



# Northwestern University (Feinberg) M.A. in Clinical Psychology (2-Year Program)

The Clinical Psychology M.A. at Northwestern's Feinberg School of Medicine is an intensive **8-quarter, two-year** full-time program <sup>1</sup>. It follows the scientist-practitioner model: students complete rigorous coursework in clinical theory, assessment, ethics, multicultural psychology, and research methods, **while simultaneously engaging in supervised clinical practicum and laboratory research**. The program's stated aims include developing foundational competencies in research design, analytics, and ethics <sup>2</sup> and integrating clinical science with practice. In practice, this means Year 1 emphasizes core theories and skills (psychotherapy models, assessment, diversity, lifespan development) and Year 2 deepens advanced intervention, systems theory, and scientific foundations, all under close faculty supervision. By the end of Year 2, students have accumulated ~700 total practicum hours ( $\geq 280$  direct client hours) <sup>3</sup> and a broad academic foundation, positioning them for doctoral-level study and clinical work.

## Year 1

### Fall Quarter (Year 1)

**Courses:** The Fall quarter includes three core 1-unit courses <sup>4</sup>: *Introduction to Psychotherapy*, *Psychological Assessment I*, and *Diversity in Psychological Science and Practice*. Together these classes establish basic psychotherapy skills, assessment knowledge, and cultural competence.

- **Introduction to Psychotherapy (1 unit):** Covers major theory-based models of counseling (e.g. psychodynamic, behavioral-cognitive, humanistic, family systems) and teaches foundational skills (active listening, empathy, case conceptualization). Students learn the common factors of therapy and practice basic techniques (rapport-building, basic interviewing) via role-play and supervised exercises. The course also explicitly addresses how cultural, contextual, and individual differences impact therapy <sup>5</sup>. (Representative texts: Corey's *Theory and Practice of Counseling*; the APA *Handbook of Psychotherapy*).
- **Psychological Assessment I (1 unit):** Introduces standardized assessment of intelligence and cognitive abilities. Students learn to administer and interpret tests (e.g. Wechsler scales, memory and achievement tests), conduct clinical interviews, and write integrated psychological reports. Emphasis is placed on developing accuracy in testing procedures and sensitivity to cultural/individual differences <sup>6</sup>. (Key readings: manual chapters for the WAIS/WISC, plus Kaplan & Saccuzzo's *Psychological Testing*). This course lays the groundwork for diagnostic skills used in later semesters.
- **Diversity in Psychological Science & Practice (1 unit):** Focuses on multicultural competence. Topics include theories and research on human diversity, cultural identity development, implicit bias, and ethical issues in diverse settings <sup>7</sup>. Students practice culturally responsive interviewing and examine case studies highlighting race, ethnicity, gender, sexual orientation, disability, and socioeconomic factors. (Typical readings: Sue & Sue's *Counseling the Culturally Diverse*; APA

multicultural guidelines.) This course builds awareness and humility (culture as a lens on all clinical work) that will be reinforced in every subsequent class.

- **Integration – Building Foundations:** In Fall 1 the emphasis is on **foundational knowledge**. Students become familiar with the major psychological frameworks and begin developing professional skills under supervision. The combined content gives a first-person sense of how to conceptualize clients and lays a theoretical base for advanced work. Importantly, cultural and ethical concerns are woven in from the start (e.g. therapy role-plays incorporate culturally diverse scenarios <sup>5</sup>), and students are introduced to the scientist-practitioner approach. These courses form the **scaffold** on which doctoral-level understanding (of theory, diagnosis, and ethics) will be built <sup>2</sup> <sup>5</sup>.

## Winter Quarter (Year 1)

**Courses:** Winter quarter courses (3 units total) are *Transdiagnostic Psychotherapy*, *Career & Lifestyle Development*, and *Psychology of Addiction* <sup>8</sup>. These classes broaden students' clinical perspective to include cross-cutting treatment approaches, vocational issues, and substance-use disorders.

