comprehensive (multi-modal) clinical assessment report of a single 30 marks client. (it should incorporate findings from mental state examination (MSE or MMSE), clinical interview, standardized test and any other assessment techniques)
- 2 Two assessment reports of administering any psychometric scale. (one 20 marks should be a personality or intelligence test)

Assessment reports must be submitted in consultation with the course teacher.

Learning Outcomes

After completing this course, the students will be able to

- 1. appreciate the need for different assessment methods
- 2. choose the most suitable method(s) of assessment for the problem(s) at hand
- 3. use different basement techniques
- 4. integrate data from multiple assessment method to arrive at a comprehensive understanding of the client and his or her presenting problems as well as strengths
- 5. prepare assessment report for communicating among team members and other stakeholders
- 6. utilize assessment data in case formulation as well as planning and evaluating intervention

Outline of the Course activities

- 1. Training on assessment techniques, Report writing,
- 2. Training on ethical aspects of assessment and report preparation
- 3. Assignments on conduction of clinical assessment
- 4. Assignments on writing clinical assessment report

CPSY 509 Seminar

Practical: 2 Credit, 50 Marks

This is an evaluation course with no specific teaching assigned to it. As a requirement for the MS in Clinical Psychology, each student will have to demonstrate his/her comprehensive theoretical knowledge and ability of linking theory into clinical practice through a seminar on a clinical case. A student has to prepare a presentation on a clinical case dealt by him in consultation with his/her clinical supervisor.

The seminar examination committee will ask the student to present the case before an assorted audience. The presented case should be selected from the three case reports submitted as part of clinical requirements (see Appendix 7). The seminar examination committee may review the specific care report as an aid to evaluate the quality of presentation.

Assessment Method

A student will be judged on the basis of his/her –

- i. presentation quality
- ii. conceptual clarity and
- iii. quality of response to the questions raised by audiences.

CPSY 510 Thesis

6 Credit, 150 Marks

Course Objectives

As a requirement for the MS in Clinical Psychology, each student will have to conduct a research in his or her chosen area to link the theoretical aspects of research in the practical field. Throughout the MS studies each student will be assigned to a faculty member of the Dept. of Clinical Psychology to act as his/her research supervisor.

A student has to prepare a thesis in consultation with his/her research supervisor and submit it to the Department. Thesis should be prepared and submitted according to the guideline prescribed by the department (see Appendix 10).

Specific Objectives

This course aims to help students learn

- 1. understanding the need for applied research
- 2. ability to draft research question
- 3. ability to select suitable research method in line with research questions and objective
- 4. skills in planning research activities
- 5. ability appreciate and utilize available resources required for conduction or research
- 6. ability write thesis following existing academic standards
- 7. ability to present and defend their own research
- 8. comprehensive understanding of research process

Instructional strategies

- 1. Research skills training
- 2. Research supervision
- 3. Assignment by supervisor

Assessment Method

1 Thesis presentation 50 marks

2 Thesis examination 100 marks

Evaluation Strategy

Presentation.

In thesis presentation, the student will be judged on the basis of his/her -

- i. Conceptualization of basic principles of research
- ii. Adequate analysis and display of data
- iii. Quality of presentation
- iv. scientific merit of the work carried out by the students
- v. Appropriateness and accuracy of response to questions from the audience

Thesis.

Evaluation of the thesis will be done according to the existing rules of the university with two externals examiners. The external examiners may include the researchers from other universities, research institutions, or from the University of Dhaka however will be outside of the department.

Additional mandatory requirements

- 1. Proposal submission
- 2. Ethical approval of the research
- 3. Submission of draft thesis
- 4. Submission of supervision record

Learning outcomes

After completing this course, the students will be able to

- 1. demonstrate comprehensive understanding of research process
- 2. demonstrate competency to plan and conduct research
- 3. move towards independence in planning and conducting research
- 4. appreciate ethical aspects associated with research
- 5. demonstrate academic writing skills
- 6. write research reports and thesis

Outline of the Course activities

Proposal writing and submission; Attend trainings on research skills; Discussion with supervisor; Completion and submission relevant assignment by student as and when decided by the supervisor.

CPSY 511 Viva-voce

2 Credit, 50 Marks

This is an evaluation course with no specific teaching assigned to it. Viva-voce will be carried out to assess acquisition of learning from the theory courses. The students will face an interview board comprised of the designated examination committee for the specific session.

CPSY 512 Professional issues

Theory: Non-Credit

Course Objectives

This non-credit course is aimed at personalized professional development of the students. They will gain a broader understanding of the professional issues relevant to mental health profession as a whole and specific to clinical psychology discipline. Content of this course may focus primarily on issues relevant to Bangladesh context however these will be discussed with a global perspective.

Specific Objectives

This course aims to help students learn

- 1. understanding of the route to become professional clinical psychologist
- 2. understanding of their role in health system and mental health service delivery
- 3. knowledge on ethical aspects in professional practice as clinical psychologist
- 4. understanding of the ways to ensure professional growth

Learning Outcomes

After completing this course, the students will be able to

- 1. appreciate the need for understanding and adherence to the professional standards
- 2. appreciate their role in health system and mental health service delivery
- 3. identify professional issues that require special attention for effective practice and professional growth
- 4. appreciate the need for self-care
- 5. communicate effectively in multidisciplinary team
- 6. practice in an ethical manner
- 7. comprehend need for the continuing professional development

Course Content and Class Distribution

| | Course content | Class* | Method** |
|---|---|--------|----------|
| 1 | Mental Health services in Bangladesh | 4 | DS |
| 2 | The profession of Clinical Psychology | 6 | DS |
| 3 | Personal and professional practice | | |
| | Personal and interpersonal presentation | 2 | DS |
| | Case load management: Administration, record keeping, workload management, seeking advice, referral | | |
| | Broad spectrum basic skills: Assessment, formulation, intervention, team work, teaching, consultant role, research and evaluation | 3 | DS |
| | Professional skills: Chairing committees, leadership, negotiation, resource management, budgeting | 3 | DS |
| | Personal development: Self-motivation, stress, burnout, self-appraisal and career planning, clinical supervisor, further training | | |
| 4 | Ethical issues | 4 | DS |
| | Code of conduct | | |

| | Course content | | Class* | Method** |
|---|--|-------|--------|------------------------|
| | Relevant legislation | | | |
| 5 | Service issues | | 3 | DS |
| | Equity of access | | | |
| | Quality assurance | | | |
| | Information systems and record keeping | | | |
| | Cost effectiveness | | | |
| | Future development | | | |
| 6 | Career development plan | | 4 | Disclosure, DS & AS |
| | | Total | 29 | |

Note: *Per class 90 minutes; **DS= Discussion, **AS= Assignment

List reading materials for this course will be supplied in the class.

CPSY 513 Contemporary Approaches to Psychotherapy

Theory: Non-Credit

In this course the student will receive exposure on contemporary psychotherapy approaches (such as Dialectical Behaviour Therapy, Psychodrama, Systemic approaches, Transactional Analysis, Psychoanalysis, Eye Movement Desensitization and Reprocessing) in the form of lecture, advanced workshop, study group, practical training and observation.

CPSY 514 Introduction to Child and Adolescent Mental Health

Theory & Practical: Non-Credit

Course Objectives

This non-credit course is aimed at orienting and training the students on practical skills and knowledge relevant to work with mental health aspects of child and adolescents.

Specific Objectives

This course aims to help students learn

- 1. Different theoretical perspective on child development
- 2. Different manifestation of common mental health problems in child and adolescent
- 3. Assessment and case conceptualization in child and adolescent mental health problems
- 4. Approaches to manage mental health problems in child and adolescent
- 5. Translating learning from adult mental health practice into working with child and adolescent

Instructional strategies

- 1. Skills training
- 2. Assignment
- 3. Supervision

Learning Outcomes

After completing this course, the students will be able to

- 1. Describe different theoretical perspective of child development and their implication in child and adolescent mental health practice
- 2. Recognize different manifestation of common mental health problems in child and adolescent
- 3. Assess and describe cases with child and adolescent mental health problems
- 4. Selecting suitable approaches to manage mental health problems in child and adolescent
- 5. Appreciate the need for referral and make necessary referral for child and adolescent cases
- 6. Translating learning from adult mental health practice into working with child and adolescent

Course Content and Class Distribution

| | Course content | Class* | Method** |
|---|--|--------|----------|
| 1 | Theories Child Development | 3 | PL, PS |
| 2 | Common presentation of child and adolescent mental health problems | 2 | PL |
| 3 | Assessment History taking Clinical Interview | 5 | TL, AS |
| | Psychometric assessment | | |
| 4 | Case conceptualization | 2 | PL, AS |
| 5 | Intervention approaches CBT and other psychological intervention Applied Behaviour Analysis Engaging family and other stakeholders | 6 | PL, AS |
| 6 | Service mapping and referral | 2 | TL, AS |
| | Total | 20 | |

Note: *Per class 90 minutes; **PL=Participatory lecture,** PS= Presentation by students, **TL=Theoretical lecture, **AS= Assignment

Syllabus for MPhil in Clinical Psychology

University of Dhaka

| Yea | Year – I | | | | | |
|-----|-----------------|--|-------|-------|--|--|
| | Paper | Course Title | | Marks | | |
| 1 | CPSY 601 | A. Child and Adolescent Mental Health Problems | | 100 | | |
| | | B. Advanced Clinical Health Psychology | | | | |
| 2 | CPSY 602 | A. Issues related to Practice in Clinical Psychology | | 100 | | |
| | | B. Advanced Research Methods | | | | |
| 3 | Viva Voce | | | 100 | | |
| | | | Total | 300 | | |

Year - II

1. CPSY 603 Clinical Psychology in Wider Context (Non-credit)

2. Specialist Placement

The student must choose an area of specialization and complete necessary training and placement on that specific area. At the end of the placement, the student has to submit a specialist placement report.

3. Thesis

The student must carry out a research and submit a thesis based on the research as part of requirement (see Appendix 10).

Admission requirement for MPhil in Clinical Psychology Program

- 1. MS in Clinical Psychology.
- 2. At least 6 months of post MS supervised internship/clinical placement work with clear demonstration of professional sense of responsibility, sincerity and genuineness. Case log signed by supervisor should be submitted.
- 3. Experience of successfully moderating group therapeutic intervention of the following categories.
 - a. General group therapy (for at least 3 months)

- b. Social skills training (a complete training program)
- c. Any one of the short length homogenous group therapy (relaxation, psychoeducation, etc.)
- 4. Availability and acceptance of thesis supervisor on the specific research topic.

Year I

CPSY 601 A. Child and Adolescent Mental Health Problems

Theory: 50 Marks

Course Objective

This course aims to teach the students on child and adolescents mental health issues, role of clinical psychologists in understanding, assessing and managing those issues applying psychological theories and principles.

Specific Objective

This course aims to help the students learn

- 1. Child development from bio-psycho-social approach.
- 2. Approaches to understand life span development from different theoretical perspective.
- 3. Manifestation and management of childhood neurological and developmental problems such as autism, low intelligence, learning disability and related disorders.
- 4. Assessment and management of specific learning difficulties
- Manifestation and management of behavioural problems such as conduct, ADHD,
 ODD and related disorders among children and adolescents
- 6. Manifestation and management of emotional problems such as anxiety, depression, OCD and related disorders among children and adolescents
- 7. Factors in child abuses (emotional, physical and sexual), impact of abuses on children's mental health and development, and ways to intervene.
- 8. In-depth assessment and management strategies for treating different kinds of child mental health problems and disorders.
- 9. Variations and disorders of sexual preference and practices.
- 10. Assessment and management of substance related disorders and their impacts.
- 11. Assess and intervene family and interpersonal problems, couple problems and other relational problems.
- 12. Perspectives and procedures of psychosocial rehabilitation and its applicability in Bangladesh context.

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assessment Methods

Assignment (1-2)

Final Examination - 60 marks (examination after completion of teaching period)

Learning outcomes

After completing this course, the students will be able to

- 1. Describe child development from bio-psycho-social approach.
- 2. Describe approaches to understand life span development from different theoretical perspective.
- 3. Implement theoretical knowledge of child psychology in understanding children's emotion, behaviour and performance.
- 4. Assess children's emotional, behavioural, trauma related abuse and other mental health problems
- 5. Manage children's emotional, behavioural, trauma related abuse and other mental health problems
- 6. Identify the manifestation and management of childhood neurological and developmental problems such as autism, low intelligence, learning disability and related disorders.
- 7. Assessment and management of specific learning difficulties
- 8. Assess and manage the behavioural problems such as conduct, ADHD, ODD and related disorders among children and adolescents
- 9. Assess and manage the emotional problems such as anxiety, depression, OCD and related disorders among children and adolescents
- 10. Identify the factors in child abuses (emotional, physical and sexual), impact of abuses on children's mental health and development, and ways to intervene.
- 11. Conduct in-depth assessment and management for treating different kinds of child mental health problems and disorders.
- 12. Describe the variations and disorders of sexual preference and practices.
- 13. Assess and manage the substance related disorders and their impacts.

- 14. Assess and intervene family and interpersonal problems, couple problems and other relational problems.
- 15. Describe perspectives and procedures of psychosocial rehabilitation and its applicability in Bangladesh context.
- 16. Integrate the role of clinical child psychologists in determining the impact of children's mental health problems in the family, school and community and explore the strengths to minimize those adverse effects.
- 17. Educate parents, teachers and the community members about how to improve healthy development for the children.
- 18. Assess the psychosocial aspects of interpersonal violence and design appropriate services.
- 19. Take role in establishing child rights as part of preventive approaches to reduce mental health problems among children.

Course Content and class distribution

| | Course content | Class* | Method** |
|---|-------------------|--------|----------|
| 1 | Child Development | 3 | PL |

Review of normal development

Meaning of development

Stages in the life span

Developmental milestones and tasks

Theories of child development

Bowlby

Freud

Erikson

Piaget

Lev Vygotsky's socio-cultural theory

and other contemporary theories

Problems of normal development

Developmental delay

Language problems

| Course content | Class* | Method** |
|--|--------|----------|
| Socialization problems | | |
| Sleeping and eating problems | | |
| Elimination and temper problems | | |
| 2 Children with Low Intelligence | 3 | PL |
| Definition of children with Low Intelligence. | 3 | r L |
| Classification and characteristic of children with Low Intelligence. | | |
| Causes and prevention. | | |
| History of the treatment and services for the persons with low intelligence. | | |
| Management of children with low intelligence. | | |
| 3 Children with specific learning difficulties | 3 | PL |
| Historical overview of learning disabilities. | | |
| Definition, classification and characteristics of children with learning disability. | | |
| Causes of learning disability. | | |
| Identification and assessment of children with learning disability. | | |
| Major approach for teaching students with learning disability. | | |
| Application of treatment principles. | | |
| Special ethical and service issues. | | |
| 4 Child and adolescent problems and disorders | | |
| Autism | 3 | PL |
| Characteristic features, differential diagnosis aetiology and pathogenesis, assessment intervention, prognosis | | |
| Conduct disorders | 3 | PL |
| Defining features, prevalence and correlates, risk | | |

| Course content | Class* | Method** |
|--|--------|----------|
| mechanisms, assessment, treatment | | |
| Attention-Deficit Hyperactivity Disorder (ADHD) | 3 | PL |
| Diagnosis, prevalence, aetiology, assessment, management/treatment | | |
| Emotional disorders | 7 | PL |
| Fears, Habits, Bereavement, Divorce and parental separation | | |
| Childhood Depression | 2 | PL |
| Psycho physiological disorders | 2 | PL |
| Definition, types, prevalence, aetiology, treatment | | |
| Tics disorder | 1 | PL |
| Definition and classification, prevalence, clinical description, aetiology, assessment, treatment | | |
| Obsessive-compulsive disorder | 2 | PL |
| Definition and classification, aetiology, assessment, treatment | | |
| Self-injurious behaviour | 3 | PL |
| Eating disorders | 1 | PL |
| Anorexia and Bulimia Nervosa, Definition, clinical features, aetiology, assessment, treatment | | |
| Physical abuse | 9 | PL |
| Definition, prevalence, aetiology, signs and symptoms, effects, assessment, management, prevention | | |
| Emotional abuse and neglect | | |
| Definition, prevalence, aetiology, signs and symptoms, effects, assessment, management, prevention | | |

| | Course content | Class* | Method** |
|---|--|--------|----------|
| | Sexual abuse | | |
| | Definition, prevalence, aetiology, signs and symptoms, effects, assessment, management, prevention | | |
| 5 | Sexual variations | 2 | PL |
| | Conventional syndromes (e.g., DSM classification) | | |
| | Patients' concerns vs. syndromes | | |
| | Theories | | |
| | Assessment measures | | |
| | Treatment | | |
| | Modifying arousal patterns | | |
| | Overcoming social and relationship difficulties | | |
| | Management of gender identity | | |
| 6 | Substance-Related and Addictive Disorder | 3 | PL |
| | Application of assessment principles | | |
| | Application of treatment principles | | |
| | Special ethical and service issues | | |
| 7 | Interpersonal problems | 2 | PL |
| | Assessment structure: | | |
| | Long term social outcomes | | |
| | Short term social outcomes | | |
| | Social behaviour | | |
| | Social-cognitive skills and processes | | |
| | Methods of assessment | | |
| | Interviews | | |
| | Questionnaires | | |
| | Self-recording | | |
| | Information from others | | |

| | Course content | Class* | Method** |
|----|---|--------|----------|
| | Treatments | | |
| | Overt-behavioural social-skills training | | |
| | Training social-perception skills | | |
| | Social-problem-solving skills training | | |
| | Affect control: anxiety and anger reduction | | |
| | Interpersonal therapy (IPT) | | |
| 8 | Couple therapy | 3 | PL |
| | Theoretical aspects of couple therapy | | |
| | Assessment issues | | |
| | Presenting problems | | |
| | Attribution and distortions | | |
| | Affect in marriage | | |
| | Marital satisfaction | | |
| | Behavioural assessment | | |
| | Questionnaires | | |
| | Treatment issues | | |
| 9 | Family therapy | 2 | PL |
| | Behavioural, Systemic, Psycho-educational, Structural and strategic | | |
| 10 | Psychosocial rehabilitation | 1 | PL |
| | Total | 59 | |

Note: *Per class 90 minutes; **PL= Participatory lecture

CPSY 601 B. Advanced Clinical Health Psychology

Theory: 50 Marks

Course Objective

The students will gather knowledge on the ways clinical psychologists can contribute in medical settings by providing psychological services to medically ill and distressed people incorporating psychological principles in health management.

