Subject Index

A
A-B design, 87–88
Abnormal behaviour. See also Classification and diagnosis
defining abnormality, 68–69
developmental psychopathology, 53
diagnosis, 52–54
diagnostic reliability. See Diagnostic system limitations
Accreditation
guidelines, 45
programs accredited by CPA, 45
Achenbach System of Empirically Based Assessment (ASEBA), 51, 120, 184, 186–187
Achenbach, Thomas, 19, 51, 184
Acute pain, 330
Alden, Arnold, 21
Adolescents. See also Children
assessment vs. testing, 114–116
evidence-based treatment in. See Children, intervention
internalizing disorders prevention, 225–226
interviews, 139–141
Kaufman Adolescent and Adult Intelligence Test, 165
MACI, 182
MMPI-Adolescent, 178
PAI, 176–182
protective factors, 219
psychological tests most commonly used, 120
substance abuse prevention, 226–228
WISC-IV, 162–163
youth violence, 223–225
Adolescents, intervention
counsel for treatment, 284–285
mood monitoring, 296
psychoeducational approach, 296
Affect heuristic, 204
Affirming the Consequent, 76
Alberta College of Social Workers, 12
Allport-Vernon Study of Values, 17
American Academy of Child and Adolescent Psychiatry, 11
American Association for the Advancement of Science (AAAS), 84
American Psychological Association (APA)
children/adolescent practice guidelines, 289
cultural sensitivity in interviewing, 133–135
evidence-based treatment, 266–267
history, 17
interviewing older adults, 138–139
research ethics, 80–81
therapy relationships, 318
Analysis of variance (ANOVA), 88
Anchoring and adjustment heuristic, 205
Anorexia nervosa treatments, 265
Antony, Martin, 115
Anxiety and related disorders, 265
Anxiety disorders
DSM-5 (ADIS-5), 129
prevention, 225–229
treatment, 265
Anxiety Disorders Interview Schedule for DSM-5 (ADIS-5), 129
Appeal to ignorance, 76
Archival data, 95
Aristotle, 14
Army Alpha/Beta test, 17
ASEBA. See Achenbach System of Empirically Based Assessment (ASEBA)
Assessment
Binet, Alfred, 16
Binet-Simon scale, 16
classification and, 102
clinical neuropsychology, 335–337
clinical utility, 20
cognitive assessment, 165–168
diagnosis, 29–31
ethical considerations, 121–122
forensic psychology, 342–344
history in clinical psychology, 15–20
history timeline, 21
intelligence, 148–165
interviews, 124–141
Kraepelin, Emil, 16
Meel, Paul, 18
mental tests, 16
nature of, 28, 30–31
observation, 124, 126, 141, 143–144
percent of time spent, 28
projective measures, 189–192
psychological assessment, 103–112
psychological testing, 112–121
self-monitoring, 144–146
self-report, 169–189
service evaluation, 20
syndromes, 16
Assessment data, 196–202
Assessment-focused services, 105–106
Assessment reports
audiences, 207
computer-based interpretations, 208
feedback, 209–210
Finn, Stephen, 210
principles of, 207
psychological functioning, 208–209
therapeutic model of assessment, 210
assessment planning, 209
Association of State and Provincial Psychology Boards, 48, 121
Association techniques, 190
Attention-deficit/hyperactivity disorder (ADHD), 294–295
ethnicity, 288
Johnston, Charlotte, 142–143
multi-informant data, 197
prediction errors, 108
Judgement heuristic, 204
Avoidant personality disorder treatment, 265
B
Back F scale (FB), 179
Bandura, Albert, 242
Barrett, Paula, 225
Barwick, Melanie, 288
Base rate, 108
Beck, Aaron, 11, 23
Beck Anxiety Inventory, 120
Beck Depression Inventory-II, 120, 188–189
Behavioural therapy, 241. See also
Cognitive-behavioural therapy (CBT)
Behaviour assessment, 19
Behaviour checklists, 170
Belief in the law of small numbers, 204
Benchmarking strategy, 275
Beutler, Larry, 320
Bias
common decision-making biases, 204
decision-making and, 204, 205
defined, 204
Garb, Howard, 204
heuristics, 204
self-presentation bias, 202
self-serving attribution bias, 203
Binet, Alfred, 16, 149
Binet-Simon scale, 16
Binge-eating disorder treatments, 265
Biopsychosocial approach, 14
Biopsychosocial model, 326
Bipolar disorder treatments, 265