- **Transdiagnostic Psychotherapy (1 unit):** Teaches evidence-based treatment principles that apply across multiple disorders. For example, students learn about common mechanisms such as emotion regulation, cognitive distortions, and behavior avoidance. The course may draw on protocols like Barlow's **Unified Protocol** for emotional disorders, highlighting how CBT skills can be adapted to anxiety, mood, and personality issues simultaneously. Discussions include how to handle complex comorbidity and how one therapeutic approach (e.g. mindfulness, interpersonal therapy, DBT skills) can be applied to different diagnostic groups. This perspective reinforces research-based conceptualizations over strict DSM categories.
- **Career and Lifestyle Development (1 unit):** Covers vocational psychology and life-span development in context of mental health. Topics include career-choice theories (Holland's typology, Super's life-career stages), work-life balance, stressors related to employment transitions, and counseling strategies for vocational issues. Students learn to administer and interpret interest/inventory tests and to incorporate career questions into clinical case formulations. (Suggested reading: Savickas's *Career Construction Theory* or chapters from *Career Development and Counseling*). This course strengthens professional/interpersonal competencies and emphasizes the role of social and cultural factors (e.g. access to work, cultural values about vocation) in well-being.
- **Psychology of Addiction (1 unit):** Focuses on substance use and addictive behaviors from a biopsychosocial perspective. Students review theories of addiction (neurobiological, learning, and social-psychological models), diagnostic criteria for substance-related disorders, and treatment approaches (motivational interviewing, relapse prevention, 12-step facilitation, and harm reduction). Role-plays may simulate brief interventions or motivational counseling sessions. (Representative text: *Principles of Addiction Medicine* or excerpts from McGovern & Carroll's *Scientist-Practitioner Guide to Alcohol Use Disorder*). Emphasis is placed on understanding cultural/social influences on addiction and on ethical issues (e.g. stigma, confidentiality) in working with these populations.
- **Integration – Expanding the Clinical Scope:** In Winter 1, students connect core skills to broader clinical issues. Learning a transdiagnostic framework teaches them to think dimensionally (as doctoral programs do), rather than only categorically. The career/vocational course adds a

counseling lens, underscoring how environmental and developmental factors impact client outcomes. The addiction seminar provides depth on a high-prevalence clinical issue, linking physiology to behavior. Together, these courses reinforce the scientist-practitioner model by highlighting research-backed therapies and by considering diversity (cultural, socio-economic, ethical) in case conceptualization. By the end of this quarter, students can integrate basic psychotherapy techniques with knowledge of career and addiction issues — a useful foundation for advanced treatment coursework.

## Spring Quarter (Year 1)

**Courses:** Spring quarter includes *Group Therapy*, *Psychopathology*, and *Clinical Ethics & Laws* <sup>9</sup> (3–3.5 units).

- **Group Therapy (1 unit):** Explores theory and practice of therapeutic groups. Students learn about group dynamics, stages of group development, and therapeutic factors (drawing on Yalom's *The Theory and Practice of Group Psychotherapy*). Skills training focuses on leading a group session, managing group processes, and addressing issues like confidentiality and cultural mix in groups. Common approaches (e.g. process groups, psychoeducational groups, multi-family therapy) are covered. Students observe or co-lead a live therapy group under faculty supervision. Learning to work with clients in a group setting deepens understanding of interpersonal processes and provides a practical intervention technique that complements individual therapy skills.
- **Psychopathology (1 unit):** Surveys major mental disorders in adults and children using a clinical-science perspective. The course integrates DSM-5 diagnostic criteria with evidence about prevalence, etiology (biological, psychological, social), and treatment research for each disorder. Students practice diagnostic interviewing and case formulation; lectures cover mood, anxiety, trauma-related, personality, and neurodevelopmental disorders, among others. Emphasis is on understanding disorders dimensionally and culturally – for example, how symptoms can manifest differently across cultural contexts. (Readings typically include chapters from a leading text like Barlow's *Abnormal Psychology*.) Mastery of psychopathology is critical for doctoral study and is continuously built upon in later assessment and therapy courses.
- **Clinical Ethics and Laws (1 unit):** Provides an in-depth study of professional standards and legal regulations. Key topics include the APA Ethical Principles and Code of Conduct, confidentiality and privileged communication, informed consent, duty to warn and protect, dual relationships, record-keeping, child/adult abuse reporting laws, and competence. Case examples prompt students to apply ethical decision-making models. Special attention is given to multicultural considerations (e.g. how family/community norms interact with confidentiality rules) and to scenarios in medical settings. (Typically based on the APA Ethics Code and supplementary readings.) This course ensures students internalize the professional and ethical obligations they will carry as clinicians.
- **Integration – Professional Expertise:** Spring 1 courses consolidate diagnostic knowledge and introduce professional practice norms. Psychopathology provides the **clinical vocabulary** for identifying disorders – a prerequisite for any therapy intervention. Group therapy adds a new treatment modality, broadening intervention skills. Ethics and law finalize the ethical framework that underpins all clinical work. Together they reinforce ethical, culturally informed practice (e.g. addressing diversity in diagnosis and group settings) and align students' thinking with graduate-level expectations (e.g. handling complex cases ethically). By now, students should be able to form

basic case formulations, apply treatment modalities flexibly, and justify decisions from an ethical standpoint – skills essential for doctoral training.