Specific Objectives

This course aims to help the students learn

- 1. Neuropsychology as a special area of clinical psychology practice and research.
- 2. Structure, function and physiology of brain and nervous system and how it influences human behaviour
- 3. About different types of neuropsychological problems including but not limited to brain injury, strokes and other brain related disorders
- 4. How to conduct neuropsychological assessment to understand the relation between brain and behaviour.
- 5. How to manage psychological problems due to brain injury or different neurological disorders.
- 6. In-depth study about the symptoms, assessment methods and management strategies of health anxiety, respiratory diseases, and other chronic health conditions.
- 7. Different approaches of coping and their implications in health and wellbeing
- 8. Psychological approaches to palliative care in Bangladesh
- 9. Relevant legislative and policy issues associated with health care system in Bangladesh
- 10. Strategies to improve overall health care services in Bangladesh by implementing the knowledge of health psychology.

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2)

Assessment Methods

Final Examination - 60 marks (examination after completion of teaching period)

Learning outcomes

After completing this course, the students will be able to

- 1. Describe the structure and functions of brain and nervous system and how it influences in producing behaviour.
- 2. Implement theoretical knowledge of neuropsychology in understanding symptoms related to neurological dysfunctions.
- 3. Assess brain related disorders, identify severity of problems and design appropriate treatment strategies.
- 4. Assess the psychosocial aspects of chronic health conditions and design appropriate services.
- 5. Assess and intervene health anxiety, respirational diseases, and other chronic conditions
- 6. Identify psychological approaches to palliative care in Bangladesh
- 7. Integrate the role of clinical health psychologists in determining the impact of chronic life-threatening diseases and provide psychological support to minimize those adverse effects.
- 8. Provide crisis intervention in response to natural or man-made disaster or victims of trauma.
- 9. Educate parents, teachers and community members about how to improve healthy lifestyle for the betterment of health.
- 10. Identify relevant legislative and policy issues associated with health care system in Bangladesh
- 11. Recognize the strategies to improve overall health care services in Bangladesh by implementing the knowledge of health psychology.

Course Content and class distribution

| | Course content | Class* | Method** |
|---|-----------------|--------|----------|
| 1 | Brain injury | 10 | PL |
| | Basic concepts: | | |

| | nespiratory disease | | r L |
|---|--|---|-----|
| 3 | Respiratory Disease | 2 | PL |
| | Dental anxiety | | |
| | Medical avoidance | | |
| | Blood-injury fear or phobia, fainting | | |
| | Illness phobia & Hypochondriasis | | |
| 2 | Health anxiety | 2 | PL |
| | Dysexecutive syndrome | | |
| | Emotional problems | | |
| | Behaviour problems | | |
| | Cognitive problems | | |
| | Motor problems | | |
| | Rehabilitation: | | |
| | Process of assessment (The notes, observations, interview, and psychometric tests) | | |
| | Emotion | | |
| | Intellect | | |
| | Memory | | |
| | Agnosia | | |
| | Language | | |
| | Movement | | |
| | Disorders of: | | |
| | Sub-cortical structures | | |
| | Frontal lobes | | |
| | Occipital lobes | | |
| | Parietal lobes | | |
| | Temporal lobes | | |
| | Major functional areas and the effect of lesions on: | | |
| | , Neurophysiology | | |
| | Neuroanatomy | | |

| | Definitions | | |
|---|---|---|----|
| | Asthma | | |
| | Chronic bronchitis | | |
| | Hyperventilation | | |
| | Treatment | | |
| | Asthma | | |
| | Bronchitis and emphysema | | |
| | Hyperventilation | | |
| 3 | Coping with illness | 2 | PL |
| | Theories of Coping | | |
| | Different types of coping | | |
| | Measurement of coping | | |
| | Determinants of coping (situational, individual differences, social support). | | |
| | Coping and health | | |
| | Coping skills training | | |
| 4 | Palliative Care | 2 | PL |
| | Investigation | | |
| | Assessment areas | | |
| | Treatment | | |
| | Management | | |
| 5 | Public health aspects | 2 | PL |
| | Communicable and Non-Communicable disease | | |
| | Role of psychologists in public health | | |
| | Integrating psychological knowledge in health policy | | |
| | | | |

Note: *Each class 90 minutes; **PL= Participatory lecture

CPSY 602 A. Issues Related to Practice in Clinical Psychology

Theory: 50 Marks

Course Objective

This course will orient students with different aspects related to professional practice in clinical psychology. With intensive training, placement activities, supervision, case presentation and report writing focused on child mental health problems, the students will achieve further enhancement of their clinical skills learned in the Year 1 (MS) of clinical psychology training program. This is a practical competency-based course with content continued to spread beyond Year-I of MPhil.

Specific Objectives

This course aims to help the students learn

- 1. Strategies for implementing clinical practice to wider perspective
- 2. Clinical Skills specifically relevant in dealing with child and adolescent mental health problems
- 3. Supervisory skills and to use supervision effectively
- 4. Nature and impact of ethical aspects in wider range of professional role and practice
- 5. Advanced practical issues in clinical psychology
- 6. Different models of supervision and their use
- 7. Ethical principles and their application in decision making in clinical and professional context.

Learning Outcomes

After completing this course, the students will be able to

- 1. Identify different needs arising from psychological problems among children and adolescents
- 2. Use wide range of assessment techniques and instruments in understand children and adolescents with mental health needs
- 3. Formulate mental health problems with a wider multifactorial approach.
- 4. Use most suitable intervention to help children and adolescents with mental health needs
- 5. Appreciate the different models of supervision

6. Declare and defend ethical position in aspects of conflicting interests.

Instructional Strategies

Training

Child Clinical skills training

Training on Advanced clinical issues

Practice

Child Clinical Placement at psychiatry and clinical psychology service setup

Supervision

Receive individual group clinical supervision from designated professionals

Other

Case presentation and discussion

Assignment

Assessment Methods

Final Examination - 50 marks (examination after completion of teaching period)

Case report (Three case reports following the prescribed guideline see Appendix 7).

Clinical log (Detailed log of clinical activities in the prescribed guideline see Appendix 2).

Placement completion report

Course Activities

1. Training.

- Clinical skills training on child and adolescent mental health
- Training on Advanced clinical issues

This will include trainings on contemporary and contextually relevant topics related to clinical practice, intervention and professional development. This may include but not limited to writing referral letter, Ethical decision making in clinical and research context, organizing public and professional programs, etc.

2. Practice.

General mental health placement with special focus on child and adolescent mental health.

- The full age ranges from childhood to 65 years
- At least one case should be seen in each of the following categories (which are not mutually exclusive)
 - self-harm
 - sexual dysfunction or deviation
 - personality disorder
 - marital or relationship
 - interpersonal or social skills
 - eating or weight
 - childhood autism or psychosis
 - childhood conduct disorder
 - learning disability, child
 - learning disability, adult
 - brain injury
 - a health problem (e. g. asthma, chronic illness)
- The following techniques should have been used
 - interviews
 - direct observation or functional analysis
 - psychometric assessment
 - behavioural or cognitive-behavioural approach
 - a cognitive approach
 - a family or systemic approach, child
 - a family or systemic approach, adult
 - one other psychotherapeutic approach.
- Other Requirements
 - Satisfactory case load
 - Careful record keeping (clinical record, supervision record)
 - Professional behaviour/conduct
 - Satisfactory placement report

3. Supervision

Individual group clinical supervision from designated professionals. All works carried out at the placement must be supervised by the clinical supervisor designated by the department. Two forms of supervision are offered by the department which are as follows

Individual supervision: One to one discussion on clinical work carried out by the student. Such discussion will include reporting of works carried out, discussing difficulties and solutions, deciding next plan of action, finding out scope for improvement, and any other professional issues that warrant a discussion.

Group supervision: Discussion on clinical work carried out by the students in a group of peers led by the designated group supervisor. The focus of discussion may include, overview of clinical work, professional issues, general therapeutic principles and strategies, common difficulties, group development and other pertinent issues raised by the students

Complete records of clinical activities must be submitted according to the prescribed formats (see Appendix 1 & Appendix 2)

4. Case Presentation

Students will present clinical cases through which they will demonstrate

- Skill of case presentation
- Conceptualization of case
- Awareness and understanding of relevant clinical and professional issues
- Receive support from professional colleagues

Students shall regularly attend clinical meetings at the department to master the skills of case presentation by giving presentations themselves and observing others doing so.

CPSY 602 B. Advanced Research Methods in Clinical Psychology

Theory: 50 Marks

Course Objective

The students will gather knowledge and skills on advanced issues related to research in clinical psychology. They will be able to understand and use these knowledge and skills in

critically evaluate research and designing their own research.

Specific Objectives

This course aims to help the students learn

1. the underlying principles of research and designs

2. The spectrum of research in clinical psychology

3. Conceptualize research paradigm and their influence in research design

4. Use of single case experimental design

5. Incorporation of different type of single case designs in clinical practice to generate knowledge

6. different approaches of qualitative research and their use in clinical psychology

7. Application of naturalistic case study design in clinical psychology

8. Procedures involved in analysing qualitative data.

9. Advanced quantitative data analysis

10. Proses involved in critical analysis of research article

11. Planning and conduction of research as well as dissemination and writing of research

report.

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2)

Hands on training

Assessment Methods

Final Examination - 50 marks (examination after completion of teaching period)

Research critique – Non-credit(see Appendix - 11, Section D)

Learning Outcomes

After completing this course, the students will be able to

- 1. comprehend the spectrum of research and position their own research in the spectrum
- 2. appreciate the role of different paradigms and their influence in research design
- 3. apply single case research design in their clinical work
- 4. appreciate different qualitative designs and choose appropriate design for their own research
- 5. appreciate and use advanced data analysis strategy
- 6. design and conduct rigorous research in clinical psychology
- 7. write and disseminate research findings for a wider audience
- 8. critically analyse research article

Course Content and Class Distribution

| | Course content | Class* | Method** |
|---|---|--------|----------|
| 1 | Approaches to research | 3 | PL |
| | Spectrum of research approaches | | |
| | Paradigms in research | | |
| 2 | Strategies for single case design | 3 | PL |
| | General procedure | | |
| | Assessment strategies | | |
| | Basic A-B-A withdrawal design | | |
| | Extension of the A-B-A design, uses in drug evaluation, and interaction design strategies | | |
| | Multiple baseline designs | | |
| | Alternative treatment design | | |
| | Changing Criterion Design | | |
| | Statistical analysis for single-case experimental designs | | |

| 3 | Advanced knowledge and skills in qualitative research | 8 | PL |
|---|---|---|----|
| | Approaches to qualitative research | | |
| | Phenomenology | | |
| | Grounded Theory | | |
| | Case study | | |
| | Narrative | | |
| | Ethnography | | |
| | Process of qualitative research | | |
| | Designing qualitative research | | |
| | Collection of qualitative data | | |
| | Steps and methods of analysis | | |
| | Making sense: drawing and verifying conclusion | | |
| | Display of qualitative data | | |
| 4 | Analysing Quantitative Data | 8 | PL |
| | Processing data | | |
| | Advanced analysis of data | | |
| | Factor analysis | | |
| | Structural equation modelling | | |
| | Path analysis, Mediation, Moderation | | |
| | Multivariate analysis, | | |
| | Logistic regression | | |
| | Time series analysis | | |
| 5 | Contemporary approaches to research | 4 | PL |
| | | | |
| | Mixed Method research and Multi method | | |
| | Mixed Method research and Multi method Implementation science | | |
| | | | |

| 6 | Research critique | | 2 | AS |
|---|--|-------|----|-------------------------------|
| 7 | Planning and conduction of research | | | Workshop, Guest lecture |
| 8 | Writing report, dissertation or thesis | | 3 | Workshop, Guest lecture |
| | | Total | 33 | |

Note: *Per class 90 minutes; **PL=Participatory lecture; **AS= Assignment

Specialist topics

Guest lecturers from experts in different fields

Year II

CPSY 603Clinical Psychology in Wider Context

Theory: Non-credit

Course Objective

This course will orient students with different aspects related to professional practice in clinical psychology. With intensive placement activities, supervision, case presentation and report writing focused on child mental health problems, the students will enhance their clinical skills learned in the Year 1 (MS) of clinical psychology training program.

Specific Objectives

This course aims to help students acquire

- 5. understanding of the route to become professional clinical psychologist
- 6. understanding of their role in health system and mental health service delivery
- 7. knowledge on ethical aspects in professional practice as clinical psychologist
- 8. understanding of the ways to ensure professional growth

Learning Outcomes

After completing this course, the students will be able to

- 8. appreciate the need for understanding and adherence to the professional standards
- 9. appreciate their role in health system and mental health service delivery
- 10. identify professional issues that require special attention for effective practice and professional growth
- 11. appreciate the need for self-care
- 12. communicate effectively in multidisciplinary team
- 13. practice in an ethical manner
- 14. comprehend need for the continuing professional development

Course Content and Class Distribution

| | Course content | Class* | Method** |
|---|---|--------|-----------|
| 1 | Advocacy | 4 | DS, Group |
| | Role of advocacy in 21st century | | work |
| | Advocacy in Mental health service development | | |
| | Case study on Advocacy | | |
| 2 | Training | 4 | DS |
| | Training models | | |
| | Communication skills | | |
| | Integration of theory and practice | | |
| | Deigning training delivery | | |
| | Content development | | |
| | Practicalities of training delivery | | |
| 3 | Supervision | 10 | Training |
| | Models of clinical supervision | | |
| | Designing effective supervision system | | |
| | Supervisee-supervisor contract | | |
| | Practical and ethical aspects of supervision | | |
| 4 | Research | 4 | DS |
| | Conducting Independent Research | | |
| | Connecting with recent trends in research | | |
| | Big data | | |
| | Cluster analysis | | |
| | Implementation science | | |

Note: *Per class 90 minutes; ** DS=Discussion

Specialist Placement

(Mandatory Requirement)

The student must choose an area of specialization and complete necessary training and placement on that specific area. The area may include but are not limited to neuropsychology, family therapy, addition, geriatric, palliative care, and community psychology. Based on choice, the students will submit a brief one-page proposal on specialist placement before starting on placement.

The student will work with cases on the specialized area for a minimum of five months. At the end of the placement, the student has to submit a specialist placement report.

