An Examination of Clinical Psychology Programs in the United States and Peru and Recommendations for Future Development of Programs in Peru

Oscar Barreda

Follow this and additional works at: http://digitalcommons.wku.edu/theses
Part of the Clinical Psychology Commons, and the International and Area Studies Commons

Recommended Citation
http://digitalcommons.wku.edu/theses/1880

This Thesis is brought to you for free and open access by TopSCHOLAR®. It has been accepted for inclusion in Masters Theses & Specialist Projects by an authorized administrator of TopSCHOLAR®. For more information, please contact topscholar@wku.edu.
AN EXAMINATION OF CLINICAL PSYCHOLOGY PROGRAMS IN THE UNITED STATES AND PERU
AND RECOMMENDATIONS FOR FUTURE DEVELOPMENT OF PROGRAMS IN PERU

A Thesis
Presented to
the Faculty of the Department of Psychology
Western Kentucky University
Bowling Green, Kentucky

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts in Psychology

Oscar Barreda
July 1973
AN EXAMINATION OF CLINICAL PSYCHOLOGY PROGRAMS IN THE UNITED STATES AND THRU
AND RECOMMENDATIONS FOR FUTURE DEVELOPMENT OF PROGRAMS IN THRU

Approved July 25, 1973

Date

Dean of the Graduate College

Approved 7-2-73

Date
Acknowledgements

In acknowledgement of the help that I have received while working on this thesis, I thank Dr. Nolan for his perseverance, Dr. Robe for his understanding, Dr. Layne for his patience, and Carla Evans for her typing.

O. B.
Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>General Psychology</td>
<td>5</td>
</tr>
<tr>
<td>Psychological Service - Delivery Systems</td>
<td>10</td>
</tr>
<tr>
<td>Training Programs of Clinical Psychologists</td>
<td>22</td>
</tr>
<tr>
<td>Training Programs of Psychologists in Peru:</td>
<td></td>
</tr>
<tr>
<td>Conclusions and Recommendations</td>
<td>34</td>
</tr>
<tr>
<td>References</td>
<td>12</td>
</tr>
</tbody>
</table>
Introduction

Psychology as a science is a young discipline which constantly is
growing and trying to achieve a definitive maturity in the world of
rational knowledge. During this development, changes and new directions
are constantly appearing. Consider the case of a person who 20 years
ago was current in the psychological thought of the time, and worked
according to the methodology and techniques of that time, but now must
incorporate in his skills what is currently the accumulation of 20 more
years of psychological knowledge. He can now achieve better results with
less effort, and make a more consistent use of the science that he has
studied, only if he keeps abreast of the latest developments in his field.

Training institutions must also keep abreast of changes in the field
if they are to be effective.

For different reasons that will be examined later, many previous
programs for training psychologists have become inadequate or obsolete,
and new options are open to better programs (Albee, 1971; Nusante, 1972;
Schneider, 1971; Schulberg, 1972).

With some knowledge of the current training techniques and procedures
in Peru, it is possible to see some ways in which training for psychologists
in that country can be improved. Therefore, the object of this work will
be to arrive at some practical conclusions and recommendations for the
improvement of training programs for psychologists in a Peruvian setting.
There is a recognized double goal to pursue in most of the training programs of a Clinical Psychologist: as a scientist with a systematic psychological knowledge and as a practitioner with specific technical skills. For this work, it can be added that, in a broader sense, it is desirable that the following goals be pursued by people under the training of current programs:

1. Apply science of psychology in such a way that the full potentials of individual members of society will improve.

2. Be able to utilize actual scientific learnings in the field of psychology in a critical way, and according to the needs of the people in their own specific environments, rather than mere copying or following a fashionable theory.

3. With this prior basis of knowledge in scientific psychology, be able to do research in specific cultural applied fields.

   Every human being in life's daily affairs confronts conflicts, and to a greater or lesser degree, every person, is able to overcome these conflicts. When a person is unable to face the state of being in conflict—in which there is not a traditional medical or illness involvement—society provides a scientific methodology, and specialists who master the technology of behavior. According to their specific techniques, they are supposed to help the person or the group of persons who cannot by themselves resolve their problems.

   Psychology as a science is able to contribute in that case by providing an adequate technique which will be helpful to the individuals facing and handling conflicts. It can be said that there is not a single science of psychology, but there are several psychologies with their own methodologies and objects of study. These different systems and models conceptualize
and classify various forms of individualities and deviant behaviors in their own particular way.

Chapter I will be concerned with a definition and classification of psychology as a science, the process to be followed in order to obtain a degree in psychology or a professional title, some characteristics of a psychologist, and finally the place in which psychology as a profession stands from an ethical and legal position.

Chapter II will refer to psychological knowledge, standards and principles which defined psychotherapy practices. It will also be descriptive of some psychological services and delivery systems for such services.

From the great variety of programs and fields of study found in the United States today, according to the "Graduate Study in Psychology for 1973-74" (American Psychological Association, 1972), several universities have been selected and examined from catalogues, brochures and other information with respect to their programs. With this material it has been possible to examine the kinds of people who pursue the programs, the goals to be achieved, the emphasis given to certain matters, practices and techniques; and in general - according to each model - an ideal program for psychotherapists in the United States has been outlined. Chapter III shows the results of that overview of the training programs in the United States.

In Chapter IV, a similar process will be followed to determine the basic characteristics of a training program of a psychotherapist in Peru. An analysis of the current programs in psychotherapy training in Peru with their strength and weaknesses will be made in this chapter. In this final chapter, recommendations also will be made for a training program which, while it will not be based or patterned after a particular program
of a university in the United States, will incorporate some ideas which may be adapted to the situation present in Peru.

It must be recognized that the cultural, social and political situation of one nation is not identical with the cultural, social and political situation of any other, and that any program must be adapted rather than adopted in its entirety. This is true of the programs in psychology to be found in the United States when one speaks of adopting a similar program for Peru. It must be stated, however, that it would be unwise to ignore totally the long experiences of others in furthering psychological study and psychology as a science.
Chapter I

General Psychology

Psychology as an academic discipline emphasizes the communication and application of theories and principles of behavior. As a science, its focus is on research and on the process of collection, quantification, analysis and interpretation of data with the object of discovering the causes and dynamics of behavioral patterns. As a profession, psychology is involved in the practical application of knowledge, abilities and techniques directed toward the solution or prevention of individual or social problems.

