

PROGRAM MANUAL DOCTORAL PROGRAM IN CLINICAL PSYCHOLOGY UNIVERSITY OF DETROIT MERCY ACADEMIC YEAR 2017-18

This manual is designed to assist students with their progress through the Program and contains official policies as well as recommendations accumulated through the experience of our faculty members, current studentend alumni. It is to be considered supplemental to the published material appearing in the Graduate Catalog (available online at www.udme) canddeach student should make him/herself familiar with the policies contained within each. The policies and recommendations appearing in both are applicable from the time a student enters the Program and remain in effect throughout his or her inclusion in it.

The Doctoral Pogram in Clinical Psychologyt the University of Detroit Mercips accredited by the Committee on Accreditation, American Psychological Association, 750 First Street, N.E., Washington, D.C. 20002242, (202)3365979.

INTRODUCTION

The Detroit Mercydoctoral program in clinical psychology is based on a practice oriented scientispractitioner model. The program is aimed at training students to provide psychological services to the public based on sound ethical standards and on a thorough and currentunderstanding of psychological principles as tested by research. Professional practice is, therefore, conducted on a scientific base of knowledge, informed by research. The clinical context also provides an important guide to scholarly inquiry and hypist generation. The curriculum is designed to give the student simultaneous access to theory, research, and practice in the conviction that this simultaneous exposure not only potentiates the learning process, but also demonstrates the inseparability of theory and practice. Opportunities will be presented throughout the curriculum to allow students to participate in ongoing research projects, both theoretical and applied, as well as opportunities for clinical contact.

The content of the courses and the equence provides the student with epth knowledge of psychology and its application to clinical practice resting upon albased-theoretical perspective with significant emphasis on a psychoanalytic viewpoint, including both classical and contempary approaches. The choice of this viewpoint is grounded in the conviction that such a theoretical perspective provides a firm foundation for effective practice in any area of application and a base from which to understand other viewpoints. In atthieting, tr students are encouraged to draw upon the resources and areas of expertise of the entire departmental faculty. The curriculum is also designed to fulfill another essential goal: namely, that the student be exposed to a variety of problems, populatissues, and techniques of assessment and intervention. These serve as a basis for further development and innovation as students' interests and the demands of their professional situations dictate.

Based on this model, our training goals emizeas rofessional ethics, scholarship, social justice and cultural diversity, professional adaptability, and a commitment to lifelong learning.

Psychotherapy. American Psychologist, 63, (22)-109. There is also a growing interest in both personality issues and uncoircus processes in other areas of psychology, such as social, cognitive, and developmental psychology. The theoretical focus of the program provides a model for learning other theoretical perspectives in the field, as well as a foundation for applied learning. The curriculum is also designed to fulfill another essential goal: namely, that students be exposed to a variety of problems, populations, issues, and techniques of assessment and intervention. These serve as a basis for further development, professional growth, and innovation as students' interests and the demands of their professional situations dictate.

It is expected that our graduates will make contributions to the local community and to the wider society through their clinical work and through the contributions to the evolving body of scientific and professional knowledge that serves as the basis of their practice. We hope to train professionals who are committed to a lifetime of learning, pertaining both to professional issues and to major questions of human existence. Our graduates are employed in a variety of settings including independent practice, clinical and administrative positions in community mental health centers and social agencies, hospital practice, forensic work, research positions, and higher education. They also occupy positions of leadership in professional organizations and are involved in a broad range of professional activities.

The overall longrange goals of the program emanate from our training model and are directed toward the training of professional clinical psychologists who demonstrate and practice:

- 1. professional competence and adaptability
- 2. ethical standards and sensitivity to social justice issues
- 3. scholarly contributions to the field of psychology
- 4.

Competency 3a(3): Students will demonstrate skill in planning and conducting research.

Activities:

- a. Students will successfully complete an empirical study for the second year project.
- b. Students will successfully complete an independent, empirical study for the dissertation.
- c. Students are encouraged to collaborate with clinical and imical faculty on

ELECTIVES

In keeping with the studentocused mission of the University, each student is encouraged to take responsibility for the development of his/her elective program in consultation with a faculty advisor. Students may select elective courses in areas annæte Clinical Psychology-offered in Psychology and throughout the University. In addition, new psychology courses may be developed reflecting the changing issues in the field of Clinical Psychology. The purposes of the elective sequence included the Wing:

- a.) To develop one's knowledge in a specific area of professional interest, e.g. work with children, addiction studies, organizational psychology, etc.
- b.) To broaden or diversify one's knowledge base.

The following psychology electiveorses will be offered every other year. These courses represent areas of importance for clinical psychology and/or are required for psychology licensing in some states. Further, they support our training goal of professional adaptability.

PYC 6770	Child Therapy
PYC 6900	Group Psychotherapy
PYV 7650	Cognitive Therapy
PYC 7690	Human Sexuality
PYC 7740	Behavioral Treatment
PYC 7951	Clinical Research
PYC 7670	Human Neuropsychology
PYC 7953	Psychopharmacology
PYC 7954	Supervision and Consultation
PYC 7955	Psychology in the Hospital Setting

PYC 7950, listed as Topics in Psychology in the Detroit Mercy Graduate Catalogue, will also be used for new courses which focus on changing issues in the field of Clinical Psychology. See the Schedule of Courses for course listings for each semester

TRAINING METHODS

The goals, objectives and competencies listed above reflect the integration of theory, research, and practice in our training model. The curriculum is designed to provide a sequential, gradual, and cumulative set of experiences to allow students to acaquirelemonstrate understanding and competence in the areas necessary for the practice of clinical psychology. The entire program including course work, clinical experience, internship and dissertation totals 96 credit hours.

The program has specific remements that students must meet in order to maintain good standing and to ensure that satisfactory progress is made toward completion.

COURSEWORK

The content, sequence, and timing of courseworkdesigned to maximize attainment and mastery of the varius program educational goals. Courses are distributed through three (3) years, with elective courses throughout years 2 and 3. The schedule puts required courses, for the most part, during the regular nine (9) month academic cycle. Since some of the electourses are required in other graduate programs, those courses are offered during the Fall and Winter terms. Most course work is taken in the first two years. The second year project and practicum work are begun in the second year and completed in the third year. Courses that involve dissertation and offite practicum activities are scheduled after the most of the required course work is completed and when electives are likely to be offered in the evenings.

Scientific Bases of Psychology

To ensure that students are exmrl]j EMC /P ocomntarMmitegse-2 (f)-7 (lb. (r)-a1lc)4(r)3 (e)4 (e)4 4pl

Psychological Measurement

PYC 6700 - Assessment I

PYC 6710 – Assessment II

PYC 5730 - Child Assessment

PYC 6600 - Statistics I

PYC 6610 - Statistics II

Research Methodology and Techniques of Data Analysis

PYC 5040 – Basic Research Design

PYC 6600- Statistics I

PYC 6610 - Statistics II

PYC 6630 - Research Seminar

PYC 7980 - Directed Studies dear project - see below)*

Courses in statistics and research will be taken during the first and third years of study. These courses include the statistics sequence (PYCD,6Statistics I, and PYC 6610, Statistics II), as well as courses which focus more specifically on research methods and design (PYC 5040, Research Design, and PYC 6630, Research Seminar).

The Research Seminar (PYC 66) rovides an important context for demonstration of pre dissertation research competence. A requirement of this seminar is the preparation of two research proposals. Students may choose to follow through on one of these projects to completion prior to conducting their dissertation research.

Brown Bag Seminar—This is an informal monthly meeting in which faculty and psychologists from the community present their ongoing research projects to our clinical students. These meetings are required for first year students and highly recommended fryone else. The purposes of this seminar include the following: to provide students with first information about research being conducted by the psychology faculty and psychologists in the community in order to aid student selection of individual schair or assist in dissertation and secretary project research and/or direct other student research projects; to provide students with opportunities to take part in ongoing research projects in order to aid in further development of research skills and encourage publication efforts; and to further the development of model/mentor student/faculty relationships.