Required activities

- 1. Specialist placement proposal
- 2. Satisfactory placement completion
- 3. Specialist placement report

Thesis

(Mandatory Requirement)

As a mandatory requirement for the MPhil in Clinical Psychology, each student will have to conduct a research in his or her chosen area to link the theoretical aspects of research in the practical field. The student has to prepare a thesis in consultation with his/her research supervisor and submit it to the Department. Thesis should be prepared and submitted according to the guideline prescribed by the department (see Appendix 10).

Required activities

- 1. Research Proposal (see Appendix 9)
- 2. Preliminary presentation
- 3. Progress report (every six-month; see Appendix 12a)
- 4. Acquire ethics approval for the research
- 5. Research conduction
- 6. Final Presentation
- 7. Thesis preparation and submission (see Appendix 10)

Instructional Strategies Year I and II

Lecture

Lecture by designated course teacher and guest teachers.

Training

- 1. Training on Management of Child and Adolescent Problems (Year I)
- 2. Training on Systemic and Family Therapy (Year II)
- 3. Training on Advanced Clinical Issues (Year I & II)
- 4. Training on assessment and management of substance use (Year II)
- 5. Training on providing Clinical Supervision (Year II)
- 6. Training on advanced research skills (Year I & II)

Practice

- 1. Placement on Child and Adolescent Mental Health (Year I)
- 2. Placement on Substance Abuse (Year II)
- 3. Specialist Clinical Placement (Year II)
- Receive Individual and Group Clinical Supervision from Designated Supervisor (Year I & II)
- 5. Provide Clinical Supervision and/or Training (Year II)
- 6. Competent use of Cognitive Behaviour Therapy (Year I & II) and Systemic Family Therapy (Year II) approaches in clinical work.

Overall Learning Outcomes of Year II

After completing year II course and other requirements, the students will be able to

- 1. Assess, formulate and intervene with psychological problems associated with substance abuse.
- 2. Assess, formulate and intervene with psychological problems associated with one specialized topic of their choice.
- 3. Appreciate the need for skill acquisition on a second therapeutic approach apart from CBT.
- 4. Become competent in using a Systemic approach when suitable for the problem at hand.
- 5. Use systemic approach in assessment, hypothesizing and intervening mental health problems.
- 6. Work effectively with family and other forms of systems and sub-systems.

- 7. Provide training to others (give away skills)
- 8. Support colleagues of junior standing through supervision and training.
- 9. and chose as well as advocate the most suitable model considering the supervisory context. Provide supervision to colleagues of junior standing.
- 10. Appreciate use of different strategies and designs used in research.
- 11. Conduct advanced research with confidence

Suggested Readings for MPhil Courses

- Lindsay S. J. E. & Powell G. E. (eds.), (2007). The Handbook of Clinical Adult Psychology. Third Edition. London: Routledge.
- Marziller, J. & Hall, J. (1999). What is Clinical Psychology? Oxford
- Trull, T. J. (2005). Clinical Psychology Thomson-Wadsworth, Belmont.
- American Psychiatric Association (1994) Diagnostic and Statistical Manual of Mental Disorders. Washington, DC: APA.
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- Barlow D. & Cerny J. A. (1988) The Psychological Treatment of Panic. New York: Guilford.
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- Baum, A. Newman, S. Weinman, J. West, R & McManus, C. Cambridge Handbook of Psychology, Health & Medicine. Cambridge
- Beck A. T. (1990). Cognitive Therapy of Personality Disorders. New York: Guilford.
- Bentall R. P. (ed) (1990) Reconstructing Schizophrenia. London: Routledge
- Block S & Chodoff P (eds.) (1991). Psychiatric Ethics. New York: Oxford University Press.
- Blackburn, M & Davison, K. Cognitive Therapy for Depression and Anxiety. Blackwell
- Brammer H. M. Shostrom E. L. & Abrego P. J. (1989) Therapeutic Psychology: Fundamentals of Counselling and Psychotherapy. Englewood Cliffs, NJ: Prentice Hall.
- Braswell, Lauren, and Michael L. Bloomquist. (1991) Cognitive-behavioural therapy with ADHD children: Child, family, and school interventions. Guilford Press.
- Brewin C. R. (1988). Cognitive Foundations of Clinical Psychology. Hove: Lawrence Erlbeaum.
- Broome A. (ed) (1989) Health Psychology: Process and Applications. London: Chapman.
- Carr, A. (1999) Handbook of Child & Adolescent Clinical Psychology. Routledge
- Colman A. M. (ed) (1994) Companion Encyclopaedia of Psychology Volumes I and II. London: Routledge
- Cook, T. D. & Campbell D. T. (1979) Quasi Experimental Design and Analysis Issues for Field Setting. Boston: Houghton Miffin Company.

- Craig, J. R., & Metz, L. P. (1986) Methods of Psychological Research. Monferey, California: Brooks/Cole Publishing Company.
- Crowe M. J. & Ridley J. (1990). Therapy with Couples. Oxford: Blackwell.
- Davey G & Tallis F. (eds.). Worrying: Perspectives on Theory, Assessment and Treatment. Chichester: John Wily & sons.
- Deelman B. G., Saan RJ & Van Zomeren AM (eds.) (1990). Traumatic Brain Injury: Clinical, Social and Rehabilitation Aspects. Netherland: Swets&Zeitlinger.
- Dobson K. S. (1988). Handbook of Cognitive Behavioural Therapies. New York: Guilford.
- Dunn, G. (2000) Statistics in Psychiatry. London: Arnold.
- Edelmann RJ (1995) Health Psychology. Chichester: John Wiley & Sons.
- Fonagy, P., & Higgitt, A. (1984). Personality theory and clinical practice
- Glass, I. (ed) (1991) Addiction Behaviour. London: Routledge
- Goldberg, S. et al (eds.) Attachment Theory: Social, Developmental and Clinical Perspectives.

 The Analytic Press.
- Gelder, M. Grath, D., Mayou, R. S. & Cowen, P. (1996) Oxford Textbook of Psychiatry. Oxford University Press.
- Gurman A. &Kniskern D. (eds.) (1991) Handbook of Family Therapy. Vol. 1 & 2. New York:

 Brunner Mazel.
- Hawton, K. (1985) Sex Therapy: A Practical Guide. OUP
- Hays, W. L. (1977) Statistics for the Social Science. New York: Holt Reinhart and Winston. Inc.
- Hawton K, Salkovskis P.M., Kirk J. & Clark D. M. (eds.) (1989) Cognitive Behaviour therapy for Psychiatric Problems. OUP
- Herbert, M., (1998) Clinical Child Psychology. John Willey & Sons.
- Hersen M &Bellack A. S. (eds.) (1988) A Dictionary of Behavioural Assessment Techniques. New York: Pergammon Press.
- Higgins, R. (1996) Approaches to Research: A Handbook for those writing a dissertation. London: Jesica Kingsley Publishers.
- Jacobson, N. S. &Gurman, A. S. (eds.). (1986) Clinical Handbook of Marital therapy. New York: Guilford.
- Gurman, A. S., & Jacobson, N. S. (eds.). (2002). Clinical handbook of couple therapy. Third Edition. Guilford Press.
- Jenike M. A., Baer L. & Minichiello (eds.) (1990) Obsessive Compulsive Disorders: Theory and Management. Chicago: Year Book Medical Publications.

- Kolb B & Whishaw IQ (1990) Fundamentals of Human Neuropsychology. New York: Freeman and Company
- Kaplan, H. I. & Sadock, B. J. Concise Textbook of Clinical Psychiatry. William & Wilkins
- Kraijer, D. Autism & Autistic-like Conditions in Mental Retardation. Sweets & Aeitlings.
- Langer, K. G. Psychotherapeutic Interventions for Adults with Brain Injury or Stroke: A Clinician's Treatment Resource. Intl. Univ.
- Lazak, M. D. Neuropsychological Assessment Oxford University Press
- Lindsay S. J. E. & Powell GE (eds.) (1989) An Introduction to Clinical Child Psychology. Aldershot: Gower Publishing.
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- Pearce S. Wardle J (eds.) (1989) The Practice of Behavioural Medicine. Oxford: Oxford University Press.
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- Roth, A. & Foangy, P. (1996) What Works for Whom. The Guilford Press.
- Sarafino E. P. (1990) Health Psychology: Biopsychosocial Interactions. New York/New Delhi: McGraw Hill.

- Siegel, S. (1996) Nonparametric Statistics for the Behavioural sciences. New York: McGraw-Hill Book Co.
- Shaughnessy, J. J., Zechmeister, E. B., Zechmeister, J. S. (2000) Research Methods in Clinical Psychology. New York.
- Sturney, P. (1996) Functional Analysis in Clinical Psychology. John willey & Sons.
- Suffian, A. J. M., (1998) Methods and Techniques of social Research. Dhaka: University Press Limited.
- Tabachnick, B. G., &Fidell, L. S. (1989) Using Multivariate statistics. New York: Harper & Row Publications.
- Volkmar, R. R. Autism & Pervasive Developmental Disorders. Cambridge
- Watts, F. N. & Bennet DH (eds.) (1991) Theory and Practice of Psychiatric Rehabilitation. Chichester: Wiley.
- Williams, J. M. G. (1992) The Psychological Treatment of Depression. London: Routledge.
- Woods, R. T. & Britton, P. G. (1985) Clinical Psychology with the Elderly. London: Croom Helm.

PhD in Clinical Psychology

Department of Clinical Psychology, University of Dhaka

2021-22 andonward

Course length: Three (03) years.

Summary of Course Structure

| Course no. | Course Title | Credits | Marks | Group |
|------------|--|----------|-------|------------|
| CPSY 701.1 | Clinical Psychology Service Development Strategies | 2 | 50 | Group 1 |
| CPSY 701.2 | Policy and Professional Issues of Clinical Psychology in Bangladesh | 2 | 50 | - Group 1 |
| CPSY 702.1 | Quantitative Research Design | 2 | 50 | Group 2 |
| CPSY 702.2 | Qualitative Research Design | 2 | 50 | Group 2 |
| CPSY 703.1 | Clinical Neuropsychology | 2 | 50 | |
| CPSY 703.2 | Community Mental Health | 2 | 50 | Group 3 |
| CPSY 703.3 | Paediatric and Clinical Child Psychology | 2 | 50 | |
| CPSY 704.1 | Advancement in Psychotherapy: Theory and Practice | 2 | 50 | |
| CPSY 704.2 | Experimental Psychopathology | 2 | 50 | Group 4 |
| CPSY 704.3 | Psychology of Self and Interpersonal Relationship | 2 | 50 | |
| CPSY 705.1 | Philosophy of Research Design | Non-cred | lit | Compulsory |

Additional Requirements for the Department of Clinical Psychology

PhD students enrolled at the department of clinical psychology will be subjected to the following requirements additional to the general requirements set for the PhD student by the University of Dhaka.

- PhD Students have to take one course from each of the four groups along with the mandatory non-credit course in their 1st year of enrolment as part of their PhD course work.
- As a mandatory requirement for the completion of PhD, each candidate has to select and work on one specialist area to develop a specialized clinical psychology placement on that area. Selection of such area for specialized placement development should be finalized in consultation with candidate's clinical supervisor and the PhD advisory committee at the Department of clinical psychology, DU. The candidate must submit a satisfactory placement development report detailing on the clinical work, process of development, relevant assessment(s), guideline(s) on intervention delivery, plan on sustainability. The report should be submitted to the PhD advisory committee at the department of clinical psychology
- There will be a yearly review of each PhD candidate's progress towards the achievement of obtaining the PhD degree, which will be organized and monitored by the PhD advisory committee of the department.
- A PhD student would be expected to publish at least two research papers in a standard professional journal related to his/her chosen area or sub-specialty area, either as main author or as co-author, during the studentship of PhD period, to demonstrate his/her growth as a PhD student in the field of clinical psychology.
- Besides this syllabus, all other Dhaka University rules and regulations adopted for PhD candidates will be applicable for the PhD candidates at the Department of Clinical Psychology.

CPSY 701.1: Clinical Psychology Service Development Strategies

(Optional, 2 Credits, 50 Marks)

Course Objectives

This course will help students to make them familiarize with the recent advancements in clinical psychology topics. It will include knowledge and skills related to assessment, intervention, and models of service development and delivery appropriate for the local cultural context.

Specific Objectives

This course aims to help the students learn

- 1. Policies and practices in health care system.
- 2. Current advancement in professional issues related to clinical psychology.
- 3. Cross-cultural perspective in psychopathology.
- 4. available models in clinical psychology service development and delivery.
- 5. To conceptualize the need and intervention procedure appropriate for indigenous culture for service development.
- 6. To conceptualize the implementation of clinical psychology in diverse clinical and service setups.
- 7. Steps of service development especially appropriate for the local cultural context.
- 8. To understand the necessity for conducting and consuming research to develop appropriate service for local context
- 9. To identify contextual factors, associated with need assessment, service development, service delivery and service evaluation.
- 10. Cultural and contextual issues in making clinical and legal judgment and reporting.

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2) (i.e., seminar presentation based on field study)

Hands on training

Assessment Methods

Final Examination - 50 marks (examination after completion of teaching period)

Learning Outcomes

After completing this course, the students will be able to

- 1. Describe policies and practices in health care system.
- 2. Describe recent advancement in professional issues related to clinical psychology.
- 3. Recognize cross-cultural perspective of psychopathology
- 4. Implement the appropriate model of clinical psychology service delivery for the local cultural context.
- 5. Demonstrate skill in the assessment and intervention procedure appropriate for indigenous culture specific context for the development of service.
- 6. Implement the clinical psychology in diverse clinical and service setups.
- 7. Follow the proper steps of service development especially appropriate for the local cultural context.
- 8. Appreciate the necessity for conducting and consuming research to develop appropriate service for local context
- 9. Identify the emerging practical issues in the process of service development
- 10. Demonstrate the skill to work with/incorporate multi-professional in the process of clinical psychology service development.
- 11. Identify cultural and contextual issues in making clinical and legal judgment and reporting.

Course Content and Class Distribution

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Contemporary trends in Clinical Psychology – professional issues | 4 | PL |
| | Psychologists, politics and hospitals | | |
| | Psychology and health care system | | |
| | Educational preparation and clinical training within a medical setting | | |
| | Structure and authority of hospitals | | |
| | Professionalism in medical setting | | |
| 2 | Assessment and diagnosis of psychopathology from indigenous culture specific context | 4 | PL |
| | Cross-cultural perspective in psychopathology | | |

Class* Method** Content Critical appraisal of classification models as adopted by DSMs and ICDs perspectives International cross-cultural and assessment and diagnosis of abnormality Different domains of assessment— Assessment of intelligence Personality assessment Behavioural assessment Clinical judgment process, interpretation, and writing clinical report 3 Models of psychological interventions 4 PLPhilosophical and theoretical issues Scientific knowledge base transformed into psychotherapeutic techniques and clinical skills Course of clinical interventions Review of psychotherapy process research What works for whom? 4 **Evidence-Based mental Health Practice** PL4 Principles of evidence based mental health treatment Emergence of evidence-based mental health treatment Clinical decision making and the evidence-based practitioner Evidence in intervention science What are the common features of evidence-based practices? How does a practice become evidence-based? Developing and sustaining evidence-based systems of mental health services Interface of cultural competency and evidence-based

| | Content | Class* | Method** |
|---|---|--------|----------|
| | practices | | |
| | Evidence-based practices for families of individuals with severe mental illness | | |
| 5 | Clinical psychology in medical settings | 4 | PL |
| | Marketing psychological services in hospitals | | |
| | Quality assurance and the clinical health psychologist | | |
| | Financial efficacy of psychological services in health care settings | | |
| | Computers in psychological practice | | |
| 6 | General clinical issues—practical aspects | 4 | PL |
| | Critical issues in consultation and liaison: Paediatrics | | |
| | Critical issues in consultation and liaison: Adults | | |
| | Emerging issues in women's health | | |
| | Emerging issues in the care of elderly | | |
| | Adherence to self-care regimens: the patient's perspective | | |
| 7 | Issues and Templates for clinical psychology service development | 6 | PL |
| | Toward program development: an integration of science and service in medical setting | | |
| | Psychological evaluation and testing services in medical settings | | |
| | Development of an eating disorder program | | |
| | Integration of clinical psychology into adult and paediatric Oncology programmes | | |
| | Cardiovascular disorders: Hypertension and coronary heart disease | | |
| | Psychological components rehabilitation programmes for Brain-injured and spinal-cord injured patients | | |
| | Development of a chronic pain management clinic: | | |

| Content | Class* | Method** |
|--|--------|----------|
| psychological assessment and intervention. | | |

Total 30

Note: *Per class 90 minutes; **PL=Participatory lecture

Suggested readings

Drake, R. E., Merrens, M. R., & Lynde, D. W. (Eds.). (2005). Evidence – Based Mental Health Practice. W. W. Norton & Company, New York.