Classifications

Numerous classifications and divisions can be found in the field of psychology. In actual practice, the American Psychological Association has 31 divisions that correspond to specific psychological fields. Most of these subdivisions have their own journals or scientific publications.

In the sense of having different methodologies and fields of concern, eight general areas of studies can be distinguished: Experimental Psychology, Developmental Psychology, Personality Psychology, Psychometric, School Psychology, Comparative Psychology, Physiological Psychology and Social Psychology.

From the professional point of view, or according to what the psychologists do, several specializations can be determined. These may be a combination of matter of study with the object of the application to specific kinds of problems in specific settings and circumstances; for
example, Clinical Psychology, School Psychology, Industrial Psychology, Engineering Psychology and Consumer Psychology.

The type of work that the psychologist does is determined by a number of factors: The emphasis given to different areas of studies during his training, the level of his training, the place in which he works, and the daily demands that he confronts. Of course, this has also something to do with the personal inclinations of the psychologist who may direct his efforts to the rigor of scientific discoveries, the challenge to understand and help individuals and groups, the satisfaction in promoting social changes, the accomplishment of educational demands, or the contribution to the improvement of institutional effectiveness.

Levels of Training

Traditionally the education of a psychologist through the Bachelor's level does not cover in depth the area of studies or the psychological scientific methodology. For this reason, this level is not considered sufficient for a practicing psychologist. It is expected that new developments may incorporate the Bachelor's level person into Programs of Psychological Service in the Community.

The Doctorate in Psychology offers a wider range of work opportunities and more responsible positions because during their training candidates have been exposed to a wider and more diverse body of knowledge and techniques in psychology.

In contrast, the psychologist trained at the Master's level usually finds a more limited range of opportunities because of the higher qualifications that are required for the best placement and also because his responsibility is limited to the kind of training that has been received.
In general, the preparation of a psychologist at a Master's level begins with the enrollment in a graduate program for advanced studies in psychology and culminates in the Master's degree which includes the completion of additional requirements such as practicum experience with applied psychology and/or presentation of a thesis based on a research project.

The training for a Doctorate level degree usually requires a minimum of three years of study beyond the Bachelor's level. The work demands the highest level of academic achievement and requires a research project which is an original contribution to the psychological field. An additional requirement may be a year of internship in Clinical Psychology, Counseling and perhaps Industrial Psychology before receiving the degree.

The American Psychological Association, in order to assure appropriate training for a psychologist who will serve people, makes an evaluation and accredits Doctoral programs meeting minimum standards or better.

State laws require that a psychologist must be certified by the Licensing Boards of the State before working as a professional psychologist.

The Psychology Teacher

Williams and Richman (1969) conducted a survey with respect to the characteristics of psychologists in 150 colleges and universities and 50 specific psychological institutions. They arrived at the conclusion that there are at least eleven ideal competencies in the psychology teacher.

From those considered more important to those considered less important they are: a) competence in the field to be taught and, in general, in the discipline so as to be able to teach at least three related subjects, b) ability to teach and to have had experience in different situations,
from the lecture in class, small discussions, seminars, to the tutorial relation of person to person, e) ability to conduct research and actively participate in the area of his interest sufficient to serve as a model to his students and also to supervise their investigations, d) competence in counseling and consultation with students, taking interest in their general development as persons, discussing their educational and vocational plans, having some knowledge of their problems of adjustment and adaptation, e) participation as a general member of the faculty in the administration and government of the University in areas such as admission, curriculum and student problems, f) ability to write in scientific language appropriate to psychology, g) ability in the use and application of psychological instruments, h) competence as a functioning human being, i) ability to work with computers, j) maintenance and care of animals, and k) knowledge of foreign languages.

**Psychology as a Profession**

The Psychologist, as a professional, has certain privileges and prerogatives that are regulated by the official institution for this kind of activity and the ethical norms for psychologists (APA 1967, 1971).

It is important to note that superior competence in this speciality is identified by the diploma given by the different State Boards of Licensing. Generally, before working professionally, the psychologist is given a period of supervised practice.

Psychologists have the responsibility to make clear and explicit the nature of their roles, and to prepare adequately for new and emergent roles. In his psychological work the primary responsibility is to the client. The Psychologist expects to have security in his job as he functions in an adequate, professional manner. Psychology as an independent profession has parity with other professional services in institutional practices.
and before the law. The psychologist tries to avoid misunderstandings and to be prudent in his public statements. It is a primary duty of the psychologist to treat confidentially information that has been obtained during his work. Only under important exceptions may this confidentiality be broken. Moreover, certain measures govern the activities of the psychologist as a professional, responsibility toward his organizations, credit for publications, precautions in research, security in testing, his interpretation and publication, remuneration, interprofessional relations, advertisement of his services, client's relations and well-being, as well as moral and legal standards.
Chapter II

Psychological Services - Delivery Systems

**Psychological Knowledge**

What has been learned as firm and comprehensive knowledge of human behavior in the last 50 to 75 years has been considerably more limited than could be anticipated when we read texts and other psychological publications or on observing the practices of psychologists (Viteles, 1971). In any case one can cite examples of the contributions to behavioral science that include the improvement of the methodology and techniques of evaluation, and the accelerated change of paradigms that tend to be more scientific.

The assumptions and concepts formulated by Freud, for example, modified the paradigm of research and interpretation of the discoveries in several areas of psychology (Holzman, 1970). As a consequence of Piaget's influence, the questions and beliefs that refer to research in developmental psychology throughout the world, differ significantly from earlier research in this area (Gelman, 1971). In the learning field there appears to be a growing attention toward the questioning of the generality of the laws of learning which were the object of experimentation of Pavlov and Thorndike until today (Seligman, 1970). There is a closer interaction between Psychology of Learning and Biology.

Referring to this topic, Viteles (1971) mentions the following examples about what psychology knows with a certain level of confidence:
"the superiority of partial or intermittent over continuous reinforcement in learning strong and permanent responses (Boulard, 1951; Nisbett, 1961); the role of comfort - of emotional security - in the life and upbringing of the young (Harlow, 1958; Harlow & Zimmerman, 1959); the significant effects of early training of children in shaping their later lives (Ambrose, 1967; Miller, 1967); the effects of drugs as energyizers or tranquilizers (Miller, 1967); their role in human behavior and misbehavior (McClelland, 1971); and in the treatment of mental illness (Clark & Del Giudice, 1970); conditions of reinforcement - particularly in the use of punishment - which are optimal for the discouragement of unwanted behavior (Bronfenbrenner, 1968; Solomon, 1964; Solomon, Turner, & Lessac, 1968); the role and interrelation of short-term and long-term memory systems (Sperling, 1971); the nature and sources of hostility and aggression (Lennholdt, 1967; Deutsch, 1965; Feshbach, 1970; Tinkhoff, 1968); the relations among sleep, dreams, circadian rhythms, sleep deprivation, activation, and performance (Aschoff, 1965; Duffy, 1965; Hebb, 1949; Kleitman, 1939; Luce, 1970; Luce & Segal, 1966; Kalmbach & Sivillo, 1960; Kolsteholme 7 O'Connor, 1960)."