Borderline personality disorder treatment, 265
Boulder model, 43
Bowie, Christopher, 59–61
Brandt, Karl, 41
Bulimia nervosa treatments, 265
Bullying, 223–225
Butcher, James, 177
C
California Personality Inventory, 173
Campbell, Donald, 85
Canadian Code of Ethics for Psychologists (2000), 41
research ethics, 80
Canadian Psychiatric Association, 11
Canadian Psychological Association
county/adolescent practice guidelines, 289
cultural sensitivity in interviewing, 133–135
evidence-based treatment, 267
defined, 107, 198
nature/definition of clinical psychology, 6
Case formulation. See also Case formulation validity
benefits of, 199
critical judgment improvement, 205–206
data patterns, 199
defined, 107, 198
Case formulation (Continued)
  diagnosis, 107
  Persons, Jacqueline, 200
  reliability, 200
  steps of, 199
  theoretical orientation, 199
Case formulation validity, 202–206. See also Case formulation
  bias, 202–204
  clinician factor, 203–205
  patient factors, 201–203
  retrospective recall, 202
  self-presentation bias, 202
Case studies, 86–87
Castonguay, Louis, 320
Categorical approach to classification
  defined, 50, 63
  diagnostic system limitations, 73–74
Cattell-Horn-Carroll theory of intelligence, 150, 158
Cattell, James McKeen, 16
Cattell, Raymond, 150
CBT. See Cognitive-behavioural therapy (CBT)
Chambless, Dianne, 263, 275
Charcot, Jean-Martin, 15
Child and youth care workers, 12
Child Behavior Checklist (CBCL), 184, 186, 187
Child custody evaluations, 105
Children
  assessment data integration, 202–206
  assessment vs. testing, 114, 116
  care workers, 12
  CBCL, 184, 186, 187
  CDI, 2, 189
  child custody evaluations, 105
  child psychotherapy metaanalysis, 296–299
  clinical psychology and, 10
  conduct disorder, 223–225
  Feelings Thermometer, 130
  home visiting programs, 221
  Incredible Years, 221
  informed consent, 233
  internalizing disorders prevention, 225–226
  interviews, 139–141
  Kaufman Adolescent and Adult Intelligence Test, 165
  pain, 331
  physical abuse prevention, 222–223
  protective factors, 218–219
  psychological tests most commonly used, 120
  WISC-IV, 162–163
Children, intervention
  ADHD treatment, 294–295
  client, 282–283
  clinical practice guidelines, 288–289
  effective treatment, implementation barriers, 285–287
  efficacious treatments, 287
  evidence-based treatment effectiveness, 283–285
  evidence-based treatment examples, 291–296
  minority youth, 288
  parents and treatment, 287
Children's Depression Inventory
  Children's Depression Inventory 2, 189
Chorpita, Bruce, 286
Chronic pain, 331
Classification and diagnosis
  abnormal behaviour, 52–54
  Achenbach, Thomas, 51
  assessment and, 102
  categorical approach, 50
  defined, 50
  diagnosis, 51
  diagnostic system, 51
  dimensional approach, 50
  DSM system, 61–65
  Kraepelin, Emil, 52
  mental disorder, 54–61
  prototype model, 52
  utility, 50
  validity, 50
Classification utility, 50
Clinical assessment interviews, 124, 125
Clinical consultation, 36–37
Clinical health psychology, 325–332
  activities of, 327–330
  acute vs. chronic pain, 330
  biopsychosocial model, 326
  disability, 326–327
  health psychologist, 327–330
  insomnia, 331
  McGrath, Patrick, 330
  pain, 330–332
Clinical interview. See Unstructured assessment interview
Clinical neuropsychology, 333–339
  activities of, 333–335
  assessment and, 335–337
  defined, 333
  Halstead, Ward, 333
  Hebb, Donald, 333
  intervention, 343–344
  knowledge requirements, 327–328
  Luria, Aleksandr, 333
  neuroanatomy, 333
  neuropathology, 333
  Reitan, Ralph, 333
Clinical practice guidelines
  Britain, 269
  Canadian Psychological Association, 289–290
  children, 288–289
  defined, 262
  depression, 269
  evidence-based treatment, 263
  history of, 262
  intervention, 268–270
  NICE, 269, 289
Clinical psychology. See also Clinical health psychology; Psychological testing
  activities of, 28–29