Sweet, J. J., Rozensky, R. H., &Tovin, S. M. (Eds.). (1991). Handbook of Clinical Psychology in Medical Settings. Plenum Press, New York.

CPSY 701.2: Policy and Professional Issues of Clinical Psychology in Bangladesh

(Optional, 2 Credits, 50 Marks)

Course Objectives

Clinical psychology in Bangladesh is passing through its 3rd decade. This course will help students to get oriented on the historical development of Clinical Psychology as a profession as well as to learn strategies for further development in the context of Bangladesh.

Specific Objectives

This course aims to help the researcher to learn

- professional issues and strategies adopted in developing the profession of psychology in general and clinical psychology in particular
- 2. the historical development of clinical psychology
- 3. the prosses of development of Clinical Psychology as a profession around the world.
- 4. socio-political and cultural dynamics of professional standards in clinical psychology
- 5. the outline of emerging potentialities, challenges and trends in the clinical psychology profession
- 6. strategies for ensuring growth and expansion by overcoming barriers in the development of clinical psychology profession in Bangladesh.
- 7. Ethical, political and cultural dilemma related to Clinical Psychology profession.
- 8. contextualization of psychology and applied psychologies in Bangladesh: Indigenization vs internationalization
- Contextual forces in the development and selection of practice models in the clinical psychology

Instructional Strategies

Theoretical Lecture (20 hours)

Group Discussion/ Debate / Problem solving

Audio-visual aids, oral presentations

Written Assignment (1-2)

Learning Outcomes

After completing this course, the researcher will be able to

- 1. outline and review the historical development of professional issues in clinical psychology in Bangladesh
- 2. appreciate the rules that govern professional standards
- 3. Recognize, outline and review the historical development of professional issues in clinical psychology in Bangladesh
- 4. describe and orient others on the developmental prosses of Clinical Psychology as a profession around the world and in Bangladesh.
- 5. identify emerging potentialities and trends in clinical psychology profession across the globe.
- 6. devise strategies for ensuring growth and development of professional identity for clinical psychologists in Bangladesh.
- 7. identify ethical, political and cultural dilemma related to practice in Clinical Psychology.
- 8. contribute in taking clinical psychology profession one step further.
- 9. engage into life-long personal and professional development in the practice of clinical psychology.

Course Content and Class Distribution

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Milestones in the historical development of clinical psychology | 2 | PL |
| 2 | Global issues in psychology as a profession, | 2 | PL |
| 3 | Professional issues in clinical psychology: the Bangladesh scenario | 2 | PL |
| 4 | Understanding the dynamics of changes and developments in professional standards | 2 | PL |
| 5 | Challenges and barriers to the development of psychology profession in Bangladesh | 2 | PL |
| 6 | Indigenization vs. internationalization of psychology and applied psychologies for Bangladesh. | 2 | PL |
| 7 | Developmental focus of clinical psychology: context and | 3 | PL |

| C | Content | Class* | Method** |
|---|---|--------|----------|
| d | lirections | | |
| | Reactive and proactive forces in the development of psychology in Bangladesh: individual, societal, cultural and state level factors. | | |
| | curative vs preventive focused model in the development of psychology in Bangladesh. | | |
| | the growth of clinical psychology profession in Bangladesh: implications of holistic and multidisciplinary approach | | |
| | Growth of the professionals in the development of profession | 3 | PL |
| | Developing a professional identity as a clinical psychologist: integrating the personal and professional issues | | |
| | Through the looking glass: reflections on the transition from a trainee to a qualified clinical psychologist | | |
| | Professional and personal identities as clinical psychologist: being human | | |
| | d. Understanding the broader role of clinical psychology: professional issues across practice | | |
| | tuture directions in the development of clinical osychology profession in Bangladesh | 2 | PL |
| | Total | 20 | |

Note: *Per class 90 minutes; **PL= Participatory lecture

Reading material for this course will be supplied in the class.

CPSY 702.1 Quantitative Research Design

(2 Credits, 50 Marks)

Course objectives

This course is designed to enable the students with advanced knowledge and skills in the research field. They will be oriented with contemporary policies, practices, and advancement in quantitative research around mental health.

Specific Objectives

This course aims to help the students learn

- 1. and be reoriented about the general and specific skills and knowledge of quantitative research
- 2. recent development in theory, policy and practice of psychometry.
- 3. research designs associated with creating impact in larger community and mental health service development and delivery.
- 4. knowledge around management of data from preparation, collection, analysis and interpretation.
- 5. advanced data analysis techniques such as analysis of multivariate data, structural equation modelling, panel data analyses.
- 6. Conceptualize the use of large data sets and secondary data in research
- 7. Understand the use of published findings in generating concrete knowledge

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2)

Hands on training

Assessment Methods

Final Examination - 50 marks (examination after completion of teaching period)

Learning Outcomes

After completion of this course, students will be able to

- 1. recognize and recall the general and specific skills and knowledge of quantitative research
- 2. identify recent development in theory, policy and practice of psychometry.
- 3. Select research design associated with creating impact in larger community and mental health service development and delivery.
- 4. Describe the knowledge around management of data from preparation, collection, analysis and interpretation
- 5. Implement the advanced data analysis techniques such as analysis of multivariate data, structural equation modelling, panel data analyses
- 6. use of large data sets and secondary data in research
- 7. use of published findings in generating concrete knowledge

Course Content and Class Distribution

| | Content | Class* | Method** |
|---|---|--------|------------|
| 1 | Review of general and specific research skills and knowledge previously acquired | 8 | PL |
| 2 | Recent development and concerns in psychometry | 3 | PL |
| 3 | Creating impact with research | (13) | PL, |
| | Randomized Controlled Trial | 3 | Assignment |
| | Action research | 2 | |
| | Implementation science | 4 | |
| | Research in service planning | 2 | |
| | Evaluation research | 2 | |
| 4 | Working with data | 4 | PL |
| | Perquisites of quality data (accurate and valid data, training, representativeness, sample size estimation) | | |
| | Preparing data | | |
| | Analysing data | | |
| | Interpreting data | | |
| 5 | Advanced analysis techniques | 9 | PL |

| | Content | | Class* | Method** |
|---|--|-------|--------|----------|
| | Multivariate analysis, | | 3 | PL |
| | Structural equation modelling, | | 3 | PL |
| | Analysing panel data | | 3 | PL |
| 6 | Making sense of data and research findings | | 5 | PL, AS |
| | Using MIS and other dataset in research | | | |
| | Review research | | | |
| | Meta-analysis | | | |
| | | Total | 42 | |

Note: *Per class 90 minutes; **PL= Participatory lecture, **AS= Assignment

References

Andy Field (2013) Discovering Statistics using IBM SPSS Statistics (4th Edition). Sage

- Comer, J. S., & Kendall, P. C. (Eds.). (2013). The Oxford Handbook of Research Strategies for Clinical Psychology. Oxford University Press.
- Cumming, G. (2012). Understanding the new statistics: Effect sizes, confidence intervals, and meta-analysis. Routledge
- Joseph F. Hair Jr, William C. Black, Barry J. Babin, Rolph E. Anderson (2010) Multivariate Data Analysis (7th Edition). Pearson
- Millsap, R. E., &Maydeu-Olivares, A. (Eds.). (2009). The SAGE handbook of quantitative methods in psychology. Sage
- Robert Ho (2013). Handbook of Univariate and Multivariate Data Analysis with IBM SPSS. Chapman and Hall/CRC.
- Rust, John, and Susan Golombok (2014). *Modern psychometrics: The science of psychological assessment (3rd edition)*. Routledge
- Frees, E. W. (2004). Longitudinal and panel data: analysis and applications in the social sciences. Cambridge University Press.
- Byrne, B. M. (2010) Structural equation modelling with AMOS.2nd edition
- Forman, S. G. (2015). *Implementation of mental health programs in schools: A change agent's guide*. American Psychological Association.

CPSY 702.2: Qualitative Research Design

(2 Credits, 50 Marks)

Course Objectives

This course is aimed at developing advanced knowledge and skills related to conduction of qualitative research in an independent manner.

Specific Objective

This course aims to help the students learn

- 1. different perspectives and their impact on research approaches
- 2. different qualitative research designs.
- 3. use and suitability of qualitative research design in advancing knowledge
- 4. use of qualitative designs as complimentary to quantitative designs
- 5. different methods of data collection used in qualitative research
- 6. analytic techniques used in qualitative research
- 7. criteria related to quality standards in conducting and reporting qualitative research

Instructional Strategies

Participatory Lecture

Group Discussion

Assignment

Training

Assessment Methods

Examination - 50 marks

Learning Outcomes

After completing this course, the students will be able to

- 1. appreciate the role of qualitative research in advancing knowledge
- 2. differentiate between different qualitative research designs.
- 3. select appropriate qualitative research design in line with objectives of the research

- 4. appreciate the interplay of different contextual and resource concerns in choosing a specific qualitative research design
- 5. independently design and carryout qualitative research projects.
- 6. adopt a suitable method of data collection fitting to the research design
- 7. carryout computer assisted analysis of qualitative data
- 8. maintain quality standard in conducting qualitative research
- 9. prepare qualitative research report

Course Content and Class Distribution

| | Course content | Class* | Method** | |
|---|---|--------|----------------------------|--|
| 1 | Introduction to qualitative research | 4 | Lecture, DS, AS | |
| | Overview of qualitative research | | and PS | |
| | History of qualitative research | | | |
| | Philosophy of qualitative designs | | | |
| | Approaches to qualitative research | | | |
| 2 | Planning and designing qualitative research | 6 | Lecture, Training | |
| | Analysing topic, problem analysis, mind map | | | |
| | Sampling | | | |
| | Resources | | | |
| | Quality control | | | |
| 3 | Collecting qualitative data | 6 | Lecture, Training, AS | |
| | In depth interview | | | |
| | Focus group discussion | | | |
| | Observation | | | |
| | Projective techniques: Photo elicitation, Zmet, | | | |
| | Other tools: Mapping, Spider web, Photo voice | | | |
| 4 | Analysing qualitative data | 6 | Lecture, | |
| | Content analysis | | demonstration, practice | |
| | Pattern matching | | | |

| | Course content | Class* | Method** |
|---|--|--------|--------------------|
| | Discourse analysis | | |
| | Using software in analysing qualitative data | | |
| 5 | Writing qualitative research report | 4 | Lecture, training, |

Note: *Per class 90 minutes; **DS=Discussion, **AS= Assignment, **PS= Presentation by students

Special Assignment.

Each student will propose and design a small-scale qualitative project. Individual assignment carried out at different parts of the course will contribute to the project. At the end of the course each student will submit a qualitative research report based on the research project carried out throughout the course.

Suggested readings

- Glaser, B. & A. Strauss (1967). *The discovery of grounded theory: strategies for qualitative research*. New York: de Gruyter.
- Corbin, J. & Strauss, A. (2008) Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory (3rd Edition) Sage.
- Creswell, J. W., and Poth, C. N. (2017) Qualitative Inquiry and Research Design Choosing Among Five Approaches 4th Ed. Sage

Stewart, D. & P. Shamdasani (1990). Focus groups. Theory and practice. London: Sage.

Yin, R. K. (1994). Case study research. Design and methods. London: Sage.

Wengraf, T. (2001). Qualitative research interviewing. Sage Publications.

Wolcott, H. F. (2001). Writing up qualitative research. Sage Publications.

CPSY 703.1: Clinical Neuropsychology

(Optional, 2 Credits, 50 Marks)

Course Objectives

This course is aimed at developing knowledge and skills on Brain – Behaviour relationship as the basis of clinical neuropsychology. And to promote biopsychosocial model of clinical case conceptualization and treatment of psychological disorders rooted either on

neuropathology or psychopathology.

Specific Objectives

This course aims to help the students learn

1. Historical and philosophical perspectives of Neuropsychology and neurosciences

2. Functions of Clinical Neuropsychology

3. Neuroanatomy and neurophysiology

4. Functions of brain and neurological basis of behaviour

5. Acquired Brain Injury and other types of Neuropathology

6. Immediate and long term cognitive, emotional, behavioural consequences of Brain .

damage

7. Principles and strategies of Neuropsychological assessment and testing

8. Neuropsychological assessment batteries

9. Principles and strategies of neurorehabilitation for brain injury patients

10. Multidisciplinary team approach in Neurorehabilitation.

Instructional Strategies

Theoretical Lecture (40 class/60 hours)

Practical training on neuropsychological assessment (5 days /30 Hours)

Practical training on Neurorehabilitation (5 days/30 hours)

Assignment: Case handing with Supervision

Assessment Methods

Training attendance (non-credit)

Assignment completion (non-credit)

Seminar Presentation (non-credit)

Examination - 50 marks (after completion of teaching period)

Learning Outcomes

After completing this course, the students will be able to

- 1. Appreciate the need for understanding historical and philosophical perspectives in neuropsychology and neurosciences
- 2. comprehend the functions of Clinical Neuropsychology
- 3. describe the neuroanatomy and physiology of normal as well as pathological brain with potential causes such as Traumatic Brain Injury, stroke, brain tumour, infection, Alzheimer's disease etc.
- 4. identify and describe the cognitive, behavioural and emotional consequences of brain injury.
- 5. Conduct neuropsychological assessment and testing
- 6. demonstrate conceptualization and formulation of psychological problems from clinical neuroscience perspective.
- 7. Develop and implement the treatment/neurorehabilitation plan in collaboration with multidisciplinary team.
- 8. Appreciate the role and need for multidisciplinary team approach in Neurorehabilitation

| | Content | Class* | Method** |
|---|---|--------|----------|
| 1 | Introduction to Neuropsychology | 4 | PS and |
| | Perspectives and history of neuropsychology | | SGD |
| | Origins of human brain and behaviour | | |
| | Cognitive neuropsychology and neuroscience | | |
| | Behavioural neuropsychology | | |
| | Neuropsychiatry | | |
| | Clinical neuropsychology | | |
| | Roles for clinical neuropsychologists | | |

| | Content | Class* | Method** |
|---|---|--------|------------------|
| 2 | Brain-Behaviour Relationships | 4 | PS and |
| | Organization of the nervous system | | SGD |
| | Cellular organization of nervous system- Brain's electrical activity, Brain imaging | | |
| | Bio-chemical activity of the brain—Mental illness and neurotransmitters, blood brain barrier Drugs and barriers to their influences, Classification of psychoactive drugs | | |
| 3 | Cortical Organization of the brain | 3 | PS, SGD |
| | Principles of Neocortical function | | and Practical |
| | Lobes in the brain | | demonstra |
| | Hemispheres in the brain | | tion |
| | Principles of Cerebral Asymmetry | | |
| 4 | Higher order functions of the brain and their disorder | 6 | Case |
| | Memory | | Presentati |
| | Language | | on, lecture |
| | Emotional process | | |
| | Spatial behaviour | | |
| | Attention, Imagery and Consciousness | | |
| | Executive functioning | | |
| 5 | Issues and Abnormalities | 7 | Case |
| | Development of functions- brain injury and development | | Presentati |
| | Learning disabilities- Hyperactivity, and causes of learning disabilities | | on, lecture, |
| | Recovery of function- incidence of brain damage and prospects for recovery, recovery in the cortex, mechanism underlying recovery | | |
| | Neurological disorders—Traumatic and non-Traumatic Brain Injury, Post concussions syndrome, Epilepsy, Tumours, Headache, Infectious disease of the brain, Disorders of | | |

| | Content | Class* | Method** |
|---|--|--------|--------------------------------------|
| | motor neurons, Disorders of sleep | | |
| | Psychiatric and related disorders—Schizophrenia, Affective disorders, Motor disorders, Alzheimer's disease, , Parkinson's disease, Dementia, | | |
| 6 | Neuropsychological Assessment | 5 | Presentati |
| | Major approaches to assessment for cognition, emotion and behaviour | | on, skills training, practical |
| | Neuropsychological examination: procedures | | demonstra |
| | Neuropsychological examination: interpretations | | tion, AS |
| | Neurobehavioral variables and diagnostic issues – problems of differential diagnosis | | |
| 7 | Neuropsychological Assessment Techniques – Test Batteries | 5 | PS, skills |
| | Orientation and attention | | training, |
| | Perception | | practical demonstra |
| | Memory | | tion, AS |
| | Verbal functions and language skills | | |
| | Construction | | |
| | Concept formation and reasoning | | |
| | Executive functions and motor performance | | |
| | Batteries for the assessment of brain damage | | |
| | Observational methods, rating scales, and interventions | | |
| | Test of personal adjustment | | |
| | Testing for functional complaints | | |
| 8 | Neuropsychological Interventions and Rehabilitation | 6 | PS, skills |
| | Rehabilitation psychology | | training |
| | Principles of neuropsychological interventions and rehabilitation | | |
| | Approaches to rehabilitation – institutional vs. Community based | | |