In any event the kind of scientific revolution experienced in the older physical sciences, or obtained in other biological sciences (Hutchings and Hutchings; 1967), has not resulted nor does it appear to be likely in the immediate future. But never as before there is hope in the future of psychology that questions beliefs, generates new questions, modifies research patterns, expresses levels of confidence in numerical terms and occasionally admits its own inadequacies.

A very notable characteristic in contemporary psychology is that may be called an identity crisis. There is certain amount of indecision about what is basically relevant in Psychology: service or investigation, community action or search for knowledge, participation in movements or permanence in the academe, the advance of science or the construction of instantaneous utopias (Viteles, 1955).

There is certain confusion of fiction and reality, science and value judgment, knowledge and good intentions, that happen when psychologists play the role of social reformer. As a result, even given the solid progress of psychology as a science, a large amount of what the psychologist
does as a professional in relation to social engineering, still rests on scattered fragments linked with good intentions but which do not correspond to recognized scientific techniques (Ovetc, 1972).

To sum up, what the psychologist knows can be differentiated from what he does. Efforts are being made, and hopes do exist, that in the future as psychology progresses, a better combination of theory and practice will result which will lead to greater knowledge and the solution of human problems.

Standards in Psychotherapy

It may be worthwhile at this point to mention some standards recommended for training in psychotherapy in doctoral programs of Psychology, (Division of Psychotherapy, Pa, 1970). It has been accepted from the beginning that psychotherapy must be understood as an applied art, and a legitimate scientific intellectual enterprise; this unity rejects any fallacious dichotomy.

A relatively recent Conference on the Professional Training of Clinical Psychologists (Hoch, Ross, and Winder, 1966) found that education in Psychotherapy emphasizes two aspects: 1) it is more practice than investigation, and 2) the quality of education is more important than the specific content to be offered.

The Conference listed the following 23 principles grouped according to references to departmental structure, faculty members, settings for practical experiences and curricular considerations.

Departmental Structure

Principle 1. University psychology department faculty who teach psychotherapy may be appointed or promoted for excellence in the practice of psychotherapy or supervision of psychotherapy, as well as for excellence in research, scholarly productions, or didactic teaching.
Principle 2. The distribution of senior rank and full-time appointments among the psychotherapy faculty should be sufficient to permit them to participate effectively and meaningfully in planning and administering the department's program.

Principle 3. Because of the complexity of clinical teaching and supervision and their demanding, time-consuming character, the other duties of the psychotherapy faculty members should be regulated so as to allow them ample time to perform these functions.

Principle 4. The faculty members who practice psychotherapy should teach most of the didactic psychotherapy courses.

Principle 5. The faculty should formulate and publish an explicit set of criteria by which the student's performance in the practice of psychotherapy is evaluated.

Principle 6. The faculty should evaluate periodically the student's competence in the practice of psychotherapy.

Principle 7. The faculty should share responsibility for the nature and quality of the student's training at off-campus facilities.

Principle 8. At least one full-time faculty member should represent the model of a highly skilled psychotherapy practitioner.

Principle 9. The faculty should be competent in the supervision aspect of teaching psychotherapy.

Principle 10. Faculty members who teach psychotherapeutic skills should be continuously practicing the skills they are helping their students to learn.

Principle 11. The psychotherapy faculty and the staff of the practicum facilities should view their practice of psychotherapy as a worthwhile professional activity.

Practicum Setting

Principle 12. Students should obtain their psychotherapy practicum experiences in settings where genuine psychotherapy is being done at a high level of competence.

Principle 13. Students should obtain part of their psychotherapy practicum experiences in settings in which the independent practice of psychotherapy by psychologists is accepted.

Curriculum

Principle 14. Education in Psychotherapy should be designed to enhance the student's awareness of the dynamic interaction between the field of psychotherapy and the social milieu.
Principle 15. Psychotherapy education should include experience in treatment situations in which the aim of the work is preventive or oriented toward maximizing human potential.

Principle 16. The student should be provided experiences in one-to-one psychotherapy relationships (dyadic model) plus one or more other approaches.

Principle 17. The student’s education should continually involve the incorporation of ethical standards and professional attitudes.

Principle 18. The student should have the opportunity to experience and observe the progressive stages of the psychotherapeutic process.

Principle 19. The student should have the opportunity to experience and observe the progressive stages of the development of his psychotherapeutic competence.

Principle 20. The student should receive training in supervision of psychotherapy.

Principle 21. Methods for enhancing the student’s self-awareness, sensitivity, and personal growth should be an integral part of psychotherapy education.

Principle 22. Education in psychotherapy should be designed to provide sound grounding in present knowledge and skills, yet enhance the student’s awareness of how current approaches are but a point in historical development.

Principle 23. There should be a formal terminal evaluation of the student’s performance in the practice of psychotherapy prior to the awarding of his Doctoral degree (p. 149).

In assessing the variables of the different attitudes that Academic Clinical Psychologists have about the roles, function and training in Clinical Psychology (Oding and Thelen, 1970), it was concluded that the clinical and personality theories, and the applied clinical abilities, are socially relevant.

It was also concluded that the controversies over the training models are shared by the community of psychologists. The variance is in the emphasis given to the six basic activity-roles of psychologists: a) administration, b) consultation, c) psychodiagnosis, d) psychotherapy, e) research, and f) teaching.
Since the area of disagreement appears to be more about the applied clinical activities and roles (with the exception of research and therapy) by which the students are actually being trained, than in the conferred degree or the general type of clinical training, it is speculated that the actual emphasis on models of clinical training is irrelevant, or as seems more certain, it is not adequately expressed.

**Psychological Service Centers**

The Psychological Service Center is a concept that in practice takes different directions. In an evaluation of the status of centers Scull and Theaman (1971) report different variations according to factors such as affiliation with university or association, financial support by the payment of fees or university fund, the kind of psychological services offered, or the primary function, that is, psychological training as a primary or as a secondary function.