  areas of knowledge for registration, 325
  assessment in, history, 15–20
  biopsychosocial approach, 14
  clinical neuropsychology, 333–339
  definition, 3, 5–6
  diagnostic system limitations, 68–74
  employment settings, 39–40
  ethics, 40–43
  evidence-based practice, 7–8
  forensic psychology, 339–344
  future, 25
  ICD system, 67–68
  intervention in, history, 20–24
  job satisfaction, 27–28
  licensure, 47–48
  mental health problems, 2–4
  mental health professions, 8
  mental health service provider availability, 13
  nature of, 3, 5–6
  prevention, 25, 35, 213–229
  psychiatry and, 11
  research methods. See Research roots of, 14–15
  testing practices, 120–121
  training, 43–47
Clinical scientist model, 43
Clinical significance, 97–98
Clinical social work, 11–12
Clinical supervision
  internship, 39
  nature of, 38–39
  practicum, 38
  residency, 39
Clinical utility, 20, 175
Clinical utility of self-report
  P. T. Barnum effect, 192
  Rorschach Inkblot Test, 191
Clinical utility of self-report and projective measures, 175–176
  efficacy/effectiveness, 175
  reliability/validity, 176
Closed question, 128
Code types, 181
Coercive exchanges, 290
Cognitive assessment
  episodic memory, 165
  semantic memory, 165
  WIAT-III, 167–168
  WMS-IV, 165–166
Cognitive-Behavioral Case Formulation, 200
Cognitive-Behavior Modification: An Integrative Approach (1977), 23
Cognitive-behavioural approach, 34
Cognitive-behavioural therapy (CBT), 23, 241–244
  behavioural therapy, 241
  cognitive therapy, 242
  depression example, 270–273
  effectiveness trials, 274–276
  nature of, 243
  phases of, 243
  PTSD example, 273
  self-efficacy, 242
  termination phase, 243
Cognitive Therapy, 242
Cognitive Therapy of Depression: A Treatment Manual (1979), 23
Cohen, Jacob, 94
Common factors
  defined, 302
  dodo bird verdict, 315–317
  Frank, Jerome, 313
  integrative treatment models, 313
  Luborsky, Lester, 315
  meta-analyses, 316–317
  psychotherapy and, 313–314
  psychotherapy equivalence, 314–315
  Wampold, Bruce, 316
Community psychology, 214, 246
Comorbidity, 72–73. See also Integration
Comparative treatment studies, 316–318
Computer-based interpretations (CBI), 208
Computer-based treatments, 251–252
Concurrent validity, 96, 118
Conditioning principles, 22
Conduct disorder, 223–225
Confidentiality
assessments and, 121
intervention ethics, 232–234
interviews/observation, 126–127
limits of, 126–127
Confirmatory bias, 204
Conners, Keith, 19
Consent form, 82. See also Informed consent
Consultation
clinical consultation, 36
organizational consultation, 36
percent of time spent, 28
Content validity, 96, 118
Coping Koala program, 225
Correctional psychology, 343. See also Intervention
Correlational research designs
correlational analysis vs., 88–89
factor analysis, 89–90
mediator, 90
moderator, 90
structural equation modelling (SEM), 90
Counselling psychology, 8–9
Couples interviews, 138
Couples therapy, 249
Criterion validity, 96
Crystallized intelligence, 150, 154
Cultural/ethnicity considerations
bias, 205
client variables, 305, 307
culturally appropriate personality measures, 172–174
disorder incidence, 58
DSM-5, 63
evidence-based treatment, 288
Flynn effect, 164
interviews, 133–135
norms, 118–119
psychological testing validity, 118
sampling strategy, 93–94, 152
training programs, 46
treatment options, 266
treatment planning, 11
Culturally appropriate personality measures, 172–174
Cut-off scores
assessments and, 102
clinical significance, 98
culturally appropriate personality measures, 172–174
reliability, 117
Cyclical maladaptive patterns, 199
D
Data analysis
treatment evaluation, 111–112
Data analysis conclusion validity threats, 96
Declarative memory, 165
Deductive process, 78
Defensiveness scale (K), 179
Depression
Beck Depression Inventory, 188–189
CBT treatment example, 270–273
Children’s Depression Inventory, 2, 189
clinical practice guidelines, 269–270