*Second Year Project –All students are required to complete a second year research project, to be declared by the end of the first year and pleted by November of the third year. The culmination of the project is a research report equivalent in quality to an article submitted to a refereed journal. The project is supervised by a faculty advisor and reviewed by a second reader. To support this work, students mussion up for up to three credit hours of independent study (PYC 7980) under the supervision of a faculty advisor. Students are strongly encouraged to choose a research project that is integrated into the ongoing research programulty a fac member.

Research Training in Off-Site Collaborative Programs—Detroit Mercyfaculty have long standing collaborative relationships with several clinical settings, through clinical work, consultative relationships, or through program alumni. Several students have benefited from these associations and have participated in research projects at Children's Hospital of Michigan, the Wayne State Medical School, the Center for Forensic Psychiatry, and the University of Michigan Institute for Social Research.

Foundations of Clinical Practice

To ensure that students are exposed to the current body of knowledge which comprise the scientific, methodological, and theoretical foundations of practice, the program includes several required and elective courses which address issues in the following areas:

psychology faculty. Clinical supervisors and faculty are invited periodically to participate in the weekly case conference at the clinic. Treatment cases are also monitored by the Clinic Director (who teaches PYC 7500) through the weekly case conference and written reviews of patient treatment needs and progress, which are part of the standard operating res of the clinic. The Clinic Director also conducts a weekly group psychotherapy supervision session, attended by students who are running group treatment in the clinic. Student therapist evaluations are completed by clinical supervisors each tend submitted to the Clinic Director.

Off-Site Clinical Practicum – Beginning in the third year of training, students participate in an off-site practicum in one of the community settings in the metropolitan Detroit area. This practicum is done at a multisciplinary, off-campus agency or hospital chosen by the student and approved by the Director of Clinical Training. Students register for PYC 7530 (Clinical Practicum) each term that they are involved in arsite practicum. While students work with a variety of mental health and human service professionals in our programs the practicual, the student's primary supervisor is always a full bensed doctoral level psychologist who has completed at least two years of supervised-postoral experiecte in an organized health care setting.

Students are required to complete a minimum of 500 hours-ofterpracticum training. However, the majority of our students (more than 95%) complete at least 1000 hours of experience in offsite practica. The mosypical pattern is for students to complete two sife practica of approximately 1000 hours each, in both the third and fourth years of study, for a total of approximately 2000 hours of offste practicum experience. In general, the student's first outside practicum focuses on psychodiagnostic testing and report writing, which is done under the supervision of a fully licensed psychologist. Students may also receive some therapeutic training during their first off

Michigan Psychoanalytic Institute, the programsconsors an annual series of seminars in which a prominent psychoanalyst is invited to lecture and participate in case conferences. The program at Detroit Merchosts a case conference in whome of our clinical students presents a case for consultation and supervision by the visiting professor. The conference is attended by all students and clinical faculty and provides a rich opportunity for clinical experience and learning.

Internship Preparation - As noted in the philosophy of training, our program is designed to provide students with a sequential, gradual, and cumulative set of training experiences with the ultimate goal of preparing students for the practice of professional psychology. We strive to help students integrate science and practice through coursework, research, and applied training e r(w) (c) hn2 (l)-1 (a)2(hip)2 (o se)4 d, ti2 (on)]TJ 4.11 -(e)4 6.46e e (c)4 (i)-2 (e)4 (n /P <<(s)-172 (s)- (a)4 p.

All students who are candidates for the doctoral degree in Clinical Psychology at the University of Detroit Mercy fulfill the reqirements for dissertation and competence in the area of research by conducting "an original, independent scientific investigation that furthers psychological knowledge." [Belar & Perry (1992) National Conference on Scientistitioner Education and raining for the Professional Practice of Psychology. American Psychologist, 74.] This is interpreted to mean the development and successful execution of a research project that involves the collection of data, its analysis and interpretation. The talks on is viewed as a contribution to the body of knowledge in psychology. In keeping with our preciented scientist practitioner model, students are encouraged to conceptualize clinical practice as an important guide to scholarly inquiry and cause of hypotheses generation, with formal research seen as providing a context for verification.

meeting of the committee to reselvisagreements about requested changes and, if necessary, the student may grieve through approved department channels for redress.

After completion of the dissertation research and writing rall dissertation defense hearing is scheduled. The dissertation defense is a public meeting, to be held at the University. Consequently, the student must inform the Director of Clinical Training and the Department Chair of the time and place of the oral defense so that the University community can be informed. Acompleted copy of the dissertation must be filed with the Psychology Department Chair and the Dean of the College of Liberal Arts and Education at least two weeks prior to the defense. This will allow interested members of the University community dichrea dissertation prior to the defense.

Course GradesGood Standing

Students must be continuously registered and maintain a minimum GPA of 3.0 to be considered good standing in the Doctoral Program in Clinical Psychology. Dean of the College of Liberal Arts and Education will dismiss students who earn two grades of C+ or lower unless the student can demonstrate unusual or extraordinary circumstances which resulted in deficient performance. A grade below a B in any practicum course or internship is also considered grounds for dismissal from the program. Upon successful completion of coursework, students are awarded a Master in Clinical Psychology.

The continuous registration also applies to students who have completed all program requirements except for the dissertation. That is, they must be registered for either PYC 7980 or PYC 7990 three terms per year (Terms I, II and III). Provisions carable for individuals who wish to petition for a leave of absence for a specified time. Such requests should be made in writing and will be considered on an individual basis by Clinical Training Committee and the Dean of the College of Liberal Arts and Edition. Students are required to advise the Program Director of any change of address or employment status.

Comprehensive Examinations

Students who have successfully completed all coursework may sit for comprehensive examinations. These exams are administered in September and in May of each academic year. Students must register with the Director of Clinical Training to take the examisatione examinations take place over two days, and students will be required to write answers to questions in the following four areas: Psychopathology, Research, Assessment, and Psychotherapy.

The purposes of these examinations include the following:

- x Demonstration of competence in the attainment of stated program educational goals.
- x Integration of knowledge from different areas of psychology in general (e.g. developmental and clinical) and/or areas of application (e.g. assessment and research).

Students must successfully pass their comprehensive examinations in order to be considered a doctoral candidate and will be given only two opportunities to pass. In practice, this means that students may not register for PYC 7990, Dissertation, until they have passed the comprehensive examinations. Following the successful completion of comprehensive

supervisors and training faculty. A variety of methods are used including:

- a. Evaluation by clinical supervisors each term formionse practicum and annually for off-site practica and internship placements.
- b. Annual inperson evaluation of studeperformance by the Director of Clinical Training (or designee) for each of the first three years of the clinical training program, including review of course grades. These evaluations are reviewed by the Clinical Training Committee.
- c. Annual evaluation by faculty mentor/supervisor for tuition remission work.
- d. Evaluation by dissertation chairperson and committee members for students involved in the dissertation process.
- f. Written status reports for students who are in the fourth year and beyomehaout annually by the Director of Clinical Training.-prerson interviews are scheduled as necessary.