These Psychological Service Centers generally concentrate on service programs to the community and do not offer services that are already provided in private practice.

In order to present an idea of how these service centers function in reality, six different centers will be described briefly, as follows:

1. The Institute for Psychological Services of the State University of Georgia (Brown, 1971) is a non-profit independent organization of educational and scientific nature. Primarily, this institute provides the practical facility in which graduate students have the opportunity for training and research through the offering of a wide variety of psychological services under the close supervision of faculty members. Secondly, the Institute facilitates the expression of the faculty's talents, promoting in its members the cultivation of their competencies through the practice of their
specialties. The Institute also brings to the community the psychologist's image as a responsible and independent professional. The clients are referred by particular individuals, university officials, private professionals, and governmental agencies.

2. The Psychological Center in Los Angeles (Horley, 1971) is an institution for services and research. It was initiated with the idea of decentralization of the Emergency Crisis Service, including later consultation programs, tutorial work with ghetto children, and paraprofessional training.

3. The Psychological Center of Massachusetts (Rossi, 1971) is primarily of an academic nature, and is in the formative process seeking funding for the implementation of projects in community and social development. This center is also concerned with the "hippie" problem and with providing family therapy.

4. The Psychological Service of Pittsburgh (Capwell, 1969) was one of the first, privately initiated 27 years ago. Its dedication is to service and research, and it provides service to industry and business, clinical services and counseling, and reports research.

5. The Communal Institute of Psychology at Cincinnati University (Oscas, 1971) is an institution affiliated with the University and in which graduate students of psychology are trained as consultants in Mental Health. This Institute includes in its programs a) training of psychological consultants to participate in development programs, evaluation of services and personnel, construction teams, and analysis of systems, b) training of psychologists to work on projects of the institute and in short-term works and contracts, c) training of psychologists to work in continuing and substantial projects of the institute, for example, the selection and
evaluation of police, de training of psychologists to work in research projects. In general, this Service is characterized by its emphasis on developing abilities in sensitivity and T-groups.

6. The Psychological Service Center affiliated with the Society of Clinical Psychologists of New York (Theaman, 1970) attempts to apply the science of behavior to the solution of social problems. Some of its projects are: a) the service of self-help which tries to change the practices of child-rearing in the low-rent economic group, b) at the request of the community, a program of care for the aged, c) a voluntary program of treatment for persons who cannot afford to pay for such services, d) psycho-diagnosis for low-rent minority groups which seek educational scholarships, and e) a program for research directed toward a reduction in racism.

Counseling Services

The existence of counseling services in the university setting is commonly accepted. The manner in which these services are offered has suffered some modification in accord with changing university reality and with the implementation of better techniques and recommendations which are products of intensive studies made in the area of these services.

In 1970 certain guidelines for the better functioning, understanding and development of these services were adopted officially by the Association of Directors, Centers of Counseling Services in Universities (Kirk, Johnson, Redfield, Free, Michel, Boston, 1970). These guidelines specified that this service is an autonomous administrative unit with the object of serving more freely and fully the needs of students. Also Counseling Service Centers should be instructional and disciplinary units.

Working with students, the counseling service performs a role of development, that of assisting the students with adjustment and gaining
maximum benefit in the academic world; and a corrective role, that of helping the students in the solution of specific educational problems as well as in remedying deficiencies in certain abilities. In addition to serving the students, the faculty and university community are also served. The Counseling Service is a suitable place for the training of interns and paraprofessionals, where research may be conducted, at least with regard to the effectiveness of these services.

A great part of these services is provided by professional personnel such as clinical psychologists, psychiatrists, and social workers. All personnel must have personal attributes appropriate for the communication and relation with all the students and members of the university community. The strict adherence to the professional codes of ethics are basic norms in all types of interrelationships. The personnel belong to, and participate in, professional organizations, foster and support the acceptance of leadership responsibilities as well as an active participation in communal activities related to the profession.

Community Psychology

As the field of Community Psychology emerges, there are plentiful opportunities to develop new hallmarks for the role of the psychologist as an active participant in developing community resources. Kelly (1971) suggested seven qualities as guidelines for assessing the performance of the community psychologist: a) a clearly identified competence, b) creating an ego identity (in the community), c) tolerance for diversity, d) coping effectively with varied resources, e) commitment to risk taking, f) metabolic balance of patience and zeal, g) giving away the credit (when community work is done).
At the University of Rochester (Sohen, 1969, 1971) an experiment has been undertaken with graduate training in clinical psychology that shifts the focus of the clinician's activities from the traditional base of hospital, clinic, and consulting rooms to the community and its primary institutions. This community-based preventive function that shifts from the prior overwhelming emphasis on combating pathology and rehabilitating, is learned through actual participation rather than abstract discussion. Also noteworthy is the use of nonprofessionals in secondary roles. The undergraduate practicum provides direct training and experience for undergraduates in community mental health, and human service programs; candidates become line service personnel in community programs under the direct consultative supervisory aegis of the graduate program coordinator. For the graduate program the role model is more that of consultant than of therapist, and the training experience has two separate purposes: developing a guiding conceptual orientation and approach to mental health problems and acquiring some "nuts and bolts" skills needed to carry off a specific program effectively.

A community-based internship experience is sponsored jointly by the Community Psychiatric Section of the University of North Carolina and a University-affiliated bi-county comprehensive community mental health center (Finkerton, Miller, Megert, 1970). Field training focuses on crisis intervention and short-term treatment approaches, individual, group and agency consultation, formal and informal community education experiences, and both program development and program evaluation.

It is important to mention the five major areas of training available to the psychology intern in the community. These include: a) Clinical treatment - In contrast to the team setting at the training hospital,
the mental health professional in the community functions in a more
autonomous manner and tends to call on other available professionals as
their skills and knowledge are needed. In the community context, the
intern has greater responsibility in diagnosis, disposition, and treatment
decisions; b) Consultation - The intern is involved in consulting with
many agencies and assisting personnel. These include public health
nurses, social service, juvenile courts, local physicians, school personnel
and administrators. The intern does not try to take over problems and
give quick answers; instead his aim is to add to the existing knowledge
of the personnel. The forms of consultation take place: single case
consultation which involves the intern's working relationship with a
consultee (e.g. a teacher) in an attempt to solve a given problem and
group consultation which involves the intern's working with a group
(e.g. of teaching personnel) to discuss a specific case or set of difficulties;
c) Education - With the intern engaged in the aspects of community
in-service education of key personnel within the community, formal and
informal, the intern engages also in giving talks to community groups;
d) Program and resource development - The intern is engaged in a variety
of consultative relationships with helping agencies. These provide not
only an opportunity for developing consultative relationships with an agency,
but also provides a base from which the intern can move directly into
developing new programs and resources within the agencies; e) Program
evaluation - The intern assumes primary responsibility for setting up
an evaluation design, developing mechanisms for data collection and cost
estimates for data processing, and assists in the design of the evaluation
report.
It is apparent that the ideal community psychologist is a social science generalist, knowledgeable in a wide array of substantive areas. His particular theoretical focus is on the nature and consequences of the interaction of individual and social systems, and his skills pertain to methods of studying and intervening in that interaction (Oscar, 1970).