The Depression Report (2006), 2
prevention, 226
stepped care, 269
Developmental norms, 119
Developmental psychopathology approach, 53
Diagnosis. See also Classification and diagnosis
abnormal behaviour, 52–54
assessment and, 29–31
case formulation, 107
defined, 51
Diagnosis system purposes, 51
Diagnostic and Statistical Manual, 16
Diagnostic and Statistical Manual of Mental Disorders (DSM), 19, 31
Diagnostic system, 51. See also Diagnostic system limitations
Diagnostic system limitations, 68–72
comorbidity, 72–73
defining abnormality, 68–69. See also Abnormal behaviour
heterogeneity of symptoms, 70–71
validity, 71–72
Dimensional approach to classification
defined, 50
diagnostic system limitations, 73–74
Disability, 326–327
Discriminant validity, 118
Disruptive behaviour disorders, children/adolescents
oppositional defiant disorder (ODD), 289–290
Diversity, 46, 47. See also Cultural/ethnicity considerations
Dodo bird verdict, 315–317
Dominic Interactive, 130, 131
Dozois, J. A. David, 4–5
DSM-5
categorical approach to classification, 63
diagnostic classes, 63–64
ethnic and cultural considerations, 65
ICD and, 67
DSM-III, 19, 61
DSM-IV, 61
DSM system
ASD diagnosis, 71–72
diagnosis and case formulation, 107
DSM-5, 63–65
DSM-III, 61
DSM-IV, 61
evolution of, 61–62
limitations. See Diagnostic system limitations
semi-structured interview, 129
Spitzer, Robert, 61
Dyscontrol, 55
E
Eating disorders treatment, 265
EBP. See Evidence-based practice (EBP)
Ecological momentary assessment, 146
Ecological theory, 293
Effectiveness
clinical utility of self-report and projective measures, 176
defined, 24
evidence-based treatment for children/adolescents, 296–300
intervention, 274–276
Effectiveness trials, 274–276
Effect size, 99, 258
Efficacy
clinical utility of self-report and projective measures, 176
defined, 24
evidence-based treatment for children/adolescents, 296–300
intervention, 274–276
research, 85
EFT. See Emotionally focused couples therapy (EFT)
EI, 156–157
Elliot, Robert, 241
Elliot, Robert, 24
Ellis, Albert, 23
Emery, Gary, 23
Emotion-based practice, 76
Emotional intelligence, 156–157
Emotionally focused couples therapy (EFT), 274
Emotional Quotient Inventory, 156
Emotion-focused therapy, 249
Empathy
effective treatment factors, 315, 318
listening skills, 131
process-experiential therapy, 240–241
reinforcer, 41
Empirical criterion-keying approach, 177
Empirically based principles of therapeutic change, 320–323
Empirically supported treatment (EST), 263
Employment settings, 39–40
Episodic memory, 165
Error rates, 96
Ethics
assessment and, 121–122
Canadian code, 41, 43
caregiver emotional health, 42–43
confidentiality, 121, 126–127
informed consent, 41, 121
intervention, 232–236
intuition, 40
professional guidelines, 40
research, 80–83
research evidence, 40
science and, 40
Second World War, 41
theoretical orientation, 40
Ethnicity considerations. See Cultural/ethnicity considerations
Etiological research, 59
Evidence-based assessment (EBA) development of, 122
Evidence-based parenting, 220–222
home visiting programs, 221
Incredible Years, 222
Triple P, 222
Webster-Stratton, Carolyn, 221
Evidence-based practice (EBP). See also Evidence-based treatment
defined, 7
evidence-based vs., 76
ethics and research, 40
evidence-based treatment, 267
psychiatry, 11
science-based vs., 7–8
treatment options, 234–235
use of, 7
Evidence-based psychotherapy relationships, 319
Evidence-based treatment, 261–268. See also Evidence-based practice (EBP)
adoption issues and barriers, 276–278
Interviews
Intervention-focused assessment services, 106
Intervention ethics
Interscorer reliability, 117

J
Jacobson, Neil, 98
Janet, Pierre, 15
Johnston, Charlotte, 142–143
Jones, Mary Cover, 22
Jung, Carl, 21

K
Kaufman Adolescent and Adult Intelligence Test, 165
Kaufman Assessment Battery for Children, 165
Kazdin, Alan, 284
KiVa program, 224
Klopfer, Bruno, 18
Kraepelin, Emil, 16, 52