Policy for Required Credit Hours in Ph.D. Program

The Clinical Training Committee has approved the following guidelines for immediate implementation as of January 21, 2003:

- 1. Students entering the Doctoral Program following the completion of a BA/BS degree must complete a minimm of 96 credit hourswithin the Ph.D. program attention Mercy.
- Students entering the Doctoral Program following the completion of a MA/MS in Clinical Psychology must complete a minimum of 72 credit howithin the Ph.D. program at Detroit Mercy
 - a. Students entering the Doctoral Program following the completion of a MA in Clinical Psychology from the University of Detroit Mercy will receive advanced standing for overlapping courses up to 24 credit hours.
 - b. Students entering the Doctoral Program follogythe completion of MA/MS in Clinical Psychology at an institution other than Detroit Mercay transfer in up to 12 credit hours for comparable courses. Transferred courses will appear on the students' Detroit Merctranscripts. Acceptance of transfed credits is contingent upon written approval by the faculty member teaching the course in question and review by the Director of Clinical Training.
 - c. Students entering the Doctoral Program following the completion of a MA/MS from another institution may waive courses that duplicate courses in the Detroit Mercy program. Waived courses do not appear on the students' Detroit Mercy transcripts. Waiver of courses is contingent upon written approval by the faculty member teaching the course in question axide we of the Director of Clinical Training.
- 3. Students entering the Doctoral Program following the completion of Ph.D. in another area of Psychology must complete a minimum of 60 credit howithin the Ph.D. program at Detroit MercyMichigan licensing equirements may require that additional courses be taken. Since Michigan licensing policy requires that an individual must receive their training from the institution that grants their Ph.D., students must complete at least one 500 our outside practicum comprehensive examinations, a-placetoral internship, and defend a dissertation (registering for a minimum of 3 credit hours of PYC 7990).
- 4. While enrolled in Detroit Merdy Doctoral Program, all students must complete a minimum of 15 credit hours of approved electives.
- All students in the Doctoral Program must complettleast 90 hours of ihouse

practicum experience and at least one 500 hour outside practicum, regardless of previous experience. All students must complete comprehensive examinations in Assessment, Psychotherapy, Psychopathology, and Research. All students must complete a 2000 hour potential internship.

6. Upon recommendation by the Director of Clinical Training, an Ad Hoc Committee selected from the Clinical Training Committee caniew requests for transfer and/or waiver of courses to accommodate any special circumstances that may arise that may not have been addressed in these guidelines.

Prior Graduate Degrees/Advanced Standing

The curriculum for students with prior clinical agluate expertise (most commonly a Master's Degree in clinical psychology or its equivalent) is identical to that of those students

Masters Degrees

There is no trminal Master's Degree in the Clinical Psychology Ph.D. Program at the University of Detroit Mercy. However, students may apply for a Master's Degree in Clinical Psychology after completing the requirements listed below. All required cou(isels) ideal electives) and the practica must be completed before the degree will be awarded.

COURSES IN PSYCHOLOGY FOUNDATIONS

PYC 5000 Social Psychology

PYC 6040Learning and Memory

PYC 6500 History and Systems

PYC 6510 Physiological Psychology

PYC 6550 Psychoanalytic Concepts

PYC 6740 Developmental Psychology

PYC 6930 Ethics

PYC 7750 Cultural Diversity

ASSESSMENT

PYC 5230 Child Assessment

PYC 6700 Psychological Assessment I

PYC 6710 Psychological Assessment II

PYC 6730 Psychological Assessment III

PYC 7530 Clinical Practicum

THERAPY

PYC 6880 Principles of Therapy

PYC 6890 Theories of Psychotherapy

PYC 7500 Therapy Practicu(Case Conference)

STATISTICS AND RESEARCH DESIGN

PYC 5040 Basic Research Design

PYC 6600 Statistics Methods I

PYC 6610 Statistics Methods II

PYC 6630 Research Seminar

PERSONALITY AND PSYCHOPATHOLOGY

PYC 6540 Theories of Personality PYC 6850 Psychopathology I PYC 6860 Psychopathology II

Five (5) elective courses totaling credit hours

Incomplete Work

The University policy on incomplete grades will be followed: the requirements of the course must be completed by the end of the following term. In rare and unusual cases, the student may petition the Dean for an extension of the deadline for removal of an "I" grade. A letter should be sent to the Dean of the College of Liberal Arts and Education requesting the extension, stating the reason for the request, and specifying the new deadline requested. This letter should be companied by a recommendation from the Program Directtore Department Chairperson.

- 1. It is the student's responsibility to initiate the request for an "I" grade. The grade of "I" should not be assigned by the instructor unless requested by the student
- 2. The petition for an "I" must be filed after the instructor has approved the request for an "I" grade.
- 3. Students have 8 weeks from the end of the semester from 4 (vem-2 (ude)4 (nt)2r dl)-2w I(r)3

Comprehensive Examinations. If it is decided that the student shall be readmitted, the policies of the University dictate that a copy of the student's request for readmission be submitted to the Dean's office together with the standard application fee set by the University. If this procedure is not followed, the student will not be allowed to register.

PROCEDURES FOR HANDLING STUDENT IMPAIRMENT

Personal and/or interpersonal problems may arise during the course of the clini training program. We recognize that students are likely to experience stress related to the demands of a graduate school program, in addition to stress related to such issues as change in employment status, family difficulties, healthlated mattersetc. Some of the demands of graduate work in the context of a clinical training program include involvement in difficult and challenging clinical work, and close working relationships with course instructors, advisors, and clinical supervisors which may increase students' sense of personal and professional vulnerability. Thus, while the training program presents important opportunities for personal and professional development, it is also an occasion for increased stress and vulnerability.

Activities, procedures, and opportunities to facilitate growth and minimize stress which are provided by the program include (but are not limited to) the following: orientation meetings, individualized program planning, clear and timely evaluations which includes estions for positive change, contact with individuals who may provide support (e.g. student and/or faculty mentors), program faculty attention to student work assignments and the demands of clinical work, and student meetings with the Director of Clinical Training to address issues of general concern as they occur. In addition, students chapose to seek out personal psychotherapy during the course of their clinical training program, both as a means of addressing personal problems which may arise and also as an important educational experience.

The issue of student impairment related to personaC (nt)-2 (a)4 (nd/)-2 (or)-1 (i)-te2 (ori)-2 (m)-0 (y)20i(pa)4 (i)-2T -2 (-2 (ndi)-2 ()3 (a)4 (c)4 (ul))-2 (he(t)-2 (he)4(i)-2 (ng)13 (a)4 (p)-ou (i)-2T -1.15 Td [(-4 (er)-11

B. Professional Competency

Students are expected to demonstrate competent propriate for their level of training in the areas of psychotherapy and psychological assessment. This includes ensitivity to patient issues and effectiveness in managing interactions with patients, their family members, and/or other interested parties. In addition, students are expected to demonstrate mastery of coursework, evidenced by a grade point average of Bor above. More specific expectations are detailed in the following: Program Manual, University Psychology Clinic Procedures, and course syllabi.

C. Personal Functioning

The nature of the role of the professional psychologist involves close working relationships with people, necessitating awareness and management of one's presentation and personal issues. Students are expected:

1. to recognize and to deal appropriately with personal issues as they affect professional functioning

2. to manage personal stress;

3. to demonstrate appropriate interaction with peers, colleagues, staff, patients, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, colleagues, staff, patients, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, colleagues, staff, patients, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, colleagues, staff, patients, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, colleagues, staff, patients, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, etc., as well as awarenes is (e) is to demonstrate appropriate interaction with peers, etc., as well as awarenes is (e) is to demonstrate appropriate appropriate interaction with peers, etc., as well as awarenes is (e) is to demonstrate appropriate appropriate

A. Definition:

For purposes of this document, clinical student impairment is defined as an interference in professional functioning which is **eefled** in one or more of the following ways:

- 1) an inability and/or unwillingness to acquire and integrate professional
- standards into one's repertoire of professional behavior,
 2) an inability to acquire professional skills in order to reach aeptable level of competency,
- 3) an inability to control personal stress, psychological dysfunction, and/or excessive emotional reactions which interfere with professional functioning,
- 4) subsence abuse.