## Summer Quarter (Year 1)

**Courses:** Summer quarter's courses are *Research Methods*, *Lifespan Developmental Psychology*, and *Practicum/Internship* <sup>10</sup> (3 units). This is the first term with formal practicum training.

- **Research Methods (1 unit):** Introduces quantitative methods and statistics for psychological research. Topics include research design, hypothesis testing, basic and factorial ANOVA, correlation/regression, and critical reading of research. Students learn to analyze data (often using software) and interpret results. Ethical conduct of research (IRB, reproducibility, responsible data handling) is also covered. (Typical texts: Gravetter & Wallnau's *Essentials of Statistics* or Shadish's *Experimental and Quasi-Experimental Designs*.) Mastery of research methods is crucial for the MA's capstone and for doctoral studies; this course directly prepares students to join a faculty research lab and to evaluate evidence-based practices.
- **Lifespan Developmental Psychology (1 unit):** Surveys human development from infancy through old age. The course covers major theories (Piaget, Erikson, attachment theory, socioemotional selectivity) and research on cognitive, social, and emotional growth across the lifespan. Students learn about critical periods (e.g. early childhood), normative transitions (adolescence, midlife), and developmental disorders. Readings may include chapters from a standard text like Berk's *Development Through the Lifespan*. Understanding developmental stages helps students see how clients' age and growth history affect clinical presentation and treatment; this background is indispensable for advanced study of developmental psychopathology and assessment.
- **Practicum/Internship (Clinical Practicum):** Students begin supervised clinical work in Northwestern's psychiatric clinics (inpatient and outpatient settings) <sup>3</sup>. Typically they spend **15-20 hours per week** seeing clients, under weekly individual and group supervision by licensed psychologists. During Summer 1, cases are often observational or co-therapy with staff, allowing students to practice intake interviewing and basic counseling skills in a safe environment. Client populations may include adults with anxiety/depression or medical co-morbidities, which helps students apply classroom learning to real-world scenarios. By program policy, these practicum hours will accumulate to at least **700 total hours** (with  $\geq 280$  direct service hours) by graduation <sup>3</sup>.
- **Laboratory Research (non-credit):** In parallel with coursework, **all students join a faculty research lab for  $\geq 2$  quarters** <sup>11</sup>. Starting Summer 1, each student contributes to an active project (data entry, literature reviews, poster prep, etc.), applying skills from Research Methods. This hands-on research practicum is crucial: it exposes students to the scientific process and integrates empirical thinking into clinical training. Supervised by lab mentors, students develop critical thinking and may contribute to published studies. This experience distinguishes the Feinberg MA; it ensures the curriculum remains grounded in current research <sup>11</sup>.
- **Integration – Synthesis of Science and Practice:** Summer marks the blending of knowledge with practice. The Research Methods course and lab work enhance statistical literacy and grant writing skills (advancing analytic competency for doctoral research). Lifespan Development contextualizes the disorders studied earlier (e.g. how anxiety manifests at different ages). Most importantly,

students now **apply their learning in practicum**. They synthesize therapy techniques, assessment, and diversity awareness from prior quarters to conduct supervised counseling. Multicultural and ethical training continues here – supervisors monitor culturally competent care. By summer's end, students embody the scientist-practitioner role: they can design a simple study, interpret data, and conduct initial clinical interviews. This integration sets a high bar for Year 2, where skills will be refined to a doctoral standard.

## Year 2

### Fall Quarter (Year 2)

**Courses:** Fall Year 2 includes *Family Therapy and Systems Theory*, *Advanced Assessment and Intervention I*, and ongoing *Practicum/Internship* <sup>12</sup> (3 units plus practicum).