Kuder Preference Record, 17

L
Lambert, Michael, 111
licensure defined, 47
Mutual Recognition Agreement (MRA), 48
requirements for, 47–48
Lie scale (L), 179
Life stress, 58
Limits of confidentiality, 126–127
Listening skills
empathy, 131
judgment, 132
non-directive listening responses, 131
sample, 132
therapeutic self-disclosure, 131
Luborsky, Lester, 237, 315
Luria, Aleksandr, 333

M
Major depressive disorder treatments, 265
Malingering, 172
Marks, Isaac, 11
Mayer-Salovey-Caruso Emotional Intelligence Test, (MSCEIT), 157
McGrath, Patrick, 330
Mckinley, J. Charnley, 177
Meals on Wheels, 213
Measurement options, 95
Measurement unreliability, 96
Mediator, 90
Meehl, Paul, 18
Meichenbaum, Don, 23
Mensa, 148
Mental disorder
case studies, 57–58
development of, 58–61
disability and, 56
disorders, 54–55
dyscontrol, 55
etiological research, 59
harmful dysfunction, 55
prevalence of, 55–56
Mental Health Commission of Canada (MHCC), 4
Mental health professions
child and youth care workers, 12
clinical psychology, 8
clinical social work, 11–12
counselling psychology, 8–9
psychiatric nurses, 12
psychiatry, 10–11
school psychology, 10
service availability, 13
Mental retardation, 156
Mental tests, 16
Meta-analysis
child psychotherapy, 284–285
defined, 23, 99, 258
effect size, 99, 258
history, 258–260
intervention, 257–261
methodology and, 259–261
Westen, Drew, 260
Milton Adolescent Clinical Inventory (MACI), 182
Milton Clinical Multiaxial Inventory-IV (MMPI-IV), 176, 182
Millon, Theodore, 182
Minnesota Multiphasic Personality Inventory (MMPI), 18
clinical scales, 179
content scales, 179
history, 177
validity scales, 179
Minnesota Multiphasic Personality Inventory (MMPI-II), 176–182
administration, 180–182
clinical scales, 177
code types, 181
content approach, 177
content scales, 178, 179
empirical criterion-keying approach, 177
history, 177
interpretation, 18–182
MMPI-Adolescent, 178
norms, 180
reliability, 180
scoring, 180–182
self-report measures, 176–182
validity, 180
validity scales, 179
Minnesota Multiphasic Personality Inventory-2 (MMPI-2), 120
standard scores, 119
Mischel, Walter, 18, 170
MMPI. See Minnesota Multiphasic Personality Inventory (MMPI)
MMPI-Adolescent, 178
Models of training in clinical psychology. See Training
Moderator, 90
Mood disorders, 265
Mood disorders treatment, 265
Morgan, Christina, 18
Morin, Charles, 332
Moscovitch, David, 66–67
Multisystemic therapy (MST) defined, 293
ecological theory, 293
format for, 293
quality assurance, 294
treatment principles, 293
Murray, Henry, 18
Mushquash, Christopher, 235
Mutual Recognition Agreement (MRA), 48

unstructured assessment interview, 127–128
violence screening, 133
Intuition, 40
IPT. See Interpersonal psychotherapy (IPT)
IQ. See Intelligence quotient (IQ)
Performance (non-verbal) IQ (PIQ), 155
Performance measures, 95
Perls, Fritz, 23
Personality Assessment Inventory (PAI),
120, 176–182
Personality disorders treatment, 265
Personality traits, 18–19, 169, 170, 175
Person-situation debate, 170–171
Persons, Jacqueline, 200
Pharmacotherapy. See Psychopharmacology
Physical abuse prevention, 222–223
Pinel, Philippe, 14
PIQ, See Performance (non-verbal) IQ (PIQ)
Plato, 14
Polythetic approach, 70
Pope, Carley, 36–37
Positive reinforcement, 291
Posttraumatic stress disorder (PTSD)
ASD diagnosis, 71
CBT treatment example, 273
evidence-based treatment, 265
prevention, 228
resilience, 72
Poverty, 214
Practice guidelines. See Clinical practice
guidelines
Practicum, 38
Practitioner-scholar model, 43
Prediction, 108–109. See also Prognosis
Predictive validity, 118
Premorbid IQ, 152
Prevalence of mental disorders, 55–56
Prevention
anxiety disorders, 225–229
community psychology, 214
cost of mental health problems, 215
designing, 219
evidence-based parenting, 220–221
health promotion, 214
history in clinical psychology, 25
indicated preventive intervention, 217
internalizing disorders, 225–226
intervention vs., 215–217