Community Psychology (in the Boston University program) is not a separate program, but is integrated with existing departmental doctoral programs in social and personality, counseling, and clinical psychology. Students from any of these programs are invited to participate in community psychology training. They take community-oriented courses and are involved in community field experiences while simultaneously doing advanced coursework in their special areas. Four broad areas of interest and application are framed: community mental health, intergroup relations, community development and educational systems (Lipton, 1970).
Chapter III
Training Programs of Clinical Psychologists

In order to provide some understanding of the clinical psychology training programs that are offered in the United States, a representative sample of the great variety which can be found today is presented below. This sample includes a brief description of the more important features of the following types of training programs in clinical psychology: a) traditional program with emphasis on research (Vanderbilt University), b) traditional program with emphasis on the profession (Purdue University), c) psychology doctoral program (Illinois University), d) developing programs with recent innovations (Ohio State University, Duke University), e) academic program (Stanford University), f) autonomous program (The California School of Professional Psychology), g) post doctoral program (State University of New York).

In general, the clinical field is referred to as a psychological specialization in the evaluation and the psychotherapeutic treatment of people who are suffering emotional or adjustment problems.

Traditional Program with Emphasis on Research

Vanderbilt University in Nashville, Tennessee (VU Brochure, 1973), offers graduate training leading to the Ph.D. in several areas of psychology, with a particularly strong program in Clinical Psychology. This program is supported by training grants from the Federal Government. Faculty members work in research projects in close collaboration with graduate students. The department makes equipment and facilities available to all
graduate students, and it provides experience in a wide variety of practicum agencies.

The Department of Psychology at Vanderbilt University offers doctoral training designed to familiarize students with current problems in psychology and to prepare them for careers in a number of areas of psychological science. During their first year, students are given an intensive exposure to: a) each of a number of traditionally defined areas of psychology, b) quantitative methods and experimental designs which will be useful for students in their research, and c) a research seminar in which each student designs, performs, and reports on a research project. Students in clinical psychology also begin their practicum training in the first year. During their second year, students design, conduct, and report on a masters level research project and augment their studies with a course in measurement theory plus seminars and practicum courses. The Master's degree is awarded to students who complete an acceptable master's thesis based on the second year research project; however, the Master's degree is not required of doctoral candidates in psychology.

Typically, by the end of the third year students are asked to demonstrate their conceptual skills and knowledge of their specialty in an oral qualifying examination. If performance in this examination is judged to be satisfactory, the dissertation research is initiated. Most students are able to complete the dissertation by the end of the fourth year.

Even with its emphasis on research, this training program of Clinical Psychology at Vanderbilt subscribes to the philosophy that a clinical psychologist is both a scientist (knowledgeable in formulating and solving scientific problems) and a professional (experienced in the practice of clinical techniques). Supervised experience in clinical settings, beginning
the first year of graduate training, is a significant aspect of graduate work in clinical psychology, and constitutes important preparation for the internship which is taken with different agencies in the Nashville area during the fourth year.

**Traditional Program with Emphasis on the Profession**

The scientific-professional Psychology Department at Purdue University (PU Brochure, 1972) works toward the primary goal of preparing scientifically oriented professional psychologists. This means that persons who have a doctoral degree in any of the professional or clinical areas should be primarily psychologists and only secondarily specialists in a given area. This program is designed to integrate academic work, research, and clinical experience at every level of the student's training, beginning with the first year.

Students are expected to have a certain minimum background in psychology when they enter Graduate School, particularly in the areas of tests and measurement, experimental psychology with laboratory experience, elementary statistics, personality and/or abnormal psychology, and developmental psychology.

Students are exposed to practicum experiences with children and adults, in clinics and in the community. These practices are supervised by graduate students at the upper levels of study and faculty members. During the first year the student ordinarily participates in the observation and discussion of cases and has some experience in giving and interpreting intelligence tests. Second year students emphasize personality testing and are assigned some treatment cases. In the third year the student assumes responsibility for the evaluation and treatment of cases in the Psychological Services Center. During this time students acquire some experience and skill in supervision and at the same time are involved in research.
Preliminary examinations and the completion of a research study at the master's level come during the second year. The dissertation is expected to be completed and defended by the fifth year.

Psychology Doctor Program

The Psychology Department at the University of Illinois (Peterson, 1970, 1971, 1972) offers training to people who are interested in research (Ph.D.), professional service (Psy.D.), and for careers combining research and/or professional work in clinical and community settings (Ph.D. or Psy.D.). To establish a common body of knowledge and background, during the first year students are introduced to the current issues, problems and practices in clinical psychology, and are provided with training in the essentials of scientific method and research.

After the first year, each student selects an advisory team and plans an individualized program leading to either a Doctor of Philosophy or Doctor of Psychology degree. Preparation for careers combining research and services can be accomplished by taking additional training. Either degree program can be completed in four years and completion of both degrees will require two additional years.

In the Doctor of Philosophy Research Program a master's thesis as well as a doctoral dissertation must be completed. An internship is not required, and basically this program is designed for persons who will enter teaching or clinical training. A second option, which may also be completed in four years, and which represents a novel and experimental approach, is the professional program for the Doctorate in Psychology. This new program is designed to prepare students for professional clinical service positions requiring assessment and modification of behaviors in individuals, group and community situations, including design of assessment and intervention
programs, consultation, and the broad range of other activities in clinical psychology today. Students are trained in basic research methods to ensure effective utilization of available knowledge, but the major emphasis is placed on laboratory and field training. No thesis is required, but a comprehensive report on the year of internship, or a field study of professional relevance, is required.

In the combined Research-Professional Programs, students must complete the requirements for one program and follow it with two years of additional practice or complete the requirements for the other specialty.