Problems typically become identified as impairments when they include one or more of the following characteristics:

- the student does not acknowledge, understand, or address the problem is identified.
- 2) the problem is not merely a reflection of a skill deficit which can be rectified by

academic or didactic training,

- 3) the quality of clinical services and/or academic performance by the sufficiently negatively affected, student is
 - 4) the problem is not restricted to one area of professional functioning,
- 5) a disproportionate amount of attention by faculty and/or clinical supervisors is required and/or
- 6) the student's behavior does not change as a function of feedback, remediation

efforts, and/or time.

From: Lamb, et. all., (1987) Confronting professional impairment during the internship: Identification, due process, and remediation. Professional Psychology: Research and Practice, 18 (6), 597603.

B. Identification

When problems are noted in any of the evaluative procedures described in the preceding, actions directed at remediation will be taken, as described in the following procedures. Problems identified by persons such as clinic patients, other students, or university staff will be verified by the training director or designee and discussed with the student.

C. Procedures

- 1. Informal discussion between student and individual who is identifying a problem. Recommendations for remediation are nvedeally.
- If the problem persists, or if it is observed in more than one setting, individual(s) reporting the problem will submit a written statement of the problem together with written recommendations for remediation, appropriate outcomes and a time line to the

- placed in the student's file. The training director will monitor efforts at remediation.
- 3. When recommended remediation is not followed or is unsatutea review hearing will be held to be attended by the individual reporting the problem, the student, a faculty advocate (who is not involved in the situation, to be selected by the student) and training director

STUDENT GRIEVANCE PROCEDURES

COLLEGE OF LIBERAL ARTS AND EDUCATION ACADEMIC GRIEVANCE POLICY (Approved April 22, 2003 by the CLAE CAP)

The moral center of a university is the relationship between teacher and student. The expertise of each faculty member is evaluated by peers in his or her discipline and that peer review forms the basis of the faculty member's moral authority to assign grades. It is the responsibility of the university to protect the integrity this academic evaluation process. At the same time, the University recognizes its responsibility to protect and promote student rights and freedoms in the classroom:

The professor in the classroom and in conference should encourage free discussion, inquiry, and expression. Student performance should be evaluated solely on an academic basis, not on opinions or conduct in matters unrelated to academic standards.

A. Protection of Freedom of Expression

Students should be free to take reasoned exception to the data or views offered in any course of study and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

B. Protection Against Improper Academic Evaluation

Students should have protection through orderly processlagainst prejudiced or capricious academic evaluation. At the same time, they are responsible for maintaining standards of academic performance established for each course in which they are enrolled (AAUP, 1995; p. 228).

It is the policy of the Colleg of Liberal Arts and Education that instructors are solely responsible for assessing and evaluating student work. Instructors have the authority to create grading criteria. Nevertheless, students have the right to appeal faculty decisions whereietveythely find evidence of capricious academic evaluation.

The instructors' criteria may contain objective standards for grades (i.e., accumulation of points, deductions for absences, etc.). However, the grading of essays and research papers are necessally based on subjective standards (i.e., quality is judged by the instructor's standard of quality rather than the student's). Other academic evaluations are also based upon faculty judgement, such as thesis or dissertation acceptance, or a decisiothabreatliness of a student to begin internship experience. Capriciaccademic evaluation is defined only as the following:

1. The assignment of a grade to a particular student on some basis other than

performance in the course;

the Department Chair's written report.

5. A standing CLAE Academic Grievance Committee will review all formal submissions in the case and may meet with the student and faculty member to review relevant issues. The committee will hold a grievance hearing within thirty (30) days following receipt of the written grievance. There may be a separate meeting withuther sand faculty

Forms

Forms have been developed to note certain major milestones in the program. These forms, appropriately filled out and signed, document the student's progress toward the achievement of the doctoral degre. Each form, after it is completed, should be submitted to the Director of Clinical Training for signature. It should then be signed by the Dean and filed in the Liberal Arts and Education office.

The forms are:

- 1. 2. 3. 4.
- 5. 6. 7.
- Selection, Approval, and Completion of Clinical Practicum Site.
 Eligibility for the Master's Degree in Clinical Psychology.
 Application to take Comprehensive Examination.
 Selection, Approval, and Completion of Internship Site.
 Selection of Person to Chair Dissertation Committee.
 Selection of Dissertation committee.
 Acceptance of the DisseroTj EMC /utm 911e08u.3 -0.92 Td (6)aD (6)aD6w 23.44 0 Tn.2

APPENDICES APPENDIX I

PSYCHOLOGY FACULTY

Core Clinical Faculty:

V. Barry Dauphin, Ph.D., ABPP Director of Clinical Training

Cheryl Munday, Ph.D., Clinic Director

Steven Abell, Ph.D., ABPP

Kristen Abraham, Ph.D.

Elizabeth Hill, Ph.D.

Steven Huprich, Ph.D.

Judy A. McCown, Ph.D.

John Porcerelli, Ph.D., ABPP

Linda Slowik, Ph.D., Department Chairperson

Margaret Stack, Ph.D., ABPP

Psychology Faculty:

Libby Balter Blume, Ph.D.

Sharla Fasko, Ph.D.

Harold Greene, Ph.D.

populations, and clinical judgment.

Below are selected publications.

Book

Dauphin, V. Barry (2006). Tantizing Times. Excitements, Disconnects, and Discontents in Contemporary American SocietyPeter Lang Publishing Group. New York | Bern, Siwtzerland

Selected Publications

Greene, H. H., Brown, J. M., & Dauphin, £2014). When do you look where you look? A visual field asymmetry Vision Research 102, 3340.

Dauphin, B. (2013). Therapists' Resistance to Understanding the Importance of Technology for Child and Adolescent Psychotherapy. Journal of Infant, Childdandolescent Psychotherapy 12 (1), 45-50 Peer Reviewed Journal

Dauphin, B. and Greene, H. (2012). Here's Looking at You. Eye Movement Exploration of

Palace? Psychoanalytic Review 95(6)(45-50).

Porcerelli, J, Dauphin, V. B, Ablon, S., Leitman, S., and Bambery, M. (2007) Psychoanalysis with Avoidant Personality Disorder: A Systematic Case Study. Psychotherapy: Research, Practice, Training and Education, 44, 113.

Selected Presentations

Dauphin, B. (2016). Contemporary Challenges in Educating Students About Psychoanalytic Ethics and Possible Solutions. Paper presented to the annual Spring conference of Division 39/APA. Westin Hotel, Atlanta, GA. April 9, 2016.

Dauphin, B. (2016). The Fault Is Not In Our Manual. Paper presented to the annual Spring conference of Division 39/APA. Westin Hotel, Atlanta, GA. April 8, 2016.

Christoff, M., Lotter, H. an Dauphin, B. (2016). Gender, Attachment, and Primary Process Affect. Poster presented to the annual Spring conference of Division 39/APA. Westin Hotel, Atlanta, GA. April 7, 2016.

Juve, M. Dauphin, B, Greene, H. and Boyle, M. (2016). Anxiety and Eye Movement Behavior in Identifying Facial Emotions and Responding to the Rorschach: A Comparison of Visual Tasks. Poster presented to the annual conference of the Society for Personality Assessment. Chicago Marriott Downtown. Chicago, IL. Matr 12, 2016.

Porcerelli, J., Dauphin, B Hinrichs, J., Munday, C., Kamoo, R. and Christkinger, P. (2016). Assessing Level of Personality Organization with the Psychodynamic Checklist for the Psychodynamic Diagnostic Manual. Paper presented to the annual conference of the Society for Personality Assessment. Chicago Marriott Downtown. Chicago, IL. March 10, 2016.

Gabriel, M., Dauphin, B, Slowik, L., McCown, J. and Maher, J. (2015). The Study of Clinical Judgment as it is Affected by Theoretical Orientation and Experience Level. Paper presented to the American Psychological Association 2015 Convention. Toronto, CA.