measuring success, 220
nature of, 35
poverty, 214–215
protective factors, 218
risk factor, 218
risk reduction model, 218
selective preventive intervention, 217
substance abuse, 226–228
trauma/loss exposure problems, 228–229
universal preventive intervention, 217
violence, 222–225
Primary mental abilities, 150
Principles of therapeutic change, 320–322
Probability sampling, 94
Problem definition questions, 135–137
Procedural memory, 165
Procedural variability, 96
Process-experiential therapy (PE), 240–241
Process-experiential treatment approach, 24
Process-outcome research
client factors, 305–306
defined, 303
levels of analysis, 304
methodological cautions, 312
Orlinsky, David, 303
therapeutic gains, 306
therapist factors, 307–308
treatment factors, 309–312
Process-outcome research, 303–304
Process research, 302–303
client factors, 305–306
defined, 303
levels of analysis, 507
methodological cautions, 312
therapist factors, 307–308
treatment factors, 309–312
outcome research, 303–304
Profiles
Antony, Martin, 115
Beling, Peter, 272–273
Bowie, Christopher, 59–61
David, J. A. Dozois, 4–5
Garcia-Barrera, Mauricio, 334
Hadjistavropoulos, Thomas, 185–186
Hodgins, David, 92
Johnston, Charlotte, 142–143
Moscovitch, David, 66–67
Mushquash, Christopher, 235
Nicholson, Ian, 29–30
O’Connor, Roisin, 77–78
Paterson, Randy, 34–35
Pope, Carley, 36–37
Provencher, Martin D., 261–262
Reid, Graham, 282–283
Thomassin, Kristel, 288
Viljoen, Jodi, 341–342
Weiss, Jonathan, 216–217
Westra, Henny, 311–312
Woody, Sheila, 31–32
Prognosis
base rate, 108
prediction, 108–109
sensitivity, 109
specificity, 109
Projective measures, 95
categories, 189
clinical utility, 175–176
culturally appropriate measures, 172–174
nature of, 189
personality traits, 169, 170
Rorschach Inkblot Tests, 190–191
self-presentation bias, 172
Projective personality tests, 170
Projective tests, 18
Protective factors
children/adolescents psychopathology, 219
conduct disorder, 224
defined, 218
prevention research, 219
substance abuse, 227
Prototype model approach to
classification, 52
Provencher, Martin D., 261–262
Psychiatric nurses, 12
Psychiatry, 10–11
clinical psychology, 11
evidence-based practice, 11
psychology, 10
psychopharmacological treatment, 11
psychotherapy, 11
Psychodiagnosis, 107
Psychodynamic approach, 22
Psychoeducational approach, 296
Psychological assessment, 106. See also
Psychological testing
assessment-focused services, 105–106
child custody evaluations, 105
competence in, 103–104
competence in assessment, 104
diagnosis, 107
ethics, 121–122
Groth-Marnat, Gary, 116
history, 20
intervention-focused assessment services, 106
process, 103
prognosis/prediction, 108–109
psychological testing vs., 114, 116
screening, 106–107
treatment evaluation, 111–112
treatment monitoring, 110–111
treatment planning, 109–110
Psychological testing. See also Psychological assessment
defined, 113
ethics, 121–122
Internet, 113–114
norms, 118–119
practices in clinical psychology, 120–121
psychometric considerations, 116–121
reliability, 117
standardization, 116–117
validity, 118
Psychological treatment, 11, 232
Psychology and psychiatry, 10
Psychopharmacology
measurement, 96
Psychopharmacology intervention, 33
psychiatry, 11
Psychopharmacology intervention, 33
Psychophysiological/biological measures, 95
Psychotherapist, 232
Psychotherapy
children/adolescents, meta-analysis, 284–285
case formulation, 200
clinical utility of self-report and projective measures, 176
cut-off scores, 117
diagnostic system limitations, 69–70
measurement options, 96
measurement unreliability, 96
MMPI-II, 180
psychological testing, 117
psychometric properties of measurement, 96
test-retest, 96
WAIS-IV, 161
WISC-IV, 161
Reliable change index, 98
Replication of research, 84–85, 97
Representativeness heuristic, 204
Representativeness, of sample, 155
Research
Campbell, Donald, 85
case studies, 86–87
clinical significance, 97–98