Multidisciplinary team in neuropsychological rehabilitation Evaluation of success in neuropsychological rehabilitation

Rehabilitating cognition, emotion and behaviour

Rehabilitating progressive and non-progressive condition of brain

Rehabilitating cognitive, emotional and behavioural disorders

Total 40

Note: *Per class 90 minutes; **SGD= small group discussion, **PS= Presentation by students, **AS= Assignment

Suggested readings

- Principles of Human Neuropsychology, G. Dennis Rains, McGraw Hill(2002) International Edition
- Neuropsychological Rehabilitation, Theory, Models, Therapy and outcome: Barbara A. Wilson, Fergus Gracey, Jonathan J. Evans, Andrew Bateman, Cambridge University Press (2011)
- The Brain Injury Workbook Exercises for Cognitive Rehabilitation, Trevor, Powell: Headway, Speechmark, Second Edition, (2013)
- Cognitive Rehabilitation Manual: Translating Evidence-Based Recommendations into Practice, Primary. Edmund C. Hasking, American Congress of Rehabilitation Medicine, First Edition (2013)
- A Handbook of Neuropsychological Assessment: John R. Crawford, Denis M. Parker and William W. McKinlay, Lawrence Erlbaum Associates, Publishers (1992)
- Mild Head Injury, A guide to management. Philip Wrightson and Dorothy Gronwall, Oxford University Press (1999)
- INS Dictionary of Neuropsychology, David W. Loring, Second Edition, Oxford University Press, 1999.
- Psychological Management of Chronic Headaches, Paul R. Martin Guilford Press 1993
- Fundamentals of Human Neuropsychology, Bryan Kolb, Ian Q. Whishaw, Fourth Edition, W.H. Freeman and Company, New York, 1996.

- Neuropsychology, A clinical Approach, Kevin Walish A.O. Third edition, Churchill Liveingstone, 1994
- Neuropsychological Assessment, Muriel Deutsch Lezak, Third edition, Oxford University Press, 1995.

CPSY 703.2: Community Mental Health

(Optional, 2 Credits, 50 Marks)

Course Objective

Community Psychology is dedicated to the development of a knowledge base that can be used to implement and evaluate culturally congruent human-service programmes. Community psychology is associated with the community mental health movement. Through this course, PhD level candidates in clinical psychology will learn to think beyond individual approach, and will acquire the perspectives to incorporate Microsystems, organizations, localities, and macro-systems—in their research and services, that would focus on the public health approach, that is, to the prevention of mental illness and mental health problems.

Specific Objective

This course aims to help the researchers learn

- 1. The core features of community psychology and the role of clinical psychologists in bringing desired change for the community
- 2. The organisms of community including micro and macro-system and integrate this in designing and conducting action research to enhance preventive mechanism for the community.
- 3. Different theories of health-related behaviour to understand the underlying psychological process of the behaviour of the community related to health and illness.
- 4. How social belief and structure influence health and illness of the community people especially their risk-taking behaviour and management of other chronic illness.
- 5. How cultural context shape community people's knowledge, attitude and personality and its relation to recognize health risk behaviour (e.g., domestic and community violence) and their management strategies.
- 6. understand powerlessness and alienation in a community leading to helplessness and distress causing health hazards.

Instructional Strategies

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Participatory Lecture (25)
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Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2)

Assessment Methods

Final Examination - 50 marks
Assignment (non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. Describe the features of community psychology as a profession and initiate the functions of clinical psychologists for different community.
- 2. Design and implement prevention strategies according to the community need related to their health
- 3. Compare and contrast the different psychological models of health-related behaviour and their implications in the community.
- 4. Formulate community people's health and illness behaviour using specific psychological construct like Disease-Prone Personality, Dispositional Optimism and related other concepts.
- 5. Explore indigenous knowledge and practice and develop appropriate strategies to prevent community problems and illness
- 6. Develop strategies how to make community more resilient through providing training to the community people and facilitates better future for them.
- 7. Take preventive measures to overcome powerlessness and alienation in a community leading to helplessness and distress causing health hazards.

| | Course content | Class* | Method** |
|---|--|--------|----------|
| 1 | Key concepts in community mental health | | |
| | Community psychology | 1 | PL |
| | Levels of analysis for community psychology: Individuals, micro-systems, organizations, localities, macro-systems etc. | 3 | PL |
| | Public health perspective of prevention of mental illness and promotion of mental health | 1 | PL |

| | Course content | Class* | Method** |
|---|---|--------|----------|
| | Action oriented research, culturally congruent services, person-environment fit, ecology, epidemiology, incidence, prevalence etc | 2 | PL |
| 2 | Social Psychology of Health | 2 | PL |
| | Mental Models of Health and Illness: | | |
| | Common-Sense Models of Illness: the example of hypertension; | | |
| | Reciprocal nature of risk behaviour cognitions: what you do shapes what you think and vice versa. | | |
| | Testing four competing theories of health-protective behaviour | | |
| | Health Beliefs and Health Behaviour: | 2 | PL |
| | Stage theories of health behaviour—conceptual and methodological issues; | | |
| | In search of how people change—application to addictive behaviours; | | |
| | Reasoned action and social reaction—willingness and intention as independent predictors of health risk; | | |
| | Health information processing: | 2 | PL |
| | Understanding the impact of risk factor test results: insights from basic research programme; | | |
| | Defensive processing of personally relevant health messages | | |
| 3 | Social influence on health and illness: social comparison and social norms | 3 | PL |
| | Social comparison in adjustment to breast cancer | | |
| | Predicting young adult's health risk behaviour | | |
| | Pluralistic ignorance and alcohol use on campus: some consequences of misperceiving the social norm | | |
| | Social comparison and affiliation under threat: effects on | | |

| | Course content | Class* | Method** |
|---|---|--------|----------|
| | recovery from major surgery | | |
| 4 | Social Support and Health and Illness | 3 | PL |
| | Social relationship and health | | |
| | Psychological models of the role of social support in the aetiology of physical disease | | |
| | Psychology of Changing Behaviour— | | |
| | Experimental evidence for stages of health behaviour changes | | |
| | Attributions of responsibility and persuasion | | |
| | Inducing hypocrisy as a means of encouraging to change behaviour | | |
| | Systematic influence of gain-and-loss-framed message on interest in and use of different types of health behaviour | | |
| 5 | Culture, Personality and Health | 3 | PL |
| | The "Disease-Prone Personality": a meta-analytic view of the construct | | |
| | Hostility and health: current status of a psychometric hypothesis | | |
| | Dispositional optimism and recovery from coronary artery bypass surgery: the beneficial effect on physical and psychological well-being | | |
| | Writing about emotional experiences as a therapeutic therapeutic process | | |
| | Cultural/social cognition—attitude, prejudice and stereotyping and its relation to healthy/unhealthy community relations and behaviour: understanding the roots of community violence | | |
| | Culture, personality and its relation to self-harm or suicide – assessment and prediction of suicide in cultural context | | |
| 6 | Strategy for the prevention of mental illness and promotion | 1 | PL |

Course content Class* Method**

of community mental health

Primary prevention, secondary prevention and tertiary prevention

Alternative models of prevention: Research on prevention

Methods of community level intervention for change and 2 development

2 PL

Consultation

Applying the knowledge of political psychology (e.g., to reveal the roots of powerlessness or learned helplessness of a segment of people in a community), and thus restore the power balance, and thus overcome the learned helplessness of the marginalized group

Building healthy community and promoting community mental health through accumulating indigenous knowledge and negotiating the right balance of power among the community sub-groups, and by empowering them from within and between

Community alternatives to hospitalization

Training of community psychologists, community mental health workers and related paraprofessionals

The future of prevention

Total 25

Note: *Per class 90 minutes; ** PL= Participatory lecture

Suggested readings

Salovey, P. & Rothman, A. J. (2003). Social Psychology of Health. Psychology Press, New York.

Feldman, J. (Eds...). Community Mental Health Journal. Springer.

Kressel, N.J. (1993). Political Psychology: Classic and Contemporary Readings. Paragon House Publishing, New York.

CPSY 703.3: Paediatric and Clinical Child Psychology

(Optional, 2 Credits, 50 Marks)

Course Objective

The major theme and objectives of this course in would be to explore empirical and/or clinical evidence to clarify and understand the following issues related to Paediatric and Child Clinical Psychology.

Specific Objectives

This course aims to help the students learn

- 1. Comprehend similarities and differences between paediatric and clinical child psychology.
- 2. Understand differences in service delivery modes in response to the need of the children and adolescents.
- 3. Conceptualize the major assessment methods used in paediatric and clinical child psychology.
- 4. Conceptualize major forms of interventions employed in helping children and adolescents.
- 5. Understand the importance and strategy relevant to assess effectiveness of intervention with children and adolescents.
- 6. Conceive the future trends for paediatric and clinical child psychology—in the context of Bangladesh, cross-culturally, and internationally.
- 7. Understand his/her role in enhancement of service development in paediatric and child psychology through contribution in policy and practice.

Instructional Strategies

Participatory Lecture (30)

Group Discussion/ Problem solving (infused into the lecture classes)

Assignment (1-2) (i.e., seminar presentation based on field study)

Hands on training

Assessment Methods

Assessment - Please add list

Final Examination - 50 marks (examination after completion of teaching period)

Learning Outcomes

After completing this course, the students will be able to

- 1. Draw comparison between paediatric and clinical child psychology.
- 2. Distinguish between differ service delivery mode in working with children and adolescents.
- 3. Demonstrate skills in assessment methods used in paediatric and clinical child psychology.
- 4. Use major forms of interventions that are employed in paediatric and clinical child psychology
- 5. Conduct the evaluation on the effectiveness of the major interventions used in paediatric and clinical child psychology
- 6. Appreciate changes in the trends for paediatric and clinical child psychology—in the context of Bangladesh, cross-culturally, and internationally.
- 7. Take a role as a consultant to the professional field of paediatric and child clinical psychology- nationally and internationally.

| | Content | Class* | Method** |
|---|---|--------|----------|
| 1 | The perspectives of development | 3 | PL |
| | Normal development | | |
| | Developmental disorders | | |
| | Developmental psychopathology | | |
| | Development under impoverished conditions | | |
| | Ensuring optimal development and recovery form psychopathology | | |
| 2 | Overview of paediatricand Clinical Child psychology | 6 | PL |
| | Historical development of paediatric and clinical child psychology | | |
| | Cross-cultural perspectives | | |
| | Training and competencies of paediatric and clinical child psychologist | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Professionals roles of paediatric and clinical child psychologist | | |
| | Models of illness, health promotion and behaviour change | | |
| | Cross cutting issues in paediatricand Clinical Child psychology | | |
| 3 | Practice context for the paediatricand Clinical Child psychology | 3 | PL |
| | Consultation and collaboration in hospital settings | | |
| | Working in a multidisciplinary team | | |
| | Comorbid medical conditions | | |
| | Organizational issues | | |
| 4 | Practice issues in paediatricand Clinical Child psychology | 4 | PL |
| | Assessment models and standards | | |
| | Intervention models and supervision | | |
| | Communication and referral | | |
| | Equity in practice: economic, ethnic, and cultural disparities | | |
| | Ethical issues in clinical practice | | |
| | Practice in Bangladesh context | | |
| 5 | Policy issues in paediatricand Clinical Child psychology in Bangladesh | 3 | PL |
| | Legislations relevant to clinical child psychology practice in Bangladesh | | |
| | Comparative analysis of local, regional and international laws | | |
| 6 | Future direction in paediatric and clinical child psychology | 3 | PL |
| | Global and international trends | | |
| | Innovation and indigenization | | |
| | Research agenda | | |
| | Total | 22 | PL |

Note: *Per class 90 minutes; **PL= Participatory lecture

Suggested readings

Roberts, Michael C., Brandon S. Aylward, and Yelena P. Wu, eds. (2014) Clinical practice of paediatric psychology. Guilford Publications.

Wyse, D. (2004). Childhood Studies: An Introduction. Blackwell Publishing, London.

Herbert, M. (199, 2nd Ed.). Clinical Child Psychology: Social Learning, Development and Behaviour. John Wiley & Sons, New York.

Lyman, R. D.; & Hembree- Kigin, T. L. (1994). Mental Health Interventions with Preschool Children. Plenum Press, New York.

CPSY 704.1: Advancement in Psychotherapy: Theory and Practice

(Optional, 2 Credits, 50 Marks)

Course Objectives

This PhD level course will explore and review the models of psychotherapy – starting from the theoretical and philosophical basis of each model to its practice. The course content will focus on the theory of psychopathology, as well as the theory of healing, as described or presented by each psychotherapeutic model. The course will encourage each learner to choose or construct his/her own models of therapy in the cultural context of his/her own clinical practice – at individual level, or at beyond individual small group or larger group level: such as, community, organization or institution.

Specific Objectives

This course aims to help the student to learn

- 1. to develop a critical understanding of the history and interrelationship of knowledge, theory and practice in Psychotherapy.
- 2. the content and the process of psychotherapy specific to each theoretical model
- 3. empirical and practical aspects of psychotherapy
- 4. understands contemporary theories, approaches, strategies, and techniques in psychotherapy which are effective in working with specific populations or client groups.
- 5. case conceptualization with broader application of multiple empirically supported approaches.
- 6. evidence-based treatments and their use in different clinical context and population groups.
- 7. strategies for evaluating psychotherapy outcomes in clinical settings.

Instructional Strategies

Theoretical Lecture (20 hours)

Group Discussion/ Debate / Problem solving

Audio-visual aids, oral presentations

Assessment Methods

Written Assignment (1-2)

Learning Outcomes

After completing this course, the researcher will be able to

- 1. appreciate distinction between process and outcome in psychotherapy
- 2. conceptualize cases using multiple models fitting to the unique context of the client group
- 3. identify, anticipate and address potential individual, social, and systemic barriers to treatment effectiveness.
- 4. utilize therapeutic response and dynamic feedback from patient in determining, continuing, and modifying specific therapeutic approach and technique
- 5. maintain a guiding conceptual framework for treatment and be flexible to accommodate necessary changes if required
- 6. identify the empirical and practical aspects of psychotherapy
- 7. apply intervention techniques in contextually sensitive manner.
- 8. describe professional roles, functions, and relationships with other mental health service providers.
- 9. comprehend the of ethical standards and related entities, and applications of ethical and legal considerations in professional psychotherapy
- 10. practice in a consistent, reflexive and ethical manner

| | Content | Class* | Method** |
|---|--|--------|----------|
| 1 | Introduction: | 2 | TL |
| | Which psychotherapy? Irreconcilable psychotherapies? | | |
| | Historical perspective: the evolution of psychotherapy | | |
| | Principles of theory and practice | | |
| | Adopting an approach to theory | | |
| | Steps in personal theory building | | |
| 2 | Major Theory Groups: | 4 | TL, AS |
| | Psychoanalytic approaches | | |

| | Content | Class* | Method** |
|---|---|--------|----------|
| | Phenomenological approaches | | |
| | Behavioural and Cognitive-Behavioural approaches – third wave CBT (e.g., ACT, MBCT, MBCBT, MCT) | | |
| | Systems approaches | | |
| | Challenges to the current psychotherapeutic paradigms | | |
| | Integrating psychotherapy skills in clinical practice | | |
| 3 | The Process of Psychotherapy: | 3 | TL, GD |
| | The therapeutic relationship | | |
| | Relationship building strategies and models | | |
| | Assessment and diagnosis in psychotherapy | | |
| | Strategies for facilitating and evaluating change | | |
| | Barriers to actualizing relationships | | |
| 4 | Diversity in Psychotherapeutic Models: | 6 | TL |
| | Rational Emotive Behaviour Therapy | | |
| | Existential Psychotherapy | | |
| | Logo Therapy | | |
| | The Communicative Approach | | |
| | Experiential Psychotherapy | | |
| | Multimodal Therapy | | |
| | Transpersonal Psychotherapy | | |
| | Brief Focal Psychotherapy | | |
| | Conversational Model | | |
| | Cognitive Analytic Model | | |
| | Dialectical Behaviour Therapy (DBT) | | |
| | Medistic Psychotherapy | | |
| | Hypnotherapy and Hypnoanalysis | | |
| 5 | Psychotherapy After 'Schoolism' | 3 | TL |

Eclectic Vs. Integrative Psychotherapy

Integrating psychotherapies

Constructing indigenous psychotherapy

Psychotherapy research—process research and evaluation research

6 Psychotherapy practice in diverse setting with different 4 TL client groups

Child psychotherapy

Couples and family therapy

Therapeutic communities

Forensic psychotherapy

Psychotherapy and general practice

Ethical dilemma in psychotherapy practice and research

The relevance of research for practitioners

7 Professional issues in psychotherapy practice

4 TL

Who is a psychotherapist?