Christoff, M., Lotter, H., and auphin, B. (2015). Relationships Between Primary Affect Systems and Attachment Styles: A Preliminary Investigation. Poster presented to the American Psychological Association 2015 Convention. Toronto, CA.

Dauphin, B. (2015). Maintaining a Psychodynamic Focus in a University Setting. Paper presented to the Division 39 Spring Conference, Section V Panel Thepersance of Psychoanalytic Thinking from the Public Sector: Definite Problems, Possible Solutions, April 24, 2015, San Francisco, CA.

Juve, M., Dauphin, B, and Greene, H. (2015). The Heat Is On: Measuring Interest Areas on the Rorschach Using Heat Mappi Techniques. Poster presented to the Society for Personality Assessment. Brooklyn, NY March 5, 2015.

Christoff, M., Lotter, H. and auphin, B (2015). What's Love Got To Do With It? The Affect Neuroscience Personality Scales, Need for Affect, and Sexual Desire Inventory Poster presented to the Society for Personality Assessment. Brooklyn, NY March 6, 2015.

Lotter, H., Christoff, M. and Dauphin, B(2015). Together at Last? Primary Process Affect, Object Representations, and Defensiveness. Poster presented to the Society for Personality Assessment. Brooklyn, NY March 5, 2015.

Richardson, L., Porcerelli, J., Dauphin,, BMorris, P. and Murdoch, W. (2015). Attachment and Interpersonal Relatedness as Models Predicting Somatization, Physical Index Healthcare Utilization in Primary Care. Paper presented to the Society for Personality Assessment. Brooklyn, NY March 7, 2015.

CHERYL CASTELBERRY MUNDAY, PH.D.

Cheryl C. Munday, Ph.D. is Associate Professor of Psychology and Director of the Psychology Clinic at the University of Detroit MercyD(etroit Mercy) where she teaches case conference, assessment, child therapy, and ethics in the doctoral program in clinical psychology and undergraduate personality theory. Dr. Munday has a Bachelor of Arts degree in psychology from Cornell University, and a Master of Arts and Doctor of Philosophy degrees in clinical psychology from the University of Michigan. She is a licensed clinical psychologist with thirty two years experience specializing in assess and treatment of children and adolescents, adult psychotherapy, and consultation in professional education and training. Dr. Munday's extensive experience in doctoral education includes fifteen years indepeteral internship experience at the Detroit Psychiatric Institute where she was Director of Psychology and Psychology Training. For ten years Dr. Munday was a clinical supervisor and consultant to the predoctoral internship program in the Department of Psychiatry and Neberbavioral Sciences atna Grace Hospital.

Dr. Munday's research interests include racial and ethnic influences on diagnosis, cultural variables in clinical judgment, and psychological factors in bullying among selgedl children. She is a Faculty Affiliate with the Prografor Research on Black Americans, Institute for Social Research at the University of Michigan. She has been consultantiamelstigator on several federally funded studies examining race and psychiatric diagnosis and mental health treatment of AfricanAmericans. She received a grant from United Way of Southeastern Michigan for a two year school based antillying program. During a sabbatical year in 2005-2006, Dr. Munday extended her interests in mental health disparities and combassedly treatment as Assistant Professor, Center for Healthcare Effectiveness Research, School of Medicine, Wayne State University and consulted with the Detroit Wayne County Mental Health Agency on cultural competency, children's services and system transformation. Quality and the diagnosis of affective illness (5 RO1 MH 068804). Since becoming Director of the Psychology

Clinic in 2007, Dr. Munday has developed a clinic based research program with two Detroit Mercy Professors Union Faculty Research Awards to study patient characteristics (race, ethnicity, individual and cultural diversity), attrition and treatment engagement. Currently, she is also coinvestigator on the Highland Park Partnership, a university climic munity collaboration, funded by a Michigan State Housing Development Authority grant.

Dr. Munday has authored and **aot**hored publications in the Journal of Consulting **@hiolical**Psychology Journal of the National **books** Association Journal of Orthopsychiatry Cultural
Diversity and Ethnic Minority Psychology and Sage Publications. She has authored and coauthored presentations and posters at the American Psychological Association, American
Psychiatric Association American Psychological Society and the American Public Health
Association. She has reviewed articles for the Journal of Health Disparities Research and Policy
and the Journal of the National Medical Association.

Dr. Munday is a doctoral program and **imts**hip program site visitor for the Commission on Accreditation of the American Psychological Association. She is a 2007 Fellow of the Michigan Psychological Association.

Representative Publications/Presentations:

Munday C., Abelson, J., Jackson, Jellahcholic Depression (2013) In J. W. Barnhill (Ed.), DSM5 Clinical Cases Washington DC: American Psychiatric Publishing, in press

Munday C., Abelson, J., Jackson, J. (2013). Adjustment Disorder. In J. W. Barnhil (SM), 5 Clinical Cases Washington DC: American Psychiatric Publishing, in press

Thompson, E., Neighbors, H., Munday, C. & Treirweiler, S., (2003) Length of Stay, Referral To Aftercare, And Relospitalization Among Psychiatric Inpatients. Psychiatric Services, 54,1271276.

Trierweiler, S., Neighbors, H., Munday, C., Thompson E., Binion, V., Gomez, J. (in press). Clinician Attribution Associated With the Diagnosis of Schizophrenia In African American and NorAfrican American Patients. Journal of Consulting and Clinical Fortigg, 64, (3), 861867.

Neighbors, H., Trierweiller, S., Munday, C., Thompson, E., Binion, V., & Gomez, J., (in press). The Psychiatric Diagnosis of African Americans: Diagnostic Divergence in Clinician Structured Interviewing Conditions Journal of the National Medical Association.

Munday, C., (2004) <u>Cultural Competence In Graduate and Professional Educ</u>ation In <u>Psychology</u> 14th Annual Equity in the Classroom Conference, Michigan Department of Labor and Economic Growth, East Lansing, MI.

Thompson, E., Neighbors, H., Trierweiler, S., Munday, C. & Cohen, S. (2003) Race and <u>Differential Diagnosis</u>Poster Presentation, Annual Conference of the American Public Health Association, San Francisco, CA.

Rizzo, S., Munday, C., Neighbors, H., Thompson, E., Trierweiler, S. & Binion, V. (2003) Effects of Race and Gender On Treatment Diagn sister presentation Annual Conference of the American Psychological Society, New Orleans, LA.

Munday, C. (1999). <u>Bridging the Gap: Diagnostic Constructions and Telephic</u> Realities

Publications and Presentations -

intern at the Louis Stokes Cleveland VAMC, and subsequantlyne years a postdoctoral fellow at the John D. Dingell Detroit VAMand for two years as an Advanced Psychology Fellow in Psychology Fellowship in Mental Illness Research and Treatment sponsored by the VA National Serious Mental Illness Treatment Resource and Evaluation Center, VA Ann Arbor, and affiliated with the Universit

- ... Davis, C. L. (2012). Causapecific mortality among veterans with serious mental illness lost to follow-up. General Hospital Psychiatry, 34(6), 6553. doi:10.1016/j.genhosppsych.2012.05.014.
- Cohen, J. L., Abraham, K. M., Burk, J. P., & Stein, C. H. (2012). Emerging opportunities for psychologists: Joinign consumers in the recoveryiented care movement. Professional Psychology: Researchand Practice, 43(1), 231. doi:10.1037/a0024394.
- Abraham, K. M., & Stein, C. H. (2010). Staying connected: Young adults' felt obligation toward parents with and withoutental illness. Journal of Family Psychology, 24(2), 125.
- Abraham, K. M., & Stein, C. H. (2009). Case manager's expectations about employment for people with psychiatric disabilities. Psychiatric Rehabilitation Journal, 33(117), 9-doi:10.2975/33.1.2009.9.17.

ELIZABETH MARIE HILL, Ph.D.