In the last report about the status of the Doctor in Psychology Program, Peterson (1971) mentions the placement of graduated students in this program in positions which involve direct clinical activity, administrative responsibility for program organization and evaluation, as well as training of other personnel in the mental health field.

Developing Programs with Recent Innovations

The Psychology Department of Ohio State University (Kosman, Siegel, Mattis, Kirslos, Nolan, Pascinsky, Weaver, 1970) recognizes that clinical psychology is undergoing rapid changes in conceptualizing methods of inquiry and methods of intervention, and that this period of transition in the field requires stimulation of a multiplicity of approaches in all problems, tolerance for change, and a learning environment which will help students acquire the knowledge, skills, and attitudes they will need to participate in the new opportunities for leadership.

Traditionally, the method of training psychologists is to strive toward establishing a professional identity by outlining the roles (e.g. therapist) which fit this identity, and then providing training in specific skills to implement these roles (e.g. psychotherapy, testing). The psychologist then is one who applies his skills to problems within his
compence. In essence, the goal is to train a "product" identifiable by
the techniques he uses. An alternative model that is followed by Ohio
State University assumes that the characteristics of problems determine
the relevant questions and solutions. The psychologist's job is to investi-
gate and assist with problems of individual (or group) environment inter-
actions, and his function is to develop or adapt whatever skills seem
necessary to help people deal with the issues they confront. It is
thought that this "process" oriented approach to learning will yield
more substantive solutions to the problems which currently concern
psychologists.

The goals of the Clinical Psychology Training Program at Ohio State
University are: a) that of equipping the student to assume leadership
responsibilities in whatever role he undertakes and b) the integration
of research and professional functions in actuality rather than theory.
Assuming that learning occurs best through actual involvement in problem
formulation and solution, students beginning with their first year spend
at least a day a week in a community or clinical setting. Students and
faculty work together in professional and research activities, planning
policies and procedures affecting almost all aspects of their graduate
education. Students have wide latitude in selecting how, when, and in
what areas they will demonstrate their knowledge and abilities, but it is
understood that only first-rate work is acceptable.

During their first year, each student spends a quarter with a different
faculty member participating in his ongoing work. The student participates
also in a year long course in which each faculty member discusses basic
assumptions, values, methodology, findings, and socially relevant aspects
of his work. Since virtually all of the faculty represent different
theoretical frames of reference and interests, students typically have a considerable range of examples. Courses and seminars are offered as resources oriented toward the process of problem solving that will be similar outside of the University. In this way discontinuity in the step from the University to the "real world" is expected to be minimal.

This program receives continuing intensive reviews by the faculty, students and outside consultants, and there is an effort to maintain consistency in the implementation of the training with its basic assumptions and explicit goals.

In a report of recent innovations in the Clinical Psychology Training Program at Duke University, (Kremen, 1970) there is a mention of the change from the usual mixture of didactic instruction and practicum experiences supervised largely in the traditional didactic form, to the formation of five psychotherapy conference groups, each composed of two supervisors and six students. There are continual case conferences with extensive use being made of the students' therapy tapes, and regular restructuring of groups with a view toward systematically achieving the widest interactive network between students and supervisors.

Continued dissatisfaction with the limited opportunity provided students for systematic growth or self-knowledge led to two additional changes in the program: a) every new student takes a battery of intellectual and projective tests, administered by a psychologist from a neighboring university. At the completion of the second year, the student receives the results in a sealed envelope, and the protocols are his to use as he wishes. No faculty member ever sees the student's test responses; b) each student is offered the option of working 20 hours with the psychologist who administered the test. This work is on an individual basis and the
specific aims are determined by the student himself in consultation with
the psychologist. In order to accelerate the time students take to choose
a special area of interest for research and scholarship, from the second
year aside from training in diagnosis and psychotherapy, a student may
devote the major portion of his time and effort to the mastery in depth of
a particular substantive area. The written proposal of dissertation is
submitted and examined by his doctoral committee in this stage, with the
intention of having the committee play an increasingly active role in the
overall development of the student.

Academic Program

The training program in clinical psychology is no longer offered
at the Department of Psychology at Stanford University (Graduate admissions
letter, 1973). Therefore, students who are interested in the practice of
clinical psychology and in service careers are first referred to other
universities which provide appropriate instruction and practicum training
in clinical skills. This program is primarily designed for students who
are interested in a career of teaching and research.

Autonomous Program

The California School of Professional Psychology (Petthurst, 1970)
Program is based upon two different assumptions: a) that equally effective,
if not more effective, programs of professional training can be based on
a curriculum sequenced and integrated with practice and internship experi-
ences at all levels within uniquely planned programs of undergraduate and
graduate studies, and b) that these new programs will be most appropriately
administered and planned by faculties of professional psychologists,
whether the professional school is established within a university setting
or operates autonomously in the community.
It proposes a program by which psychologists are professional first and scientists second; clinicians are clinicians first and researchers second. This new concept recognizes that professional psychology has evolved its own skills, standards, requirements, needs, traditions, styles of innovation, etc. It is also believed that a professional school is in a far better position to integrate sub-doctoral with doctoral training in a "career ladder" than an academic department of psychology because professional people in the community are in closer touch with agency needs, job requirements, and administrative regulations as well as general public demand.

The concept of a professional school of psychology administered by professionals grew out of an awareness of three problem conditions directly relevant to the crisis in training in psychology, conditions that prevail in almost every large metropolitan community in the United States today: 

a) the training program administered by the academic departments of psychology on the scientist-professional model has monopolized the scene for two decades, and they are aware that not enough people are being trained; 

b) in many communities potential training settings are not utilized. Social agencies, comprehensive health centers, correctional settings, residential treatment programs, group practices, psychological service centers, management consulting groups, community college service centers, primary and secondary school settings, as well as mental hygiene clinics and child guidance centers, in many instances, could afford excellent and diversified training opportunities. Existing training programs generally do not use these sources. They cling predominately (60% of APA-approved internships) to the traditional hospital-bound and clinic-bound medical psychiatric settings instead; 

c) thousands of bright, motivated, intuitive young people
want to enter the getting-involved, helping-inquiring "people profession" of psychology but are turned away in droves.

The state-association-sponsored school of professional psychology implemented through the California School of Professional Psychology is proposing a professional psychologist who will have first hand knowledge of human behavior, of the nature of intrapersonal, interpersonal, and group transactions, who will understand the role of biochemical, physiological, sociocultural, religious, economic, and institutional factors in the life of individuals, and who will also be knowledgeable about the fabric of social organization. He will also be a person who is able to communicate with people of his own and other ethnic and social groups; he will be committed to human values. Lastly, he will be an educated person, leaving the school equipped with the techniques of continuous growth and education, and at the higher levels of training with the tools and methods of scientific investigation, so that he will be able to make his own contribution to psychological theory and professional technique.