Relation of psychotherapist with other mental health professionals—psychiatrist, clinical psychologist, counselling psychologist, counsellor, psychiatric social worker, general social worker, occupational therapist, and others (e.g., speech and language therapist, applied developmental psychologist, school psychologist, educational psychologist etc.)

Psychotherapy and human values

Development of values and meaning

Influence of values in psychotherapy

Increasing client ethical-moral behaviour

Psychotherapy and transcendental values

Growth problem in confronting values problem

Accountability and ethical behaviour

Values in counselling/psychotherapy

Ethics and moral reasoning

Applying moral principles and ethical codes: from theory to practice

Current trends in psychotherapy

Methodological diversity in psychotherapy research

Goals, values and self-help

New roles and work setting for psychotherapists

Emphasis on prevention and skills training

Alternative models of delivery—time limited psychotherapy, non-professional psychotherapist, telephone psychotherapy, psychotherapy on the internet

The politics of psychotherapy: empowerment, control and differences – the nature of social and interpersonal power, psychotherapy with economically disadvantaged people, psychotherapy and religious commitment

8 How to Ensure Quality in Psychotherapy Practice? 2 TL

The philosophy of psychotherapy—the relevance of philosophy for counselling and psychotherapy

The value of conceptual analysis for counsellors and psychotherapists

The skills and qualities of effective psychotherapists:

Interpersonal skills

Personal beliefs and attitudes

Conceptual ability

Personal "Soundness"

Mastery of techniques

Ability to understand and work within social systems

The journey of a psychotherapist: A developmental model of psychotherapist competence

Training and supervision in psychotherapy

Organizational context of psychotherapy

Past, present and future of counselling, psychotherapy, clinical psychology, and other applied psychologies—evaluation of the past, present and future trend in historical and practical (local as well as global) context

Mind and society—psychopathology and healing: analysis from psycho-socio-politico-cultural dimensions and perspectives

Total 28

Note: *Per class 90 minutes; **TL= Theoretical lecture, **GD= Group discussion

Suggested readings

Brammer, L. M.; Abrego, P. J.; &Shostrom, E. L. (1993). Therapeutic Counselling and Psychotherapy. Prentice Hall, New Jersey.

Feltham, C. (1997). Which Psychotherapy. Sage Publications, London.

Stein, S. M.; Haigh, R.; Stein, Jenifer. (1999). Essentials of Psychotherapy. Butterworth Heinemann, Oxford.

Power Mick. (2010). Emotion Focused Cognitive Therapy. Willy-Blackwell, London.

Small, Leonard. (1979). The Briefer Psychotherapies. Brunner/Mazel, Publishers, New York.

Ahmed, M. U. (1984). Learn to Hypnotize and Cure. Psyche Prokashoni, Azimpur, Dhaka.

Calvert, Teg. (2011). Hypnotherapy for a Better Life. Teach Yourself, London.

Deurzen, E. V.; & Arnold-Baker, C. (2005). Existential Perspectives on Human Issues: A Handbook for Therapeutic Practice. Palgrave Macmillan, China.

CPSY 704.2:Experimental Psychopathology

(2 Credits, 50 Marks)

Course Objectives

This course is aimed at understanding the role and use of experimentation to generate knowledge on the nature and mechanism of psychopathology. It will require integration of knowledge and skills acquired in other courses specifically related to research and intervention to comprehend mental disorders and underlying processes.

Specific Objectives

This course aims to help the students learn

- 1. Scope of experimentation in psychopathology.
- 2. experimental paradigms for the investigation of abnormal behaviour and processes
- 3. methodological problems typical for experimental research in psychopathology
- 4. Variety of methods and research designs appropriate for experimental psychopathology research
- 5. experimentation to test causal relations associated with psychopathology
- 6. trans-diagnostic approach in the aetiology, maintenance and treatment of mental disorders
- 7. respective utility of 'trans-diagnostic' perspective and traditional 'disorder-focused' perspective.

Instructional Strategies

Participatory Lecture

Group Discussion

Assignment

Assessment Methods

Examination - 50 marks

Learning Outcomes

After completing this course, the students will be able to

1. Comprehend the scope of clinical psychological sciences: methods and areas of investigation

- 2. Apply experimental paradigms for the investigation of abnormal behaviour in cognition and emotion
- 3. Develop experimental designs to test the causal relations of trans-diagnostic processes in the aetiology, maintenance and treatment of mental disorders
- 4. Write critical review papers with focus on methodological problems typical for experimental research in psychopathology
- 5. Appreciate the perspective shifting from a 'disorder-focus' to a 'trans-diagnostic' (and vice versa).
- 6. Apply the variety of methods and research designs appropriate for experimental psychopathology research
- 7. to design experiment in testing causal relations associated with psychopathology
- 8. to critically review papers with focus on methodological problems typical for experimental research in psychopathology
- 9. to shift from a 'disorder-focused' perspective to a 'trans-diagnostic' perspective (and vice versa).

| | Course content | Class* | Method** |
|---|--|--------|--|
| 1 | Introduction to experimental psychopathology Conceptual foundation of experimental psychopathology History of experimental psychopathology | 4 | Lecture, DS, AS and PS |
| 2 | Cognitive behavioural processes and neurobiological processes in mental disorders | 6 | Lecture, training |
| 3 | Experimental design and assessment of various indicators of psychopathology | 6 | Lecture, Training, Roleplay, AS |
| 4 | Experimental intervention and outcome measures of recovery to get the foundation for an evidence-based practice approach. | 6 | Lecture, demonstration, practice |
| 5 | Understanding several trans-diagnostic approaches those cut across disorders | 4 | Lecture, training, AS |
| 6 | Experimental Psychotherapy and its prospects | 4 | Lecture, AS |

| Course content | | Class* | Method** |
|----------------|-------|--------|----------|
| | Total | 30 | |

Note: *Per class 90 minutes; **PS= Presentation by students, AS= Assignment, DS= Discussion

Assignment: Writing trans-diagnostic case report for class presentation and discussion [Equivalent to 6 class]

Suggested readings

Harvey, A., Watkins, E., Mansell, W., & Shafran, W., (2004). Cognitive behavioural processes across psychological disorders: A trans-diagnostic approach to research and treatment. Oxford University Press.

CPSY 704.3: Psychology of Self and Interpersonal Relationship

(Optional, 2 Credits, 50 Marks)

Course objectives:

This course is aimed to provide PhD students deeper understanding on the origin, development and maintenance of self and relationship. The course will also focus on the psychopathology of the self and interpersonal relationship—and psychotherapeutic procedures to heal self and relationship pathology.

Specific Objectives

This course aims to help the students learn

- 1. Understanding self and its philosophical underpinning.
- 2. Conceptualize the process of development of the self and relevant influences in its development.
- 3. Conceptualize the cognitive, social and emotional process involved in the construction of self.
- 4. Understanding relation between perception of self and its influence in social interaction.
- 5. Understand perspectives of self in the oriental and occidental philosophies.
- 6. Understand development, manifestations and maintenance of pattern of self and the dynamics of its interaction with socio-cultural context.
- 7. Conceptualize the process and importance of healthy development of self.
- 8. Conceptualize the process and importance of development and maintenance of healthy relationship.
- 9. Understand the psychopathology of the self and interpersonal relationship and relevant psychotherapeutic procedures to heal self and relationship pathology.

Instructional Strategies

Participatory Lecture

Group Discussion

Assignment

Assessment Methods

Examination - 50 marks

Learning Outcomes

After completing this course, the students will be able to

- 1. Appreciate the conceptualization of self as a construct
- 2. Describe the developmental process of self.
- 3. Outline the role of multiple factors in the development of self and relationship.
- 4. Recognize the influence of attachment on development of self.
- 5. Identify the models to understand the self and relationships.
- 6. Appreciate the process of forming and maintaining relationship.
- 7. Recognize the dynamics between self and relationships
- 8. Describe the psychopathology of the self and interpersonal relationship.
- 9. Appreciate the importance of healthy development of self and relationship.
- 10. Outline the preventive processes against pathological development of self and relationship.
- 11. Recognize psychotherapeutic procedures to heal self and relationship pathology.
- 12. Demonstrate the knowledge relevant to self, relationship and their interactions in social context.

| | Course content | Class* | Method** |
|---|--|--------|----------------------|
| 1 | Psychology of self Defining self | 4 | PL, DS, AS and PS |
| | Global versus domain specific evaluation | | |
| | I-self versus Me-self | | |
| | Antecedents of the self as a cognitive and social construction | | |
| | Consequences of self-development | | |
| | Historical roots of contemporary issues involving self-development | | |
| | Contribution of the symbolic interactionists | | |
| | Self-psychology in the 20 th century | | |
| | Self-regulation | | |

Course content Class* Method**

Motivation and the self

Self-presentation

Culture and the self

2 Attachment and self-development

6 PL

Attachment and its measurement

Attachment terminology across the life span

Origins and context of attachment theory

Clinical significance and applications of attachment: effect of child abuse on I-self and Me-self processes

Attachment, the reflective self, and borderline status: the predictive specificity of the adult's attachment interview, and pathological emotional development

Child maltreatment and attachment organization: implications for intervention

Attachment and psychopathology of the self and relationship

Self-development across developmental stages

The normative development of self-representations during childhood and adolescence

The developmental emergence of self-conscious emotions

The content, valence, and organization of selfevaluative judgments

Discrepancy between real and ideal self-concepts

Social sources of individual differences in selfevaluation

3 Self and Relationship

6 PL

Interdependence theory

Self-disclosure

Intimacy – love and addiction

Course content Class* Method**

Balance of power

Satisfaction and commitment

Reactions to dissatisfaction

Interpersonal conflict and its resolution

Gender, self and relationship

Theoretical perspectives on gender

Comparing the social behaviour of women and men

Changing roles for women and men

Gender gap in high-tech careers

Sources of anger and aggression in close relationship

Intimate violence and its resolution

4 Models to understand self and relationship

6 PL

Causes, correlates and consequences of global self-worth – understanding depression and sociality

Authenticity of the self

Historical emergence of interest in false-self behaviour

Contemporary interest in false-self

Lack of voice within the school setting

Level of voice by gender – in relational context; does voice differ by grade level or gender? Gender orientation; Impact of support for voice on the expression of opinion; support and gender orientation

Liabilities of lack of voice as a form of false-self behaviour

Meaning as a context of human relationships and vice versa

Social emotions: communication and feeling about other people

Interaction and daily life in long-term relationships

Relationships with relations: families and socializations

| Course content | Class* | Method** |
|----------------|--------|----------|
| | | |

5 Intervention strategies to reconstruct self and healthy human 4 relationships

Society and personal growth

From addiction to love

Recent studies in attachment: overview, with selected implications for clinical work

Autonomy and connectedness as dimensions of the self

Western versus eastern view of the self

Three relationship styles – self-focused autonomy, other-focused connection, and mutuality

Who pairs with whom?

How partner support influences the ability to be oneself?

Interventions to promote adaptive self-evaluations

Intervention strategies directed at cognitive determinants

Intervention strategies directed at social factors influencing self-evaluations

Need for effective program evaluation (e.g., "do not put the methodological cart before the theoretical horse")

Interventions to promote healthy human relationships – current state of art and topics for future investigation

Total 20

Note: *Per class 90 minutes; **AS= Assignment, **PS= Presentation by students, **PL= Participatory lecture, **DS= Discussion

Suggested readings

Duck, S. (1998). Human Relationships (3rd Eds). Sage Publications, London.

Goldberg, S., Muir, R., & Kerr, J. (1995). Attachment Theory: Social Developmental and Clinical Perspectives. The Analytic Press, London.

PL

- Harter, S. (1999). The Construction of the Self: A Developmental Perspective. The Guildford Press, New York.
- Peele, S. & Brodsky, A. (1977). Love and Addiction. Abacus, London.
- Taylor, S. E., Peplau, L. A., & Sears, D. O. (2000). Social Psychology (10th Eds). Prentice Hall, New Jersey.
- Lewis, M. D. and Granic, I. (2000). Emotion, Development, and Self-Organization: Dynamic System Approaches to Emotional Development. Cambridge University Press, Cambridge, UK.
- Rosenberg, M. B. (2003). Nonviolent Communication: A Language of Life. Vigarai Publications, Beschi College, Dindigul, India.
- Forward, S.; & Buck, G. (1991). Obsessive Love: when it hurts too much to let go. Bantham Books, New York.

CPSY 705.1: Philosophy of Research Design

(Mandatory, Non-credit)

Course Objective

This course is designed to provide the PhD students a deeper understanding of the philosophy, purpose, and reasoning underlying any research activities.

Specific Objective

This course aims to help the students learn

- 1. role of research in the field of knowledge.
- 2. the reasoning behind research and research designs.
- 3. interplay of philosophical perspectives, ontology, epistemology and methods in conceiving and conducting research.
- 4. qualitative, quantitative and mixed method designs and their usage.
- 5. ideas and strategies around indigenization of knowledge.
- 6. Core ethical principles and their ramifications in research with human and animal subjects.

Instructional Strategies

Participatory Lecture

Group Discussion

Assignment

Assessment Methods

Assignment (Non-credit)

Learning Outcomes

After completing this course, the students will be able to

- 1. demonstrate their understanding regarding the role of research in the field of knowledge
- 2. appreciate the role of philosophical perspectives, ontology, epistemology and methods in conceiving and conducting research

- 3. utilize qualitative, quantitative and mixed method designs as suitable to a research project
- 4. appreciate the need for indigenization of knowledge
- 5. demonstrate understanding of different strategies adopted in indigenization of knowledge
- 6. appreciate the core ethical principles and their utilization in protecting human and animal subjects in research
- 7. demonstrate skills in understanding and conduction of research

Course Content and Class Distribution

| | Course content | Class* | Method** |
|---|---|--------|-----------------|
| 1 | Foundation of science | 2 | Lecture, DS, AS |
| 2 | Spectrum of research | 3 | Lecture, DS, AS |
| 3 | Research Paradigms | 3 | Lecture, DS, AS |
| 4 | Logic of research design | 3 | Lecture, DS, AS |
| 5 | Methods | 5 | Lecture, DS, AS |
| | a. Quantitative research | | |
| | b. Qualitative research | | |
| | c. Mixed method research | | |
| 6 | Indigenization of Knowledge | 5 | Lecture, DS, AS |
| 7 | Ethical issues in Research with Human and Animal Subjects | 3 | Lecture, DS, AS |

Note: *Per class 90 minutes; **DS= Discussion, **AS=Assignment

Suggested readings

Kim, U., Yang, K.-S., & Hwang, K.-K. (2006). Indigenous and cultural psychology: Understanding people in context. New York: Springer.

Liang Tien, Amy Davis, Thomas H. Arnold, G. Andrew H. Benjamin (2012) Ethics for Psychologists: A Casebook Approach. SAGE Publications, Inc.

- Dee Danchev & Alistair Ross (2013) Research Ethics for Counselors, Nurses & Social Workers. SAGE Publications Ltd.
- Michael Crotty (1998) The Foundations of Social Research: Meaning and Perspective in the Research Process. Sage

Russel, B. (2001). The Scientific Outlook. Routledge, London.