conclusion validity threats, 96
correlational designs, 88–90
data analysis, 96
design, 83–84
ethics of, 80–83
evidence- vs. eminence-based, 76
experimental design, 83–84, 91
external validity, 85–86
hypothesis generation, 78–80
internal validity, 85–86
issues in, 75–76
Jacobson, Neil, 98
measurement options, 95–96
media reporting, 84–85
meta-analysis, 99–100
nature of, 37–38
practice and, 77
psychometric properties, 95–96
 quasi-experimental designs, 90–91
replication, 84–85, 97
sample, 93–95
single case designs, 87–88
statistical conclusion validity, 86
systematic reviews, 98–99
Research ethics, 80–83
Research ethics boards (REBs), 82
Research hypothesis, 78–80
Research supervision, 39
Residency, 39
Retrospective recall, 202
Risk assessment, 342
Risk factor
anxiety disorders, 225
children/adolescents
psychopathology, 218, 220
defined, 218
depression, 226
prevention research, 219
TriP, 222
youth violence, 223–225
Risk reduction model of prevention, 218
Rogers, Carl, 22, 41
Rorschach, Hermann, 17
Rorschach Inkblot Test
case formulation, 200
clinical utility of self-report and projective measures, 175
Exner, John, 190
norms, 190–191
scoring, 190
Rush, Benjamin, 14
Rush, John, 23
S
s, 150
Saklofske, Don, 159–160
Sample selection, 93
Sample size, 94–95
Sampling, 93–94
Sanders, Matthew, 222
Schizophrenia treatment, 265
School psychology, 10
SCID. See Structured Clinical Interview for Axis I Disorders (SCID)
Scientist-practitioner model, 43
Screening, 106–107
Selective preventive intervention, 217
Self-administered treatments, 250
Self-efficacy, 242
Self-knowledge, 170
Self-monitoring
challenges, 145
defined, 144
ecological momentary assessment, 146
forms of, 144
reactivity, 145
Self-presentation bias
case formulation, 202
malingering, 172
motives, 172
projective personality tests, 172
retrospective recall, 202
validity scales, 172
Self-report
behaviour checklists, 170
checklists, 184
clinical utility, 175–176
culturally appropriate measures, 172–174
measures. See Self-report measures
objective personality tests, 170
personality traits, 169, 170
person-situation debate, 170–171
projective personality tests, 170
self-presentation bias, 172
Self-report checklists. See also Self-report
ASEBA, 184, 186–187
BDI-II, 188–189
CDI, 189
OQ-45, 187–188
SCL-90-R, 187
use of, 184
Self-report measures, 95. See also Self-report
MCMI-IV, 176, 182
MMPI-II, 176–182
normal personality function, 183–184
PAI, 176
Self-serving attribution bias, 203
SEM. See Structural equation modelling (SEM)
Semantic memory, 165
Semi-structured interview
ADIS-5, 129
comparison of diagnostic interviews, 130
defined, 129
Feeling Thermometer, 130
SCID, 129, 130
Sensitivity, 109
Service evaluation, 20
Subject Index

T
Task Force on Promotion and Dissemination of Psychological Procedures, 24
Thematic Apperception Test (TAT)
clinical psychology history, 18
Theoretical orientation
case formulation, 198, 199
ethics, 40
training, 45
Theory of multiple intelligences, 151
Therapeutic alliance and common factors, 314–315
Therapeutic gains, 306
Therapeutic model of assessment, 210
Therapeutic self-disclosure, 131
Therapist factors and process outcome, 307–308
Thomasson, Kristel, 298
Time-Limited Dynamic Psychotherapy, 24
Time out, 291
Training
accreditation, 45–47
Boulder model, 43
clinical scientist model, 43
financial assistance, 45
Ph.D. vs. Psy.D., 44
practitioner-scholar model, 43, 44
scientist-practitioner model, 43–44
theoretical orientation, 45
Transaction Analysis, 23
Transference
case example, 244
defined, 237
short-term psychodynamic psychotherapies, 238
Transference relationship, 238
Treatment
evaluation, 111–112
Lambert, Michael, 111
monitoring, 110–111
outcome research, 303–304
planning, 109–110, 207–211
Treatment factors and process outcome between-session assignments, 310
directiveness, 309–310
insight vs. symptom reduction, 310
interpretation, 309
reactance, 309
Treatment-outcome research, 303–304.