The curriculum is designed to provide: a) a sequential program of six trimesters (90 units), including six months of supervised work experiences in a selected specialty, leading to an AA degree. This qualifies the holder to function as a skilled paraprofessional in one of a number of specialty fields; b) a sequential program of nine trimesters (135 units), including practice, but not professional work experience, leading to a BA degree; c) a sequential program of 12 trimesters (180 units) including practice, internships, a research project, and professional work experience in an area of specialization, leading to an MA degree; d) a sequential program of 18 trimesters (270 units) including practice, internships, and professional experience in one major and two minor specialties and the completion of doctoral research, leading to a Ph.D. degree.
Post-Doctoral Program

One indication of the movement which clinical psychology has been experiencing in the past ten years, toward a more behaviorist and social learning conceptualization of human functioning, is the post-doctoral program in behavior modification which was instituted in the Department of Psychology of the University of New York at Stony Brook during October of 1966 (Davidson, Golfried, Kramer, 1970).

Behavior modification is conceptualized as an experimental approach toward a specific area of behavior. There is an emphasis on the operational definition of terms, careful and impassionate experimentation, and a tendency toward searching for principles in the experimental area in place of the more speculative approach in some contemporary psychology. Without discarding prior knowledge and other processes, the importance of operant conditioning as a vehicle for the modification of behavior is recognized.

It is considered that the psychologist behavior modifier does not deal with dependence, anxiety or depression nor so but with specific identifiable behaviors designated in one way or another, and found in specific examples of how this conduct is manifested.

The value of the foregoing technique is in the utility that this identification will present in the selection of alternatives for the treatment as well as the manipulation of variables. The task of the psychologist is to give individuality to this plan and in the application and implementation of these principles of learning in a most appropriate manner for the client, and at the same time to be aware of, and contribute to, the new developments in behavior modification. The members of the faculty of this program (Davidson, Golfried, Kramer, 1970) believe
that the clinical activity in this behaviorist structure, basically, is very similar to the reasoning carried out in psychological research.

This program takes one year and is only for persons who hold the Ph.D. in Psychology. They have twelve hours per person in direct contact with clients, and the types of problems include insecurity, deficiencies in social abilities, crisis of identity, experiential anxiety, anxiety in interpersonal relations, marital problems, homosexuality, impotency, obesity, depression, and others.

The psychologists also work in emergency situations at the level of consultants. There are seminars and training in techniques such as positive conditioning, aversive sensitivity training, rational emotive therapy, and overt conditioning. There are weekly discussions about different clinical and professional topics, and they deal, in general, with the development of the clinical psychologist as a practical scientist.
Chapter IV

Training Programs of Psychologists in Peru: Conclusions and Recommendations

Education in psychology in Peru at the higher or university level follows the general plan decreed by the General Law of Education (Decreto Ley 19326; 1972), and it may be said that this is in a stage of transition between that traditionally practiced and the implementation of those programs to the new structure that the new Peruvian educational policies maintain.

Upon having completed secondary school and having passed the required university entrance examination, the student follows the plan of general studies for two years. During this time the student is exposed to a variety of vocational choices or directions, and then for three years he specialises in the area of his choice. During this period almost all of the branches or psychological specialties are part of the domain of the student. At least three large sub-divisions are recognized from which he may select, one being basic and almost obligatory: Clinical Psychology understood as psychological reality in which theory is put into practice in personal contacts with clients or patients. The other two are Educational or School Psychology which has as its primary focus people and their interrelationships in the educational setting whether this be beginning basic (elementary) or higher level, and Industrial Psychology in which the psychological principles and practices are applied to the economic world of industry, commerce and business.
After these three years of study the student must complete a year of professional practice in the area he has selected. There exists a variety, although not an ample supply, of institutions in which he may carry out the aforementioned practice, and in which he performs the role of service in the sense that the welfare of the client comes first; the psychological theory, techniques and capabilities serve the specific need of the client. Upon the completion of this period of practice the student receives the degree of Bachelor in Psychology. With the presentation and defense of two cases, such as in the manner of presentation and defense of thesis, he receives the professional title in psychology which is not quite the equivalent of the Masters or Doctorate in universities in the United States, but which may be considered somewhere between the two degrees. Perhaps with the new law and its implementation in Peru, it will be easier to equate the degrees and titles with those of other nations.

Giving emphasis to the national reality, the professional education of the psychologist begins with the first cycle in the schools of professional education, with the Bachelor's degree being granted after successful completion of six to eight academic semesters. The first academic and professional specialization is begun at the University resulting in the title of Licenciado or Maestria (Master). This may require four to six semesters. Finally the third level, or cycle, of higher education or studies corresponds to the doctorate in which there is a marked emphasis on research.

Curriculum

The following is a list of courses that must be taken in order to obtain a psychology degree at San Agustin University in Arequipa, Peru (San Agustin University Brochure, 1973).
During the first year the emphasis is on a general scientific background that includes two annual courses, Spanish Language and Mathematics and six semester courses including Biology, History of Psychology, Economic Politics, General Sociology, Philosophical Conception (Dialectic Materialism), and Psychology of Motivation. In general a course is equivalent to three credit hours.

The second year is transitional and includes two annual courses, Developmental Psychology and Experimental Psychology and courses that could be taken during the third or fourth semesters such as Physiology, Statistics, Neuroanatomy, Economic Problems and Psychology of Motivation.

The third year is also transitional and during the fifth semester the student takes Experimental Psychology, Psychological Tests I, and Psychology of Personality and Character. In the sixth semester there is Neurophysiology, Materialist and Dialectical Psychology and Psychological interview.

In the fourth year during the seventh semester the student takes courses in Neurophysiology, Psychological Tests II, Psychopathology, Industrial Psychology and Consumer Psychology. For the eighth semester the courses are Psychodynamic Psychology, Psychophysic Psychology, and Educational Psychology and Group Orientation.

The fifth year is devoted to Psychological Tests III, Psychophysic Psychology of Delinquency, Clinical Psychology during the ninth semester, with Psychological Tests, Psychological Diagnosis, Individual Orientation, Vocational and Technical Orientation and Personnel Selection, Language Psychotherapy, and Special Education during the tenth semester.
Both semesters of the sixth year are spent in professional practicum with emphasis in an area of specialization such as Clinical Psychology, Industrial Psychology or School Psychology. Since most of the courses taken have their own practicum aspect, students are exposed from early stages to the practical psychological perspective.