Somekh & Lewin (2011). Theory and Methods in Social Research, 2nd edition, SAGE

Appendices for MS, MPhil and PhD in Clinical Psychology

A copy of this record must be retained by the student for the purpose of examination, supervision and clinical audit.

This record should be initialed by clinical supervisor at periodic intervals and should always be initialed at the end of treatment.

Please write clearly according to the prescribed format provided below. This is a permanent record. This record must be briefly filled in to summarize each contact with the patient.

This record contains two parts. Part I is a record of patient details. Part II is the treatment record itself, for which continuation sheets should be used as necessary.

CONFIDENTIAL PSYCHOLOGY TREATMENT RECORD

| Part I. Patient | : Details | | | |
|-----------------|---------------|-----------------------|---|--------------------------|
| Surname | : | | Sex: | Number: |
| Forenames : | | | | |
| Referred by | : | | | |
| Date of Birth | : | Age: | Marital status: | |
| Address | : | | | |
| | | | | |
| Part II. Treatr | nent Record | | Patient Name: | |
| Date | Nature of | Summary note | | Sup. |
| | Contact * | | | Initial |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| * 1 face to fa | ce contact 3 |) telenhone call 3 (| correspondence, 4. meetin | gs with family or other |
| ±. 1000 to 10 | ac contact, 2 | cerepriorie can, o. c | σ | be with fairing of other |

relevant persons, and 5. meetings with other professionals.

Please write clearly. It is a permanent record and contains two parts. Part I in a list of all your clinical patients. Part II is a list of all other relevant clinical work that you do apart from direct clinical work with individual patients. This may include running or participating in a group, preparing handouts or information sheets to give to patients, giving lectures to other health staff, assisting with clinical research projects on your unit, attending ward rounds, and so forth.

This log will be used for examination purposes and also for clinical audit.

CONFIDENTIAL LOG OF CLINICAL EXPERIENCE

Part I. Log of individual patients (Please use continuation sheets as necessary.

| Name | Sex | Age | Problems | No of Session | Treatment |
|------|-----|-----|----------|------------------|-----------|
| | | | | | |
| | | | | | |
| | | | | | |

Part II. Other clinical work (use continuation sheet as necessary).

| Date(s) | Summary of work | | |
|---------|-----------------|--|--|
| | | | |
| | | | |
| | | | |
| | | | |

Supervision session must be reported according to the prescribed format (provided below). A copy of this record must be retained by you for the purpose of examination, supervision and clinical audit.

CONFIDENTIAL

SUPERVISION SESSION REPORT

| SUPERVISION | 2F22ION | REPORT | |
|--|-----------------------------------|--------------------|---------------|
| Name of trainee: | Batc | h: | Date: |
| Supervisor: | Cun | rrent caseload (A- | + B): |
| A. Ongoing case: | case: | C. Upco | ming case: |
| | | Adult | Child |
| Number of sessions conducted after last super | rvision | | |
| Number of DNA sessions after last supervision | on | | |
| Number of cases for which supervision is der | manded | | |
| Number of cases supervised | | | |
| Placement wise current caseload: | | | |
| Placement Case load | New assigni | nent(s): | |
| i) | | | |
| ii) | | | |
| iii) | | | |
| iv) | Comments | on last assignme | nt(s): |
| Participation in other clinical activities after last supervision (Put '√' for yes 'X' for no) | | | |
| \square Case Observation (N =) | | | |
| Group therapy | | | |
| Social skills training group | General comments from supervisor: | | nomicom: |
| Case presentation (self) | General con | mients from sup | ici visor. |
| Clinical Meeting (Dept. Thursday) | | | |
| Journal Club | | | |
| Group Supervision | | | |
| Others (Specify) | | | |
| 9.5 | | | |
| Total supervision time: | Superviso | r's Signature: | |
| Appendix - 4: Supervisor's Report | | | MS & MPhi |

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CONFIDENTIAL SUPERVISOR'S REPORT

| Student: | |
|--------------------|-------------------------|
| Supervisor: | |
| Name of placement: | Dates of Placement :to: |

Please comment on each of the following areas:

1. Professional behavior

Has the student been reliable, and trustworthy? Has he respected the patient and followed the code of conduct? Has the student formed good working relationships with colleagues? With patients?

2. Work load

Has the student carried an appropriate work load? and managed it efficiently? Has he kept adequate records of his work?

3. Supervision

Have they attended regularly for supervision? Have they listened and responded to help and advice? Have they been open and honest in reporting difficulties and problems? Have they been prompt in seeking advice? Have they been able to take away general advice and apply it to the specific patient?

4. Knowledge

Have they displayed knowledge of the current literature? Have they read carefully about the problems they treat? Are they able to apply knowledge to the particular patient?

5. Assessment

Does the student assess problems carefully and thoroughly? Is he/she able to make a Psychological formulation of the problem? Does he/she integrate academic knowledge into this formulation? Does he/she reformulate as necessary as treatment progresses?

6. Treatment

Is treatment planned properly? and carried out diligently? Is treatment terminated carefully and sensitively?

7. Independence

Does the student show the level of independent thought and action appropriate to his/her level of training? Is there evidence of creative and innovative problem solving and thinking?

8. List the student's strengths:

9. List the areas that need attention:

Supervisor:

Coordinator:

PLACEMENT CONTRACT

| | PLACEIVIENT CONTRACT |
|---|---|
| Supervisee: | |
| Supervisor: | |
| Name of placement: | Dates of Placement:to: |
| To attend reliably for supe To keep an accurate and Records and Log of Clinical To report accurately and p | up to date record of all clinical work on the Treatment I Experience promptly on patient progress, especially any problems that |
| The supervisor agrees: To undertake the tasks of some supervisor. To be available to the supervisor. To refer patients to the supervisor. At regular intervals, at lease treatment Records. | supervision ervisee should advice be required pervisee, or to arrange for such referrals to be made ast every two weeks, to scan and initial the supervisee's |
| To undertake, centrally, sk To have central, regular, gi To visit the placement peri To make a special visit sho | ning in the areas relevant to referrals fills training in psychological techniques and assessments roup supervision of the student's clinical work. iodically to monitor progress fuld problems arise wer both supervisee's and supervisor's questions abour |
| Signed By: | |
| Supervisee: | date: |
| | |

date:

date:

All student admitted on to the M. S. in Clinical Psychology are required to sign a code of conduct (provided below).

Student must sign and submit the document to the department before initiation of their clinical work.

CODE OF CONDUCT

Clinical Psychologists agree to practice according to a code of conduct covering professional behavior and the conduct of treatment and research.

Clinical Psychologists, both qualified and in training:

- 1. will conduct them in a manner so as not to bring themselves or their profession or their professional colleagues into disrepute
- 2. will not claim competencies that they do not possess.
- 3. will recognize the boundaries of their own competence and seek supervision or advice accordingly
- 4. will recognize when they themselves cannot help a patient and if appropriate, make a referral to those with the relevant expertise
- 5. work within the boundaries of knowledge and not undertake work that has no scientific credibility
- 6. will not make unjustifiable claims for the efficacy of their methods
- 7. will endeavor to keep up to date with new knowledge and competencies throughout their career
- 8. will not take any physical, sexual or emotional advantage of their patients
- 9. will not take any advantage whatsoever of the trust and confidence placed in them by patients and colleagues
- 10. will keep all patient identified material safe and secure
- 11. will treat all patient material as confidential to the therapeutic team

- 12. will only break confidence in exceptional circumstances when, in their best judgment, the physical or emotional safety of either the patient or the public is at risk. An attempt should be made to discuss the situation with a disinterested, experienced colleague before breaking confidence.
- 13. will not practice under conditions where their judgment is liable to be impaired by virtue of drugs, alcohol, illness or emotional state or any other reason, and will seek help or advice as appropriate
- 14. will conduct research in an ethical manner, obtaining informed consent and voluntary participation, and not acting so as to deceive the patient, debriefing them at the earliest possible stage about the true nature of the study
- 15. will notice and report any person who appears to be breaking this code of conduct, so that the situation may be reviewed and properly dealt with.
- 16. will act at all times as an example to clinical psychologists of more junior standing, and be prepared to help, advise and supervise

| I agree to follow this code of conduct: | |
|---|-------|
| Name: | |
| Signature: | Date: |
| | |
| Witnessed by the Coordinator: | |
| Coordinator's signature: | Date: |

The students are required to submit three case reports using the following guidelines.

A case history is a short document of no more than four typed pages which summarizes the clinical work with an individual patient. It will include:

- 1. A description of the patient
- 2. The presenting symptoms
- 3. A brief review of the relevant literature
- 4. A summary of the assessment interview(s)
- 5. A formulation of the problem in psychological terms
- 6. A description of the treatment(s) used
- 7. A description of outcome
- 8. Other material thought to be relevant
- 9. References cited

Special note on case history requirements for MS and MPhil:

MS : Three cases of any type.

MPhil Year 1 : Two child case and one adult case.

■ MPhil Year 2 : Two cases from specialized placement and one other case.

Clinical Skills Training

Clinical Skills Training for MS students:

As mandatory requirement, all students, at the beginning of their MS studies, will undergo an elaborately designed series of workshops on clinical skills training. These workshops will equip students with skills and confidence to deal with clients in different mental health settings. The training will encompass the following key areas of clinical psychology:

- Introduction to basic concepts and skills of counseling & psychotherapy
- Clinical interviewing skills e. g. rapport building, empathy, active listening, paraphrasing, summarizing.
- Psychometric and clinical assessment
- Formulation
- Setting goals of treatment
- Choosing the right psychological intervention
- Ending therapeutic relationship
- Special skills required to work with children, family, couples or any dyad.
- Ethical & professional issues: adherence to code of conduct, maintaining confidentiality, supervised training

Clinical Skills Training for MPhil students:

As mandatory requirement, MPhil students will receive advanced clinical training at Year - I. The content will mainly focus on skills necessary to work with child and adolescent clients. However, additional emphasis will be given on family and marital problems.

MPhil students will also receive clinical training relevant to specialized placement issues such as, substance dependence and trauma.

Clinical Training on Specialized Topics:

Students from MS and MPhil course will attend workshops and training on specialized clinical topics by experts on the fields.

REQUIREMENTS FOR THE RESEARCH PROPOSAL

This is to be completed and submitted during the enrolment to MPhil or PhD course. MS student will submit the proposal within the first three month of their enrolment into course. It may be a "paper study" or a proposal for the research study to be carried out during the course of study in MS, MPhil or PhD.

A typical research proposal might contain:

- 1. Title: Giving the main thrust of the study
- 2. **Synopsis/Abstract:** Giving the skeleton of the proposed study
- 3. Brief introduction: Motivating the study and justifying the research need
- 4. Aims or questions: Defining what the study is to find out
- 5. Outline of design: Explaining the choice of design
- 6. **Measures:** Justifying the measures chosen
- 7. **Analysis:** An outline of statistical methods to be used.
- 8. Ethical consideration: Including risks and consent
- 9. **Time scale:** A realistic plan for the study
- 10. Resources: Equipment, materials and funds required
- 11. References

The thesis must be prepared in English following the APA formatting guideline 6th edition. It should be typed in double spaced on one side of the paper (A4 sized). The left margin should not fall below 1. 2 inch, while the other margins can be 1inch. A standard 12 size font should be used for writing.

The thesis should have the following contents in the same order of presentation

- 1. Title Page
- 2. Declaration by Supervisor
- 3. Declaration by Student
- 4. Abstract (add 3-6 keywords at the bottom of abstract)
- 5. Table of Contents
- 6. List of Tables
- 7. List of Figures
- **8. List of Appendices** (if applicable)
- 9. Acknowledgements
- 10. Dedication (optional)
- 11. Introduction
- 12. Method
- 13. Results
- 14. Discussion
- 15. Conclusion
- 16. References
- **17. Appendices** (where applicable)

Special Notes:

MS Thesis:

- Word limit for MS thesis is 12,000 20,000 words.
- The title page should contain the statement: 'Submitted in partial fulfillment of the requirements for Masters in Clinical Psychology awarded by the University of Dhaka.'

MPhil Thesis:

- This is a requirement for MPhil Year II, but it may well have been started in MPhil Year I. The research thesis must be on a topic of clinical or service need and must be related directly to the work of the clinical psychologist.
- Length of the thesis should fall between 20,000 40,000 words
- The title page should contain the statement: 'Submitted in partial fulfillment of the requirements for the Degree of MPhil in Clinical Psychology awarded by the University of Dhaka.'

PhD Thesis:

- This is a requirement to be submitted in the PhD final year. The thesis must be on a topic of clinical or service need and must be related directly to the work of the clinical psychologist.
- Length of the thesis should fall between 40,000 70,000 words
- The title page should contain the statement: 'Submitted in partial fulfillment of the requirements for the Doctor of Philosophy in Clinical Psychology awarded by the University of Dhaka.'

Requirements to be Fulfilled in MPhil Year-I

A. Major focus of clinical placements in MPhil Year-I

The major focus of clinical placement will be Child Mental Health, which should be spread over variety of child problems, e. g.:

- a. Child psychiatric problems
- b. Child health problems
- c. Learning disability
- d. Underprivileged and street children
- e. Emotional, behavioral and learning problems of normal children at schools
- f. Abused and neglected children in broken homes, dysfunctional family environment, or in a regimented institution.

Each student will have to submit 2 child case reports, in addition to log of clinical works, placement reports and reports on other direct or indirect clinical experiences.

B. Minor focus of clinical placement in M Phil Year-I

- It is assumed that a student has completed his/her Adult Mental Health placement during MS in clinical psychology, i. e., in the first year as a student clinical psychologist. During the second year of clinical training, i. e., in MPhil Year- I, each student will have to have minor focus of clinical placements on some of his/her remaining work in Adult Mental Health, which might range form cases of Personality Disorder (PD), Drug addiction, Hypochondriasis or Health Anxiety, Post-Traumatic Stress Disorder (PTSD), Chronic Diseases like Diabetes, Cardiovascular Diseases, Cancer etc.
- Each student will have to submit one case report on Adult Mental Health in MPhil Year-I, which must be a more complex case compared to his/her Adult Mental Health placement work of MS Class.
- Each student will have to present 2 child cases in clinical seminars.

C. Requirement for Specialist Placement in MPhil Year- II

Each student has to develop a specialist placement proposal and organize a seminar before the teachers and students of the Dept. of Clinical Psychology.

D. REQUIREMENTS FOR THE RESEARCH CRITIQUE

This is to be completed in Year I and the paper to be critiqued will be supplied by the coordinator.

The critique should cover:

- The area: Is it valuable? why?
- Abstract: Is it understandable? accurate?
- Introduction: Up to date? clear? relevant to the paper that follows
- Aims: Do they follow from the introduction? Are they clear and unambiguous?
- Designs: it appropriate to the aims? Can it answer the questions the study is addressing?
- **Subjects:** Are they described and defined? Is the sampling satisfactory? Is there any issue of drop out? Is the response rate good?
- **Measures:** Are they appropriate to the aims? Are they reliable and valid? Are they described properly? Is the scoring understandable?
- Analysis: Clearly explained? Appropriate to the nature of the data? Fully reported? Is the data fully explored?
- Discussion: Covers the issues? Insightful? Relevant?
- Conclusion: Follow from the data? logical?

Requirements to be Fulfilled in MPhil Year- II

E. Major focus of clinical placement in MPhil Year- II, the Specialist Placement

The Specialist Placement will be one of the major areas of clinical placement done by a student in his/her final year of three- years clinical training, where a student will get opportunity to grow as a clinical leader or consultant in his/her chosen area of clinical interests. Each student will have to develop a written specialist placement plan in consultation with a nominated faculty member or Specialist Placement Supervision Committee. After the approval of the Specialist Placement plan, the student will have to implement the plan under a designated clinical supervisor, within the MPhil Year- II.

- At the end of the Specialist Placement, each student will have to submit a Specialist Placement Report, at least two case reports demonstrating two different intervention technologies, along with log of clinical work, and other direct or indirect clinical experiences.
- One of the major targets of Specialist Placement is to develop in a student
 - a. give away clinical skills i. e., to train other professionals e. g., nurses, social workers, counselors, mental health workers;
 - b. to offer consultation to other professionals e. g., Physicians, Psychiatrists, Neurologists, Surgeons, Lawyers, Social workers, or Director/Manager of a service project etc;
 - c. to conduct some community work through popular presentation of clinical psychology themes, concepts, skills and technologies, by involving a chosen community – results of which should lead to increase in early detection and referral of clients in a designated centre, clinic or service facility;
 - d. to develop organizational and professional skills and knowledge so that a student can emerge as a leader in his/her chosen field of Specialist Placement in the context of Bangladesh.

