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DEPARTMENT OF

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OTAGO CLINICAL PSYCHOLOGY GRADUATES ................................. 28
1. A career in Clinical Psychology has become a major professional choice for many psychology graduates. Clinically qualified psychologists are employed in human service fields, including the District Health Boards, the Corrections Psychological Services, private practice, and other social welfare and counselling agencies. From a beginning in which clinical psychologists were employed primarily as testers to assist in the diagnosis of psychiatric patients, their service contributions have gradually broadened over the past 30 years to include not only the treatment and rehabilitation of psychiatric patients, but also the psychological care of non-psychiatric patients, health education, and community welfare. In all these areas psychologists and, in particular, clinical psychologists, have also played a key role in research and in the teaching of health service professionals.

2. The training model adopted at Otago is that of the scientist/practitioner. We believe that Clinical Psychology is the application of the methods and findings of scientific psychology to the analysis and alleviation of those individual, interpersonal, and community problems that are confronted by the health and social services. Therefore, a thorough undergraduate education in psychology is the essential basis for clinical training. After training it is important that clinical psychologists continue to keep themselves well-informed about developments in general psychology so that they can respond to new knowledge and clinical methods.

3. As applied scientists, clinical psychologists are expected to adhere as rigorously to accepted scientific standards as the practical demands of clinical settings will allow. In an equally important sense they are also committed to serving the community and to offering help to those in psychological distress. We believe that a successful clinical course is one in which the integration of academic coursework, research, and practical training in clinical skills creates a harmony between the scientific and humanitarian objectives.

4. All persons who practice as psychologists in New Zealand are required to be registered under the Health Practitioners Competency Assurance Act. Completion of the Postgraduate Diploma in Clinical Psychology and a Masters or PhD degree at Otago allows registration under the Clinical Psychologist vocational scope.
OVERALL STRUCTURE OF TRAINING PROGRAMME

1. **Prerequisites for Programme Entry.** To be eligible for admission to the programme, applicants must have completed the requirements of a Bachelor of Arts or Bachelor of Science in Psychology, or equivalent. To be admitted to 400-level courses in Psychology, students must have completed PSYC 311 (or the equivalent at another University).

2. **Duration of Course and Qualifications Completed During Training.** All students admitted to the programme complete at least three calendar years of study. During the first year, students typically complete a Bachelor of Arts with Honours or a Bachelor of Science with Honours in Psychology, or the equivalent. During the second and third years (also called the first and second professional years), students complete the Postgraduate Diploma in Clinical Psychology concurrently with a Master of Arts or Master of Science in Psychology (by thesis only). There are two common variations to this. In some cases, students complete a Doctor of Philosophy in Psychology instead of a Master’s degree and, in doing so, undertake at least two additional years of study. In other cases, students substitute the Honours degree in the first year with the coursework component of a Master of Arts or Master of Science in Psychology (by papers and thesis) and, in doing so, complete two qualifications over three years. From time to time, case-by-case variations are permitted (eg, if the student already holds a Master's or PhD research degree in Psychology).

3. **Provisional Admission and the Probationary Year.** If successful, applicants are provisionally admitted to the programme. Admission remains provisional for 12 months. During this probationary period, students complete the first of the three years of the programme. During the probationary year, all students complete PSYC 401–PSYC 406 and PSYC 428 and PSYC 435 regardless of the qualification for which they are enrolled. Honours students must also complete PSYC 490 and Masters students must complete PSYC 495. Students who maintain a satisfactory level of performance during the probationary year have their admission to the Postgraduate Diploma in Clinical Psychology confirmed.

4. **First Professional Year.** Students are concurrently enrolled in PSYC 501 and a Master’s or PhD degree. The first professional year incorporates both academic coursework and practical clinical training at the Clinical Psychology Centre. Progression to the second professional year is dependent on successful completion of both academic and practical course work as well as competence in performance of key clinical skills and abilities. To progress to the second professional year, a student must have completed MAOR 102 and registered as an Intern Psychologist with the New Zealand Psychologists Board.

5. **PhD Hiatus Period.** Students enrolled for a Master’s degree normally proceed straight into the second professional year. Students who have successfully applied for candidacy in a PhD programme do not proceed directly into the second professional year. Instead, having completed the first professional year, PhD students take a two-year hiatus in clinical training in order to devote themselves full-time to their research. Subject to satisfactory progress on their research, PhD students should expect to return to the second professional year directly after this two-year hiatus.

The programme encourages suitable students to engage in PhD research programmes in Psychology. Students with excellent academic records and passion for psychological research should give PhD study serious consideration. Students interested in pursuing PhD research instead of completing a Master’s degree should discuss this with the Programme Director during the probationary year. Note that University regulations require that PhD candidates pursue a full-time course of advanced study and research under supervision for a period of at least two and a half years.