Elizabeth M. Hill, Ph.D. is Professor of Psychology at the University of Detroit Mercy (it Mercy). She teaches research methods and statistibs clinical psychology doctoral program, along with undergraduate biopsychology. Dr. Hill has a Bachelor of Arts degree in psychology from the University of Michigan, and Master of Science and Doctor of Philosophy degrees in experimental psychology of Tulane University. She also has a Master of Science in Biometry

Improvement grant to support offering new laboratory courses for general psychology majors. The grant, "Enriched Undergraalte Research Training Using Projectsed Laboratory Courses," was funded for \$143,596 total costs fyears.

Dr. Hill has authored and cauthored publications in <u>Substance Abulsaeunal of Socio-Economics Journal of Marriage and the Family, Journal of Divorce and Remarriage, Addiction,</u>

- (Eds.), Origins of the social mind: Evolutionary psychology and child development (pp. 108136). New York, NY US: Guilford Press.
- Waller, P.F., Hill, E.M., Maio, R.F., & Blow, F.C. (2003) Alcohol Potentiates Motor Vehicle Crash Injury Alcoholism: Clinical and Experimental Research, **295-7**03.
- Hill, E.M., Stoltenberg, S.F., Harris Bullard, K., Li,S., Zucker, R.A., & Burmeister, M. (2002) Antisocial alcoholism and serotonielated polymorphisms: Association tests. Psychiatric Genetics12, 143153.
- Hill, E.M. & Newlin, D. Evolutionary approaches to addiction: Introduction. Addition: 375-379.
- Hill, E.M., & Chow, K.L. (2002). Life history theory and risky drinkin@ddiction, 97:401-413.
- Ross, L.T.& Hill, E.M. (2002) Childhood unpredictability schemas for future unpredictability, and risk taking. Social Behavior and Personality, 3053474.

STEVEN K. HUPRICH, Ph.D., LP

Dr. Steven Huprich is Professor of Psychology in the Psychology Department. Prior to that time, he was Director of Clinical Training for the clinical psychology PhD program at Wichita State University between 20122016, and continues to hold adjunct favorappointments in the Departments of Psychiatry & Behavioral Sciences and Family & Community Medicine at University of Kansas School of Medicit Verichita. Dr. Huprich has also been a core faculty member in clinical psychology doctoral programs at Bayloiv ersity (19992004) and Eastern Michigan University (20042014). Dr. Huprich is currently the Editor of the Journal of Personality Assessmeantd Presiden Elect of the International Society for the Study of Personality Disorders. He also has been saspaiate Editor for theournal of Personality Disorders (20092015). Dr. Huprich is the 2013 recipient of the Theodore Millon Award, which is awarded by Division 12 of the American Psychological Association and the American Psychological Foundation forithcareer excellence in personality psychology. He has a B.A. degree in Biology from Taylor University, a M.A. degree in clinical psychology from the University of Dayton, and a Ph.D. in clinical psychology from the University of North Carolina at Greensbro. He completed his protoctoral internship at the SUNY Upstate Medical University in Syracuse, NY and has advanced psychoanalytic training from the Michigan Psychoanalytic Institute. He is also a Fellow of the Society for Personality Assessment and recipient of the 2007 Martin Mayman award for the best theoretical paper published in the Journal of Personality Assessment. Huprich is fully licensed and maintains a private practice in which he sees adults and adolescents and conducts psychological evaluations.

Dr. Huprich has published almost 100 peeriewed articles, 17 book chapters or contributions,

and presented over 200 times in professional venues. His research interests are broadly within the classification, diagnosis, and assessment of personality disorders and pathology. Most of his

- Porcerelli, J. H., HutlBocks, A., Huprich, S. K., & Richardson, L. (2016). Do defensive mechanisms of pregnant mothers predict attachment security, social/emotional competence, and behavioral problems in two yeards? American Journal of Psychiatriy 3, 138146.
- Huprich, S. K.& Nelson, S. 2015). Advancing the assessment of personality pathology with the Cognitive Affective Processing System Journal of Personality Assessment, 467-777.
- Huprich, S. K., Pouliot, G. S., Nelson, S. M., Pouliot, S. K., Porcerelli, J. H., Cawood, C. D., & Albright, J. J. (2015). Factor structure of the assessment of qualitative and structural dimensions of object representations (AOR) schernal of Personality Assessment, 97, 605-615.
- Lengu, K., Evich, C., Nelson, S., & Huprich, S. K. (2015). Expanding the psychometric properties and utility of the Malignant Setegard Questionnaire and construct. Psychiatry Research229, 801808.
- Huprich, S. K. (2014). Malignant selfregard: A selfstructure enhancing the understanding of masochistic, depressive, and vulnerably narcissistic personal littles rd Review of Psychiatry, 2295-305.
- Huprich, S. K. & Nelson, S. (2014). Malignant sælfgard: Accounting for common underpinnings among depressive, masochistie death ating, and narcissitic personality disorders. Comprehensive Psychiatry, 55, 989.
- Huprich, S. K., De Fife, J., & Westen, D. (2013). Subtyping dysthymia by personality types with the SWAP-II. Journal of Affective Disorders, 15/254, 186192.
- Huprich, S. K. (2012). Considering the evidence and making the most empirically informed decision about depressive personality in the ESSMPersonality Disorders: Theory, Research, and Treatent 3, 470482.
- Roberts, C. R. D. & Huprich, S. K. (2012). Categorical and dimensional models of pathological narcissism: The case of Mr. Jameson. Journal of Clinical Psychology: In Session, 68, 898907.
 - Huprich, S. K., Pouliot, G., & Bruner, R. (2012) elf and other representations mediate

- Huprich, S. K., Bornstein, R. F., & Schmitt, T. (2011). Selfort methodology is insufficient for improving the assessment and classification of Axis II personality disorders. Journal of Personality Disorders, 25, 5570.
- Huprich, S. K., Schmitt, T., A., Richard, D. C. S., Zimmerman, M., & Chelminski, I. (2010). Comparing factor analytic models of DSWIpersonality disorder symptoms in psychiatric outpatientsPersonality Disorders: Theory, Treatment, and Research, 2,722-
- Huprich, S. K. (2009). What should become of depressive personality disorder in the DSM-V? Harvard Review of Psychiatry, 17, 49:
- Huprich, S. K., & Bornstein, R. F. (2007). Categorical and dimensional assessment of personality disorders: A consideration of the issues. Journal of Personality Assessment, 89, 3-15.
- Huprich, S. K., & Greenberg, R. P. (2003). Contemporary advances in the assessment of object relations. Clinical Psychology Review, 23, 608.

JUDY A. MCCOWN, PH.D.

Dr. McCown received her Master's and Ph.D. in Clinical Psychology from Wayne State University and her B.A. in Psychology from the University of Detroit. She joined the faculty in 1995. She teaches graduate courses in Psychopathology, Theories of Psychotherapy, and Cognitive Therapy as well as undergraduate courses in Introduction to Psychology, Lifespan Development, and History and Systems. She served as the academic chair for the Michigan Psychological Association and is a fellow in MPA. Dr. McCown is a tenured associate professor and is a fully licensed clinical psychologist.