F. Requirement of two Assessment Reports using standard Psychological Tests during MPhil Year II.

- Each Student will have to develop skills of conducting psychological tests on both child and adult cases, and will have to demonstrate his/her competence in writing assessment reports. Under the supervision of a designated supervisor, each student will have to conduct psychological tests on at least one child case, and one adult case and then submit these two assessment reports professionally to the Department for evaluation.
- Each student in his/her MPhil Year II has to conduct skills training to MS class students, has to serve as a co-supervisor of at least two junior students, and has to conduct at least two workshops with the members of other professionals, patient groups, family members of the patients, NGO or GO workers.

Requirements to be Fulfilled in MPhil Year- I & II

G. Half yearly progress report.

■ The student enrolled in MPhil shall submit a report of their progress in research every six-month immediately after starting of the course activity in MPhil Part I. The report

should be prepared collaboratively with thesis supervisor according to the prescribed format available at the department.

Note: Each student will have to fulfill all the above requirements (A - G) in his/her MPhil Year I & II, failing which, his/her Viva or defense of thesis will remain withheld

Research Progress Report (MPhil) Department of Clinical Psychology

University of Dhaka

| Reporting Period: | to | (mm/yy) |
|----------------------------|----|---------|
| Estimated Submission date: | | |

STUDENT DETAILS

| Registration No. : | Session: |
|--|-------------------|
| Enrolment into program (mm/yy): | Part-I Exam Date: |
| Name: | |
| Address: | Phone: |
| | E-mail: |
| Name of Supervisor: | |
| Supervisor's Phone: | |
| Supervisor's E-mail: | |
| Name of Co-Supervisor: | |
| Co-Supervisor's Affiliation & Designation: | |
| Co-Supervisor's Phone: | |
| Co-Supervisor's E-mail: | |
| Additional supervisors' names (if any): | |
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RESEARCH SUPERVISION DETAILS

| Please complete the table based on supervision within the current reporting period | | | | | |
|---|---|-------------------------|--------------------|------------------------------|--|
| Number of supervision meeting: | | | | | |
| Tot | al supervision tim | e: | Hour | Minute | |
| PRO | OGRESS DETAILS | | | | |
| Ple | ase complete the | table in relatior | n to your last s | ubmitted timeline. | |
| SI. | Planned activi | ty Proposed Timeline | % of Completion | Detailed comment on progress | |
| | | | | | |
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| | | | | | |
| Rep | ADDITIONAL RESEARCH LEARNING ACTIVITIES Report activities such as attending workshop, seminar, conference, etc. performed within the current reporting period. | | | | |
| SI | Date & duration | Brief descriptio | on of the activi | ty | |
| | | | | | |
| | | | | | |
| | | | | | |
| Red | Required support (if any): | | | | |
| De | Declaration of candidate: | | | | |
| I have prepared this report in consultation with my supervisor and all the information provided above is correct. | | | | | |
| Nai | me: | | Sio | nature & Date | |

Supervisor's approval:

I have read the report and to the best of my knowledge, the description provided by the candidate is accurate.

Name: Signature & Date

ATTACHMENT: Please attach the following and other (if any) necessary documents

- Research supervision record form
- Latest Timeline
- Relevant Certificates

PhD Research Progress Report Department of Clinical Psychology University of Dhaka

| Part A: Student Details (Candidate to complete): | |
|--|---------------------------------|
| Registration No. : | Session: |
| Hall: | Year of admission: |
| Year of degree program started: | Current year of degree program: |
| Name: | |
| Address: | |
| Phone no. | |
| E-mail address: | |
| Name of Supervisor: | |
| Supervisor's Designation : | |
| Supervisor's Phone no. | |
| Supervisor's E-mail address: | |
| Name of Co-Supervisor: | |
| Co-Supervisor's Designation : | |
| Co-Supervisor's Phone no.: | |
| Co-Supervisor's E-mail address: | |

| PART B: Detailed Report (Candidate to complete): | | |
|--|---------------------------------------|--------------|
| 1. In the last 6 months have you met or otherwise had contact with your main Supervisor regarding your research project at least once per fortnight? | Yes | No |
| If "No" provide reasons: | | |
| ii No provide reasons: | | |
| | | |
| | | |
| 2. In the last six months, did you meet or otherwise had contact with your associate supervisor(s) regarding your research work?(e.g. | Yes | No |
| fortnightly/monthly/bi-monthly?) | | |
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| | 1 ' | |
| 3. Comment regarding Supervision | | |
| | | |
| Research Progress | | |
| 4. Do you think you have made progress in your research work in last six- | Yes | No |
| months? Briefly outline the progress you have made in relation to your submitted timeline? | | |
| | | |
| If your answer is "No" then explain: | | |
| ii your answer is two their explain. | | |
| Edda a sanda a | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | N 1 - |
| 5. Have you and your supervisors agreed on a any new plan for your research project to progress and complete the degree in time? | Yes | No |
| If your answer is "No" then explain: | | |
| ii your answer is two their explain. | | |
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| 6. Have you received your research ethics approval? | Yes | No |
|---|-----|----|
| If YES, please provide the final approval date and project number: | | |
| 7. Have you completed your year one course work yet? | Yes | No |
| If "No" Please provide details: | | |
| 8. Have you completed your placement development work that you have | Yes | No |
| chosen to do during your PhD program? | | |
| If "No" Please provide details with supports you need from Department: | | |
| 9. On an average, how many hours per week did you work on your research in last six-months? | | |
| 10. On average, how many hours per week will you dedicate to your research work in next six-month? | | |
| 11. What further research training support do you require to complete your research instance, Ethics Application Processing, Research Methods, Research Analysis, Fu Application, Conference Presentation Skills, Thesis Writing, etc.) | | • |
| Please provide details: | | |

| 12. Have you received any award or grants/fun | ding in your last six month for | Yes | No |
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| your research work? | | | |
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| If YES, please provide details. | | | |
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| 13. Do you anticipate any changes that may aff | · · · · · · | Yes | No |
| month of your degree program? (e.g., Job com | mitment, funding,) | | |
| If YES, please provide details. | | | |
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| 14. Have you discussed this with your Supervisor? | | Yes | No |
| 15. Do you wish to make any other comments | 15. Do you wish to make any other comments in relation to your research progres | | |
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| the last twelve months? | in relation to your research progres | ss ove | r |
| the last twelve months? | in relation to your research progres | ss ove | r |
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| Period of current reporting: | | ss ove | r |
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| Period of current reporting: | | ss ove | r |
| Period of current reporting: Date of 1st reporting: | Candidate's Name: | ss ove | r |
| Period of current reporting: | Candidate's Name: | ss ove | r |

| Part C: Supervisor's Comments (Main Supervisor to Complete): | | |
|---|----------|----------|
| 1. Is the information in this report given by the candidate correct? | Yes | No |
| Comment: | | <u> </u> |
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| 2. Do you consider the condidate's progress to be satisfactory in last six month as nor | T Voc | No |
| 2. Do you consider the candidate's progress to be satisfactory in last six-month as per degree program's requirement? | Yes | No |
| 3. Have you discussed research progress with the candidate? | Yes | No |
| Comment: | | |
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| 4. Have you discussed the candidate's progress with other associate supervisor for | Yes | No |
| this report? | 103 | |
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| Comment: | | <u> </u> |
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| About Supervision | | |
| 5. Did the candidate meet you once weekly or fortnightly for supervision work? | Yes | No |
| Comment: | <u>I</u> | |
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| 6. Do have any plan to have a leave from work for more than one month in next six | Yes | No |
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| months? (If yes, please give details on plans to make up the supervisory needs. | | |
| Comment: | | |
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| Research Progress | | |
| 7. Do you feel the candidate has any difficulty that are affecting research progress? | Yes | No |
| (For instance, in the areas of knowledge on research topic, research | | |
| methods/analysis, access to resources, thesis writing, self motivation, etc.) | | |
| Details: | | |
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| 8. Please recommend any support that the Department can provide for candidate's pr | ogress | in |
| 8. Please recommend any support that the Department can provide for candidate's proext six-month. | rogress | in |
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| Name of Supervisor: Signature & Date: Part D: Overall Evaluation on candidate's progress (PhD sub Committee to Complete | | in |
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| Suggestion for Candidate: | |
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| PhD Subcommittee Head: | Signature & Date: |
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Course no. CPSY 501

Course Title: Introduction to Psychiatry

Q.1. A 24-year-old young adult was brought to you by his parents with hearing of voices, suspiciousness, and aggressive and violent behavior.

- a) What is your diagnosis? ----- 1
- b) What other information do you need in order to make your 2 diagnosis?
- c) What may be your management plan? ----- 4
- Q.2. A 35-year-old woman was diagnosed as suffering from Major Depressive Disorder.
- a) What symptoms do you expect in her during psychiatric ----- 3 interview?
- b) Briefly describe pharmacological and psychological ----- 4 management in this case.
- Q.3. Briefly describe eight types of Obsession and seven ----- 3.5 types of Compulsion according to YALE-BROWN OBSESSIVE COMPULSIVE SCALE (Y-BOCS)
- N.B. For Q.3 please take help of Y-BOCS

Course no. CPSY 502 Course Title: Fundamentals of Clinical Psychology

Answer three questions including question no. 5.

(Write your answer in your own language – copy paste from text books and Google will not be appreciated. Word limit for each answer, Q1-Q4 is 3000).

- How clinical psychology as a discipline and profession evolved from past to its modern form? Discuss your answer reviewing relevant socio-political, philosophical and scientific context. (5)
- 2. A tolerance for ambiguity and thirst for new knowledge are two hallmarks of modern day clinical psychology. Enumerate this statement in the light of a clinical psychologist's training, activities and professional identity. (5)

- 3. Do you think clinical psychologist should have prescription privileges? Substantiate your position against the practical and ethical implications of such a provision keeping Bangladesh in focus. (5)
- 4. Mr. X is currently referred to a clinical psychologist with his problems. He feels that his employer has always tracked him through satellite. And also believes that he possesses special power like, he is controlling every moving object around him, e.g. every vehicle in the road is moving according to his will power. He is on the verge of creating a breakthrough technology.
 - a) Please complete the clinical interview for this client. You can write it in form of a conversation between you and your client. You can add background information to the client according to your imagination.
 - b) Throughout your clinical assessment what issues need to consider for this client? Add justification for your answer.
 - c) How do you integrate your assessment data for this client?

(5)

- 5. Answer any two (2 x 3.75) [Word limit: not more than 1500]
 - a) Role of psychological theories in the development of Clinical Psychology.
 - b) Career of a clinical psychologist in Bangladesh past, present and future.
 - c) Please describe the scope and your role for the advancement in clinical assessment in the context of Bangladesh.
 - d) Why do we conduct behavioral assessment?

Course no. CPSY: 503 Course Title: Psychology of Adult Mental Health Problems Assignment -1

Part -A

1. Read the case study and answer the following questions

3+5+7

The client is a 29-year-old woman who presented with symptoms of depression. She presents with symptoms of lifelong dysphoria, low energy, lack of motivation and low self-esteem. She reported that her sleeping was disturbed in that it frequently took her several hours to fall asleep, that some nights she could not fall asleep at all, and if she did, she slept for only a few hours. She stated that she spent the time awake "thinking" and "worrying".".

She admits that some of her worries include the thought that she is not a good mother, and she felt that she was a problem for her husband. She said that she thought about her family and her dissatisfied relationship with her mother. She reported that she thought her frustration worsened after the birth of her second child ten months ago. She denied suicidal behavior and ideas. She said it would be nice to escape from her problems, but she added that she knew she couldn't do it. There is no family history of mood disorder, although her maternal grandfather had a long-term hospitalization for "mental illness". She recalls having a chaotic childhood characterized by a great deal of stress and instability. She lived with her father, mother, and younger siblings while growing up. She reported that her parents argued frequently. At age 11, her mother left the home and was missing for several years. She stated that her father was always a quiet man who did not share many of his feelings with his children. She reported that she developed strong unresolved feelings of anger toward her mother, and these feelings continue to surface in their present relationship. Overall, she viewed her childhood as emotionally unsupportive, unlovable and unstable.

She reported that she becomes frustrated that her husband works so much, and they do not get to spend time alone together as often as she would like. She said that she has the roles of major caretaker and disciplinarian of the children. She acknowledged that she puts a great deal of pressure on herself to be everything to everyone. She wants to be a good mother, daughter, sibling, wife, and friend making everyone happy without regard for her own feelings and needs. She acknowledged that depression was affecting her life in a number of ways. she reported that it was affecting her relationship with her husband and children. she stated that depression affected her socially because it was keeping her from participating in family events. She reported that she felt unable to work outside her home at this time, therefore, it was having a financial impact. She expressed unhappiness that she was not the person she wanted to be, and she stated that depression was destroying her life.

- (a) What are the challenges of this case for planning treatment?
- (b) Formulate the case by following the Beck's Cognitive model.
- (c) How would you treat this case with cognitive behavioral therapy? Describe a treatment plan for this client.
- 2. How to deal with social stigma in a Bipolar case? ----- 2.5

Part-B

1.Read the case study and answer the following questions 5+5+2.5

Ms. Y, 23 years old unmarried female student client from a religious family diagnosed with Obsessive Compulsive Disorder (OCD). She reported that she had recurrent intrusive thought of contamination by urine. For that reason, she had to wash repetitively in ritualistic ways. It was seemed that almost everything was dirty. So, she tried to avoid the places which were seemed to contaminate like toilet, bathrooms. She also avoided drinking water for reduction urination. These activities were excessively time consuming like she took more than one hour for cleaning after urination and three hours for taking a bath in ritualistic way. If she could not do in perfect ritualistic way she started again. She had excessive doubt about her ritual activities. All the time she felt distress for a thought about perfectionism like 'Did I do this perfect way?' Her intrusion was' I am contaminated 'and negative automatic thoughts (NAT) like' 'I have lost my sacredness.' 'I am a sinner.'' Allah will punish me". For that she had low concentration about other activities like study. Her activity level was decreased and she did not feel any interest and pleasure in daily activities. She felt fatigue and weak.

- (a) What are the symptoms of OCD mentioned in the DSM-5?
- (b) What would be the intervention techniques for this case to deal obsession and compulsion?
- (c) The relationship of obsessions and compulsions.
- 2. Describe Wells cognitive model of Generalized Anxiety Disorder (GAD).----5

Course No. CPSY: 505

Course Title: Clinical Research Methods and Advanced Statistics

| Topic 1: Research proposal | 15 |
|---|----|
| | |
| | |
| Write a research proposal including sections on research question, literature | |
| review, hypothesis, objectives, sample size and sampling technique, data | |
| collection procedure, data analysis plan, possible outcome. | |
| Tania 2: Outagna dasian | 10 |
| Topic 2: Outcome design | 10 |

Describe how you will evaluate your research question in the light of outcome designs.

Course no. CPSY: 506 Course Title: Models of Therapy

Part A

Answer any three questions from Part A

(Write your answer in your own language – copy paste from text books and Google will not be appreciated. Word limit for each answer is 1500).

1. Critically evaluate the stands of Brief Psychodynamic Therapy for the explanation of Psychopathology of a Human Being.

5.83

2. 'Kelly's Personal Construct Theory is a forerunner to theories of cognitive therapy'use your argument for the statement.

5.83

- 3. Critically evaluate the Personal Construct Theory in terms of its clinical implication.
- 4. 'CBT is a popular therapeutic approach in current decades'- use your argument for the statement in the light of history.

5.83

5. Please describe 'Dialectic World View' in terms of explaining psychopathology and therapeutic implication.

5.83

Part B

Answer both questions.

- Meena, an 18 year old is a Rohingya refugee. She has been suffering from extreme anxiety, fear, resentment since she has been in the camp. How do you help her as a practitioner. Develop a treatment plan accordingly using any one of the therapeutic approaches of your choice.
- 2. Answer any one question.

7.5

a) What did Eric Berne mean by a Script? Explain each of the following concepts with examples from your experience.

- Injunctions
- Attributions
- Discounts
- b) How effective is Person Centered Approach for Crisis intervention? When people are in crisis like loss of a loved one, what should be the first step in managing your client. Illustrate your answer from your own experience.