Conclusions and Recommendations

In the previous chapters a survey was made of representative psychology programs of the United States and Peru. Based upon the aforementioned ideas, the following conclusions and recommendations are made:

1. Psychology is an academic discipline, a science and a profession. This unity must be preserved even in practical specializations.

2. Classifications, or divisions, in psychology serve to place emphasis on specific fields in the best possible way. In that sense it is desirable that the psychologist be an expert in at least one psychological sub-field. That sub-field must be related to the social needs of the cultural environment in which he will be working.

3. The pyramidal structure with many Bachelors, some Masters and a few Ph.D.s in Psychology must provide terminal goals in those degrees in order to serve at different levels as society needs. In this way, still reserving the high psychological abilities and responsibilities to people with higher levels of training (Ph.D.), Bachelors and Masters must be prepared for secondary responsibilities in the Psychological Services that the profession of psychology provides to society.

4. It is desirable that most teachers of psychology work for and fulfill the specific competences required by the nature of the profession:
competence in counseling and consultation. In short, being psychologists
themselves and serving as models to their students.

5. Given the nature of psychology, the strict following of the ethical
rules for psychologists must be enforced even to the Bachelor's level.

6. Assuming the welfare of the client(s) is the main reason for the
existence of psychology as a profession, scientific knowledge must be
applied to him (her) and not the client(s) to a given paradigm or
technique. Psychology serves people, people do not serve psychology.
However, a symbiotic process of feedback dictates the emphasis.

7. Psychotherapy is the point of union between science and art,
knowledge and practice in the field of psychology. Because of this,
special care must be taken in its instruction and education. The standards
in psychotherapy mandated by the Division of Psychotherapy of the American
Psychological Association (1970) are highly critical.

8. There are six basic activity-roles for the psychologist: adminis-
tration, consultation, diagnosis, therapy, research and teaching. The em-
phasis in a given model must be a variable of the scientific environment.

9. In the Psychological Service Center concept, it is desirable to
have the following characteristics: it must be affiliated with a university
or psychological associations; it must provide service to the public and
at the same time provide training to psychologists; it must have scientific
and educational goals rather than economic goals; there must be close
supervision by members of the university faculty; it must bring an image
of the psychologist as an independent and responsible professional; there
must be a possibility for the clients to be referred by different sources,
as individuals, university, private professionals and government agencies;
there must be a possibility for doing some kind of research, individual
and group therapy and community consultation; and finally, there must be
the capability of creating specific programs asked by the community.

10. The counseling service in the university setting, with its
developmental and remedial roles, is a kind of service which can no longer
be overlooked or relegated to a minor position. The guidelines for
university and college counseling services developed by the University
and College Counseling Center Directors task force (1970) provides a model
that contributes to a greater understanding of counseling on campus, its
development and the maintenance of high standards in its functioning.

11. It is imperative that the psychologist in Peru take the role of
active participant in developing community resources. This preventive,
community-based function must be learned through actual participation
rather than through abstract discussion. For their training, the role
models will more those of consultants than of therapists, focusing on
crisis intervention and short term treatment approaches, individual,
group and agency consultation, formal and informal community education
experiences, and both program development and program evaluation.

12. From the descriptive review of some training programs of psychology
in the United States, the idea of flexibility, change and development in
dealing with more sophisticated (or perhaps obvious) social needs is
inferred. This constant re-definition and experimentation with new
approaches shows the stage of development of psychology as a profession.
In this sense, psychology as a profession in Peru may not have a great
variety of orientations, but the aim of definition and improvement in
its spatial-temporal setting, the need to know what psychology as a
science offers and how that science can best be applied in the mutual interrelations between people and the science of psychology, must be stressed.

13. Because of the transitional stage in the implementation of new programs and structures for the training of psychologists in Peru, it is desirable that the criterion for validity of different ideas and techniques (as experimentally practiced already in some training programs in the United States) be in the light of its own specific cultural environment in which these ideas and techniques will empirically demonstrate their utility.

14. Behavior modification technique is a critical experimental view focused on operational defined behaviors and is a therapeutic treatment too valuable to be ignored in the training of psychologists in the Peruvian setting. The application of its principles to the shaping and relearning of maladaptive behavior responses, moreover, is recommended.

15. The rather rigid curriculum for training psychologists in San Agustin University is obviously inhibiting, and a more flexible approach to subject matter is desirable. Offering the student more freedom in selection of courses during the final years, and providing the student with special seminars or courses will facilitate this transition from the academic to the "real world".

16. More emphasis must be placed on training psychologists in social and practical research. The provision of basic facilities and incentives in the nature of governmental, private or foundation financial support and encouragement will be a profitable investment in social welfare in the long run.
17. It is desirable to have a training program which emphasizes the delivering of professional services in clinical and community settings as basic function (rather than research). These services will include direct clinical activity, administrative responsibility, organization and evaluation of programs, and training of personnel in the field of Mental Health.

In general, the conclusions and recommendations noted above will serve only as a point of reference, or departure, for improvement in the training of psychologists in Peru. It is recognized that a research study not only more complete and in greater depth, but in continuous revision and updating in keeping with new and ongoing developments in the study of psychology, is needed. However, it is hoped that this work will contribute in some way to the advancement of psychology in Peru.
References


kirk, B. A., Johnson, A. F., redfield, J. B., free, J. E., michel, J.,


Cusan, L. One kind of community psychology training program. Professional Psychology, 1970, 1, 143-150.

Cusan, L. The community psychology institute of the University of Cincinnati, in the current status of psychological service centers by Small and Theaman. Professional Psychology, 1971, 2, 67-68.


Pinkerton, R. S., Miller, F. T., Bigerton, J. L. The community mental health center and psychology internship training. Professional Psychology, 1972, 2, 57-62.

Pottharst, K. E. In response. Professional Psychology, 1970, 1, 421-422.

Pottharst, K. E. To review vitality and provide a challenge in training - the California school of professional psychology. Professional Psychology, 1970, 1, 123-130.
Purdue University. The doctor of philosophy degree in scientific-professional psychology at Purdue University, 1972, 19p.


San Agustín University Brochure, 1973. Psychology Department, Arequipa, Peru.


University of Illinois. Clinical psychology program. Department of Psychology, Fall 1972, 2p.