- **Family Therapy & Systems Theory (1 unit):** Teaches models of systemic therapy. Students study theories (Bowenian, structural, strategic, intergenerational) and interventions for couples and families. Skills include creating genograms, diagnosing family patterns (boundaries, subsystems), and applying interventions like role-playing or reframing. Readings might include Nichols & Davis's *Family Therapy: Concepts and Methods*. Cultural/contextual issues (e.g. multicultural family structures) are integrated throughout. This course builds advanced clinical skills by showing how to engage multiple clients simultaneously and how family dynamics can influence individual psychopathology — a perspective heavily emphasized in advanced clinical training.
- **Advanced Assessment & Intervention I (1 unit):** An integrative course that deepens clinical skills. It often combines advanced diagnostic assessment (e.g. comprehensive case formulation, use of personality inventories, psychodiagnostic interviewing) with exposure to evidence-based therapies. For example, students might work through case studies requiring them to select appropriate tests (MMPI, projectives) and then plan an empirically supported treatment (CBT, DBT, psychodynamic). This class may also review multicultural assessment (building on earlier diversity training). (Textbook examples: Groth-Marnat's *Handbook of Psychological Assessment*.) The course reinforces how assessment results directly guide intervention, a key doctoral-level competency.
- **Practicum/Internship:** Continuing from Year 1, students increase their practicum commitment. By Fall 2, they typically carry their own caseloads (under supervision) and may begin co-leading group therapy sessions. Supervision remains weekly, focusing on treatment planning, ethics, and cultural responsiveness in cases. Settings can include specialty clinics (e.g. addiction, oncology). Ongoing practicum bridges classroom material (e.g. using family therapy techniques with real families, applying assessment strategies in diagnostic interviews). Students log hours weekly and prepare case presentations for faculty review.
- **Integration – Advanced Clinical Proficiency:** In Fall 2, the emphasis is on **applying advanced knowledge**. Family Therapy extends individual therapy skills to systemic contexts. Advanced Assessment & Intervention I requires students to synthesize prior learning: for instance, using psychopathology knowledge from Year 1 to interpret test results and tailor treatment plans. Multicultural issues are reinforced (e.g. adapting family interventions to diverse cultural norms). This term also continues the research component (students may finalize a short research project or begin writing a scholarly paper). Collectively, these experiences push students toward the **critical thinking**

**and integration** expected of doctoral candidates, as they must balance multiple domains of knowledge in each case.

## Winter Quarter (Year 2)

**Courses:** Winter 2 offers *Advanced Assessment & Intervention II* and continued *Practicum/Internship* <sup>13</sup> (1–2 units).

- **Advanced Assessment & Intervention II (1 unit):** A continuation of the fall course, it typically covers additional populations and techniques. For example, the class might focus on child/adolescent assessment and therapy (e.g. play therapy, pediatric neuropsychological testing) or on specialized interventions (family vs. group vs. individual therapy integration). Students analyze complex cases where multiple disorders or systemic issues coexist. Emphasis is on evidence-based interventions and outcome measurement. This course further hones clinical decision-making; students learn to adapt interventions to diverse clients and to integrate cutting-edge research findings into their approach.
- **Practicum/Internship:** The clinical practicum continues as before, with students now functioning with greater autonomy (conducting individual therapy, family sessions, or leading groups). They are expected to perform more of the core duties of a therapist (diagnostic interviewing, case conceptualization, treatment execution) under supervision. Supervision also ensures ethical practice; by this stage, students often mentor newer peers on certain skills.
- **Integration – Consolidating Treatment Skills:** Winter 2 is focused on refining clinical expertise. The Advanced I/II sequence ensures that assessment and intervention are seen as inseparable; students leave this sequence thinking like clinical scientists (choosing methods backed by research). Practicum work at this point involves more complex therapy cases, reflecting doctoral-level challenges. Together, they solidify students' ability to plan and adapt evidence-based treatments (e.g. modifying a CBT protocol for a patient with cultural or developmental needs). This term's cumulative knowledge places students at the threshold of independent clinical thinking – a core goal of doctoral preparation.

## Spring Quarter (Year 2)

**Courses:** Spring Year 2 features *Advanced Scientific Foundations of Behavior* and ongoing *Practicum/Internship* <sup>14</sup> (1–2 units).