See also Process-outcome research
Treatment planning, 109–110, 207–211
Triarchic theory, 150
Triple P, 222
Triple P Positive Parenting Program, 222
True negative, 109
True positive, 109
True response inconsistency scale (TRIN), 179
Tuke, William, 14
Two-factor model of intelligence, 150
Type I errors, 96
Type II errors, 96

U
Unconditional positive regard, 41
United States
code of ethics, 41
definition of clinical psychology, 6
mental health problem scope, 2
mental health services provider availability, 13
prevalence of selected mental disorders, 56
psychopharmacology, 33
research ethics, 80–81
screening assessments, 106
Task Force on Promotion and Dissemination of Psychological Procedures, 24
theoretical orientation of intervention, 33
training, 44
Universal preventive intervention, 227
Unstructured assessment interview
defined, 127
open/closed questions, 128
social conversation vs., 127
Utility, 50

V
Validity
case formulation, 202–206
classification and diagnosis, 50
clinical utility of self-report and projective measures, 176
criterion validity, 96
current, 96, 118
convergent, 96
criterion validity, 96
cultural considerations, 118
defined, 50
diagnostic system limitations, 71–72
discriminant, 96, 118
external, 85–86
face, 96
incremental, 96, 118, 173
internal, 85–86, 91
measurement options, 96
MMPI-II, 179, 180
predictive, 96, 118
psychological testing, 118
psychometric properties of measurement, 96
Rorschach Inkblot Test, 191
sampling strategy, 93
scales, MMPI, 179
statistical conclusion, 85–86
WAIS-IV, 161–162
WISC-IV, 163
Validity scales, 172
Variable Response Inconsistency Scale
(VRIN), 179
Verbal IQ (VIQ), 155
Viljoen, Jodi, 341–342
Violence prevention
bullying, 223–225
conduct disorder, 224–225
physical abuse, 222–223
Violence screening
classification, 133
VIQ, 155

W
Wampold, Bruce, 316
Watson, John, 22
Webster-Stratton, Carolyn, 221
Wechsler Adult Intelligence Scale–Fourth Edition (WAIS-IV)
changes from previous, 160–161
reliability, 161
sample items, 161, 162
subtests, 161
validity, 161–162
Wechsler Adult Intelligence Test, 120
Wechsler-Bellevue Intelligence Scale, 153, 155
Wechsler-Bellevue test, 17
Wechsler, David, 17, 149
Wechsler Individual Achievement Test, 120
Wechsler Intelligence Scale for Children, 120
Wechsler Intelligence Scale for Children–Fourth Edition (WISC-IV), 160–162
Wechsler Memory Scale-Fourth Edition (WMS-IV), 165–166
Wechsler Memory Scales, 120
Wechsler Preschool and Primary Scale of Intelligence-Fourth Edition (WPPSI-IV), 163
Wechsler scales, 17
Weiss, Jonathan, 216–217
Weissman, Gerald, 11
Weissman, Myrna, 240
Weisz, John, 284
Westen, Drew, 260
Westra, Henny, 311–312
Witmer, Lightner, 22
Wolpe, Joseph, 23
Woodcock Johnson III Tests of Achievement, 120
Woodworth’s Personal Data Sheet, 17
Woody, Sheila, 31–32
World Health Organization (WHO), 2
Mental Health Survey, 55
scope of mental health problem, 2
Wundt, Wilhelm, 16

Y
Youth violence
bullying, 223–225
conduct disorder, 224–225
physical abuse, 222–223