From August 2001 through August 2009, Dr. McCown served as the Director of Clinical Training (a)4h(8 D)e2t(na)4P(e)44(nt)4W(hi\$ @ (a)4t(nt)4W(hi\$ @ (a)4t(nt)4W(hi\$ @ (a)4t(nt)4W(hi\$)4t(nt

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- compulsive disorder in Korean American womenster presented at annual meeting of the American Psychological Association, Toronto, Ontario.
- Kwon, J., & McCown, J.A. (2003, Augst). Predictors of psychological distress among Korean American women. Poster presented at annual meeting of the American Psychological Association, Toronto, Ontario.
- McCown, J. (2003). Primary prevention of schizophrenic expression. In T. Gullotta & M. Bloom (Eds.), Encyclopedia of Primary Prevention and Health Promotion. Kluwer Academic Publishing/Plenum Publishers.
- McCown, J., Fischer, D., Page, R., & Homant, M. (2001). Internet relationships: People who meet people. Cyberpsychology and Behavior,, 4(53)-596.
- McCown, J. (2000, August). Creative thinking in classical conditioning. Poster preaented annual meeting of the American Psychological Association, Washington, DC.
- McCown, J. (2000, May). The lexical decision task as a measure of cont**rofbeoh**ation processing. Poster presented at the annual meeting of the Midwestern Psychological Association, Chicago, IL.
- Fischer, D., & McCown, J. (1999, August). Associations between various caregiver arrangements and attachment security. Poster pressent the annual meeting to the American Psychological Association, Boston, MA.
- McCown, J., Stern, D., & Chapin, K. (1999, May). Effect of medication on information processing in schizophrenia. Poster presented at the annual meeting of Midwestern Psychobgical Association, Chicago, IL.

JOHN H. PORCERELLI, PH.D, ABPP

Dr. Porcerelli obtained his BA in Psychology from University of Michigan (Dearborn), his PhD form the University of Detroit, and a two postdoctoral fellowship from the Detroit Psychiatric Institute Hospital & Wayne State University Department of Professor and served as Director of Behavioral Medicine (1996)16) in the residency program in the Department of Family Medicine and Public Health Sciences We State University School of Medicine. At Detroit Mercyhe teaches graduate and undergraduate courses and supervises psycholtherapy, 2 Year Research Projects, and Dissertations. He is board certified in Clinical Psychology Clinical Health Psychology, American Board of Professional Psychology, and is a graduate of the Michigan Psychological Association, Society for Personality Assessment, American

- Porcerelli JH, Hurrell K, Cogan R, Jeffries K, Markova T. (2015) Personality Assessment Screener, childhood abuse, and adult particle ence in African American women using primary care. Assessment, 22, 7452.
- Porcerelli JH, Brennon S, Carty J, Ziadni M, Markova(2015) Can residents accurately rate communication skills during a resident OSCE? Journal of Graduate Medical Education, 3, 458461.
- Pouliot GS, Huprich SK, Nelson SM, Pouliot SK, Porcerelli JH, Cawood C., Albright, JJ (2015) Factor Structure of the Structural Dimensions of Object Representations Scale. Journal of Person JH,

adolescents. Her current research focuses on understanding the complexity of factors that contribute to youth violence, juvenile sexual offending, and/or other delinquent behavior.

Current Professional Activities:

Paper presented the International Society for the Study of Human Ethology Annual Conference, Vancouver, British Columbia, August 20, 1998

LIBBY BALTER BLUME, Ph.D.

Dr. Blume received her Ph.D. in Human Development and Family Studies from Texas Tech University her M.A. from San Francisco State University of her B.A. degree from University of California at Davis. She joined the faculty in 1987 and currently holds the positi of Professor of Psychology. Dr. Blume teaches courses in HDmanelopment, Family Development, Environmental Psychology, Visual Communication, and Women's & Gender Studies Her research focuses on feminist theory and the intersectionality of picked tities, and ethnicities Dr. Blume received the Presidential Appreciation Award from the National Council on Family Relations in 1996, the University of Detroit Mercy Faculty Excellence Award in 2015, and the Women & Gender Studies Lifetime Achievement Award in 2016.

Current Professional Activities:

Dr. Blume's primary areas of interest are child and adolescent development, parenting and family relationsfeminist theory, andommunity developmentShe is editoin-chief of Wiley-Blackwell's Journal of Family Theory & Revie@0142018), founding editor of Michigan Family Reviewand founding series editor of Groves Monographs on Marriage and Family. Dr. Blume is the Director of Developmental Psychology and Certified Family Life Education, an Approved Program of the National Council on Family Relations, and is an adjunct professor in the School of Architecture.

Representative Publications/Presentations:

- Blume, L. B., & Weatherston, R.W. (2017). Queering the campus gender landscape through visual arts praxis. In E. McNeil & J. Wermers (Eds.), Queendacapes: Mapping queer space(s) of praxis and pedagogyNew York NY: Palgrave.
- Blume, L. B. (2016). Feminist perspectives on famil(with E. Sharp); Middle childhood (with S. RosariePere). In C. L. Shehan (Ed.), Encyclopedia of family studies. New, York Wiley-Blackwell.
- Blume, L. B. (20102015). (Series Ed.)Groves Monographs on Marriage & Finily, Vob. 1-4. Ann Arbor, MI: Michigan Publishing.
- Buehler, C., & Blume, L. B. (2015). Metatheory and metamethod. [Special issue]. Journal of Family Theory & Review 7, 347349.
- Blume, L. B. (2014). Making connections: Toward a transdisciplinary family science [Special issue]. Journal of Family Theory Review, 61-4.

- Blume, L. B. (2014). Middle childhood. In H. Montgomery (EdC)hildhood studies. Oxford, England: Oxford University Press.
- Blume, L. B. (2013). [De]forming the figure: Spatial embodiment in architectural representation. Dichotomy, 19, 11d-35.
- Blume, L. B., Sani, A., & Ads, M. (2011). Arab immigrant families. In S. Ballard & A. Taylor (Eds.), Family life education with diverse populations (pp. **233**): Thousand Oaks, CA: Sage.

anxiety in young adults. Identity: An International Joar of Theory and Research, 4, 55-72.

Blume, L. B. (2004). Bridging gender theory and resea/Achymposium on feminist theory construction and research methodology [Special issue].

- Greene, H. H. (1999). Temporal relationships between eye fixations and manual reactions in visual search. Acta Psychologica. 101,1235-
- Katz, S., Brown, J. M., Smith, F. G., & Greene, H. (1998). Using the computer to examine behavior on the SAT reading comprehension task. Psychology: A Journal of Human Behavior 35, 4555.
- Greene, H. H., Washburn, D. A., & Gonzalez, F. A. (1997). Sitinglanaturalistic demands for speeded judgment. Behavior Research Methods, Instruments, & Computers, 29, 256-259.
- Greene, H. H., & Brown, J. M. (1997). Spatial interactions with real anothodalped illusory lines in vernier acuity.

and families. She practiced as a school psychologist in the metro Detroit area before coming to Detroit Mercyin the Fall of 2011. Her areas of interest and research include the development and validation of academic interventions for students with disabilities, schazed functioning of students with Autism Spectrum Disorders, and supervision and training issues in school psychology.

CAROL CRONIN WEISFELD, Ph.D.

Dr. Weisfeld received her Ph.D. in Human Development from University of Chicago and her B.A. degree from St. Xavier College. She joined the faculty in 1979 and currently holds the position of Professor of Psychology. She teaches courses in Lifespan Development, Hu Sexuality, and Health PsychologyHer current research focuses on human sex differences, marital satisfaction, evolutionary psychology, and exastural studies of human behavior. Dr. Weisfeld received the President's Award for Faculty Excellence fine University of Detroit Mercy in 1994 and the Distinguished Faculty Award in 2004.

Current Professional Activities:

Dr. Weisfeld serves as an evaluator for student awards for the International Society for Human Ethology, and she does additional volunteer work for the International group. She serves in numerous community organizations, including the boards of the Reconstructionist Congregation of Detroit, and the Jewish Historical Society of Michigane is active in shared governance activities at the University of Detroit Mercy.

Representative Publications/Presentations:

'LOORQ / 0 1RZDN 1 7 6 KDWWXFN . : HLVIHOG * (Butovskaya, M. & Shen, J. (2014)/hen the cat's away, the spouse will play: assemultural examination of mate guarding in married couplesurnal of Evolutionary Psychology, 12 (2). doi: 10.1556/JEPD-13-00003.