- **Advanced Scientific Foundations of Behavior (1 unit):** This seminar-style course integrates advanced theory and research. Topics can include neurobiological underpinnings of behavior, advanced cognitive/neuroscience principles, or current frontiers in psychopathology research. Students might review seminal and recent journal articles, discuss research on topics like neuroplasticity or gene–environment interaction, and connect these findings to clinical phenomena. (For example, linking neural circuitry knowledge to understanding PTSD treatment.) The course may also cover research design nuances (e.g. translational methods) or advanced statistical concepts (e.g. factor analysis, multilevel modeling). The goal is to deepen students' scientific literacy so they can critically evaluate new research and contribute to evidence-based practice.

- **Practicum/Internship:** In Spring 2, practicum continues at full intensity. Students refine skills in case conceptualization and may prepare a portfolio or case series as part of their Clinical Competency Exam preparation. They finalize any remaining specialties (e.g. completing a family case if starting later). Supervision includes feedback on diagnosis/treatment integration and on professional presentation (written reports, videotaped sessions for review).
- **Integration – Research-Practice Synergy:** This quarter links science and practice tightly. In the Advanced Science course, students see how psychological theories explain client behavior – reinforcing why certain interventions work. For instance, learning about neurochemical causes of addiction (linking back to the Year 1 addiction course) deepens empathy and informs ethical discussions around treatment. The practicum ensures that each research concept has a practical corollary. By Spring 2, students routinely apply sophisticated theoretical frameworks (e.g. attachment theory from lifespan class, or systems theory from family class) when making treatment decisions. This mirrors the expertise of a doctoral-level candidate who must bridge science and clinical insight seamlessly.

## Summer Quarter (Year 2)

**Courses:** Summer of Year 2 completes the curriculum with *Proseminar in Professional Counseling* and final practicum <sup>15</sup> (0.5–1 unit plus practicum).

- **Proseminar in Professional Counseling (1 unit):** A capstone seminar focused on professional development. Topics include the process of clinical licensure (for counselor licensure if pursued), strategies for continuing education, self-care for clinicians, and issues in interdisciplinary collaboration. Students learn about evidence-based supervision models (preparing them to receive and eventually give supervision) and participate in discussions on current ethical dilemmas in mental health. Multicultural leadership and advocacy (serving diverse communities) is emphasized. This seminar may also cover career planning (applying to doctoral programs or jobs) and professional identity. The intent is to synthesize all prior training into a mature professional stance.
- **Practicum/Internship (Final):** In the final quarter, students complete their remaining clinical hours. They often conduct more autonomous therapy (perhaps a full course of CBT with a client) under a last phase of supervision. The practicum concludes with preparation for the **Clinical Competency Exam (CCE)** – an evaluative case study and oral examination (as per program policy <sup>16</sup> ). In essence, this practicum is a “runway” for independent practice: it tests the student’s ability to integrate theory, research, and ethical clinical work at a licensure-ready level.
- **Integration – Professional Transition:** By Summer 2, the curriculum is fully integrated. Students demonstrate mastery of clinical interventions (through the CCE case study), research literacy, and professional ethics. The Proseminar ties up any loose ends and orients graduates to collaborative, reflective practice. Having covered the breadth of clinical psychology — from basic science (neuroscience, research methods) to applied skills (therapy techniques, multicultural counseling, ethics) — the student is now equipped with a comprehensive cognitive framework. This framework serves as a **launchpad to doctoral training:** all major domains (theory, research design, assessment, intervention, ethics, diversity) have been addressed in depth and in concert. The sequence of courses and practicum experiences ensures that graduates not only recall each

element, but see how they interrelate in real-world practice, mirroring the holistic perspective of a clinical psychologist.

Each year and quarter thus builds systematically: first instilling core knowledge (Year 1), then deepening and integrating that knowledge with advanced practice (Year 2). The inclusion of ethics and multicultural content throughout (in coursework, case discussions, and clinical supervision <sup>5</sup> <sup>7</sup>) ensures students develop culturally competent, ethically grounded expertise. By program end, the student possesses both the **theoretical understanding and the hands-on experience** expected of a doctoral-bound clinical psychology candidate.

**Sources:** Northwestern Feinberg's Clinical Psychology MA handbook and program website (course list, credit requirements, practicum details) <sup>1</sup> <sup>3</sup>; Northwestern course catalog (course descriptions) <sup>17</sup> <sup>6</sup> <sup>7</sup>; APA and clinical psychology texts (standard references on therapy, assessment, ethics, diversity, and research methods). These references underpin the outlined curriculum and its learning objectives.

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