Weisfeld, C.C. & Silveri, A. (2014). A healthy respect for sex differences, with cardiovascular disease and posttraumastress disorder as cautionary lessons. In P. LaFreniere and G. Weisfeld (Eds.), Evolutionary Science of Human Behavingr. 381412). Linus Learning.

Weisfeld, G. & Weisfeld, C.C. (2014). An evolutionary analysis of marriage. P. LaFreniere and G. Weisfeld (Eds.), Evolutionary Science of Human Behápipar 307326). Linus Learning.

Weisfeld, C.C., & Weisfeld, G.E. (2013). Defining normal on the playground: What would Tinbergen do? Human Ethology Bulletin 28(42-22

Weisfeld, C.C., Dillon, L.M., Nowak, N.T., Mims, K.R., Weisfeld, G. Emamoglu, E.O., Butovskaya, M., & ShenJ. (2011). Sex differences and similarities in married couples: patterns across and within cultures. Archives of Sexual Behavior, 40, 1162-

Weisfeld, G.E., Nowak, N.T., Lucas, T.W., Weisfeld, C. Chalmoglu, E.O., Butovskaya, M., Shen J., & Parkhill, M.R. (2011)Do women seek humorousness in men because it signals intelligence? A crosscultural test. Humor: International Journal of Humor Research, 24, 435-462.

DeLecce, T., Shattuck, K., Weisfeld, C.C. & Stack, M. Sex Differences in Married Couples' Nonverbal Behavior as a Function of Marital Dynamics. Paper presented artrual meeting of the International Society for Human Ethology, Belem, Brazil, August 2014.

Weisfeld, C.C. (2009) Longerm partnership: What it means in the postmodern era. Invited presentation at the Psychology at the Millenium ConfeeeNatal, Brazil, April, 2009.

KATHLEEN ZIMMERMAN- OSTER, Ph.D.

Dr. ZimmermanOster is a Professor in the Department of Psychology at University of Detroit Mercy (Detroit Mercy) in Detroit, Michigan. She joined the faculty in 1989. In addition to her teaching responsibilities, she serves as the Director of the Industrial/Organizational Psychology Masters Degree Program and Director of Research, Evaluation and Leadership Development for the Institute for Leadership Development Institute at Detroit M&be has served as the Chair of the Steering Committee for Detroit Melss North Central Accreditation and several other University, College, and Department Committees. She is also President of TEST, Incorporated (Training, Evaluation, & Survey Technicians). TEST, Incorporated provides consultation. technical assistance, and applied research to business, industry, schools and universities, human service agencies, and foundations in the areas of program and performance evaluation, strategic and organizational planning, community relations and coalition development, organizational and leadership development, diversity training, and human resource management, training, and assessmented substance abuse prevention and youth development. She has provided services to over one hundred client organizations and institutions over the past 25 years including the W.K. Kellogg Foundation, University of Michigan, the Greenleaf Center for Selvendership, Henry Ford Hospital, Leadership Macomb, the Troy Community Coalition, the Greater Battle Creek Substance Abuse Council, the Waterford School District, the Chippewa Valley Coalition for Youth and Families, and Michigan's Children; to namewa f

Dr. ZimmermanOster received her MA and PhD in Social and Industrial Organizational Psychology from Wayne State University. She is a social/organizational psychologist with expertise in the areas of program assessment and evaluation; vocational psychologist with leadership development; and executive team development. She has extensive experience in the area of "leadership development across the lifespan"; including youth development and alcohol and other drug abuse prevention planning and research, eaglegouth development, and management and executive coaching. She has taught over 40 sections of courses on leadership development, psychology, and research methods uding program evaluation using a

INVITED PRESENTATION, Macomb County Office of Substance Abuse, Macomb Intermediate School District: Community Andrigung Coalitions: Positioning Your Coalition for Expansion and the Drug Free Communities Grandw or in the Future, November, 2011.

REFEREED PRESENTATION, Ran, S., Zarkowski, P., and Zimmerm@ster, K. "Women's Career Advancement in Jesuit Higher Education Institutions: Developing Multi-Functional Mentoring Relationships as a Strategy for Advancem@ap'er presented at the National Association of Women in Catholic Higher Education (NAWCHE) Annual Conference, Seattle, Washington, June, 2011.

REFEREED PRESENTATION, Cotton, A, and Zimmerma@ster, K. Does Physical Fitness Serve As a Buffer Against Trauma, Illness, and Environmental Hazards in Disadvantage Children? Paper presented at the Michigan Academy of Science, Arts & Letters Amual Conference, Alma, Michigan, March 2011.

INVITED PRESENTATION, "Using the Strategic Prevention Framework for Evaluation, Strategic Planning and Sustainability", Michi@affice of Drug Control Policy, SPFSIG Training, August and September 2010.

Selected Honors:

OUTSTANDING RESEARCH - Third AnnualDetroit MercyFaculty and Student Research Symposium and Poster Fair – CLAE Award \$50 Gift Card (given to students) - "A Qualitative MetaAnalysis of Greenleaf Servant Leadership Research, 2009.

OUTSTANDING EFFORT TO IMPROVE THE HEALTH OF THE COMMUNITY AWARD - Henry Ford Hospital School Health Team, for teaching and peer leader component of the St. Thecla SMART Program (Skills Mastery & Resistance Training), August, 2008.

SCHOLAR IN RESIDENCE, "Making the Case for Leadership Education: Leadership Lessons Leared"; University of Maryland's National Clearinghouse for Leadership Programs 2003 National Leadership Symposium ogram; University of Richmond, Jepson School of Leadership, Richmond, Virginia, July, 2003.

OUTSTANDING ASSESSMENT RESEARCH AWARD, American College Personnel Association, Commission IX Assessment for Student Development, March 2002, for: Cress, C.M., Astin, H., Zimmerm@ster, K.A., & Burkhardt, J.C. (January, 2001). Developmental Outcomes of College Students' Involvement in Leadership Activities. Journal of College Student Development, Vol. 42 No.2715-

APPENDIX II

UNIVERSITY OF DETROIT MERCY Helpful links:

Detroit Mercyhome page: http://www.udmercy.edu

WEBLINK and registration information: http://www.udmercy.edu/weblink/

Detroit MercyGraduate Catalog: http://www.udmercy.edu/catalog/

Library and online databse access: http://research.udmercy.edu/

Online phone directory for faculty and staff: http://my.udmercy.edu/index.html

Detroit MercyHealth Center: http://www.udmercy.edu/healthcenter/

Institutional Review Boat (IRB): http://www.udmercy.edu/academicaffairs/ospra/irb/

Campus raps: http://www.udmercy.edu/about/campus/locations/

Campus computer labshttp://it.udmercy.edu/lab_services.html

Knowledge course server (Bleboard): http://knowledge.udmercy.edu/

Detroit MercySexual Harassment Policy: http://www.udmercy.edu/hr/shpolicy.htm

Etc...: http://www.udmercy.edu/current_students/

PROFESSIONAL PSYCHOLOGY LINKS:

American Psychological Association: http://www.apa.org/

APA student page: http://www.apa.org/students/

APAGS: http://www.apa.org/apags/

APA - Gradpsych: http://gradpsych.apags.org/

American Psychologial Association Ethical Principles:

http://www.apa.org/ethics/code2002.html

Michigan Psychological Association:

http://www.michpsych.org/index.cfm?location=11&CFID=1411832&CFTOKEN=49470203

Licensing regulations for states, territories, and Canadian provinces:

http://www.uky.edu/Education/EDP/psyinfo2.html

State of Michigan Board of Psychology Licensing Rules:

http://www.state.mi.us/orr/emi/admincode.asp?AdminCode=Single&Admin_Num=33802501&Dp