6. **Second Professional Year.** Students are concurrently enrolled in PSYC 601 and a Master’s or PhD degree. The second professional year involves extensive practical clinical fieldwork (internship training) and completion of the research thesis. All students undertaking internship training must be registered with the New Zealand Psychologists Board as Intern Psychologists for the duration of the internship training. No candidates may sit the final second professional year examination unless they have submitted their Masters or PhD thesis for examination or unless a special exemption has been granted.
CRITERIA FOR ADMISSION

The number of practical clinical placements available during the professional years limits the number of students accepted each year into the training programme. The present annual intake of ten students may be expected to vary depending upon the facilities available. Applications for admission are considered against the following criteria.

1. *Academic performance.* The applicant has achieved excellent academic performance in 300-level psychology papers and, if applicable, has maintained excellent academic performance at postgraduate level.

2. *Motivation to train as a clinical psychologist.* The applicant demonstrates he or she is appropriately motivated to undertake postgraduate training in clinical psychology. The applicant should demonstrate appropriate awareness of what practice in the profession entails, enthusiasm for work as a clinical psychologist, and attributes required for successful completion of the Postgraduate Diploma in Clinical Psychology and the concurrent Masters or PhD research degree.

3. *Suitability to train as a clinical psychologist.* The applicant is suited to training in clinical psychology. In determining this criterion, consideration is given to demeanour, self-awareness, relevant experience, maturity, capacity for critical thinking, self-care, judgement, flexibility, and capacity to relate to others. These attributes should be regarded as neither necessary nor sufficient for an applicant to meet this criterion but as variables that may help form a holistic impression of suitability.

4. *Fitness for registration.* There are no existing grounds that may reasonably be expected to make the applicant unfit for registration under Section 16 of the Health Practitioners Competence Assurance Act 2003. In brief, criteria for fitness for registration make reference to effective communication, proficiency in English, conviction of an offence punishable by imprisonment for a term of 3 months or longer, mental and physical conditions, professional or other disciplinary proceedings, and risk of endangerment of the public.

Note that persons who are not citizens or permanent residents of New Zealand or Australia will not be considered for places in this programme.

REGULATIONS FOR THE POSTGRADUATE DIPLOMA IN CLINICAL PSYCHOLOGY (PGDIPCIPs)

1. **Admission to the Programme**
   
   (a) Admission to the programme shall be subject to the approval of the Pro-Vice-Chancellor (Sciences), on the advice of the Clinical Psychology Admissions Committee.
   
   (b) An applicant for provisional admission to the programme shall have completed the requirements for a Bachelor’s degree in Psychology or for the third year course for the degree of Bachelor of Science with Honours in Psychology or for the degree of Bachelor of Arts with Honours in Psychology, or equivalent.
   
   (c) An applicant for final admission to the programme shall
   
   (i) have been admitted to the degree of Bachelor of Science with Honours in Psychology or Bachelor of Arts with Honours in Psychology, or equivalent; and
   
   (ii) have passed Psychology papers at 400-level as required by the Head of the Department of Psychology.

2. **Structure of the Programme**

   The programme of study after final admission shall consist of PSYC 501 Clinical Intervention (taken in the first professional year of the programme) and PSYC 601 Clinical Psychology Internship (taken in the second professional year). The final examination in the second professional year includes an assessment of the candidate’s performance in clinical settings and an oral examination.

   Note: MAOR 102 is a prerequisite for PSYC 601.

3. **Concurrent Programmes**

   (a) A candidate shall have enrolled for the degree of Master of Science, Master of Arts, or in exceptional cases Doctor of Philosophy, in Psychology, at the beginning of the programme for the diploma.
A candidate shall not be awarded the diploma until the requirements for the degree of Master of Science, Master of Arts, or Doctor of Philosophy, in Psychology, have been fulfilled.

4. **Terms**
   
   (a) A candidate must obtain terms for the second professional year before being permitted to sit the final examination for PSYC 601.
   
   (b) Terms will be awarded by the Programme Director if the candidate has submitted for examination a thesis or dissertation that is a requirement of a concurrent programme.
   
   (c) Candidates who are refused terms will be eligible to sit the final examination for PSYC 601 in the following year, subject to the awarding of terms during that year. Students who fail to meet the terms requirements within that year will be required to repeat the year as a whole before being permitted to sit the final examination.
   
   (d) In exceptional circumstances (eg, where completion of PSYC 601 is necessary for the timely completion of a concurrent programme), the terms requirement may be waived by the Head of the Department of Psychology.

5. **Duration of the Programme**
   
   A candidate shall follow a programme of study for not less than two years.

6. **Level of Award of the Diploma**
   
   The diploma may be awarded with distinction or with credit.

7. **Variations**
   
   The Pro-Vice-Chancellor (Sciences) may in exceptional circumstances approve a course of study which does not comply with these regulations.

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**CLINICAL GRADUATE PROFILE**

An individual who graduates with the Postgraduate Diploma in Clinical Psychology will be competent to practise independently, safely, and effectively as a Clinical Psychologist and be eligible to register as a Clinical Psychologist with the New Zealand Psychologists Board. The graduate will demonstrate the following knowledge, skills, and abilities.

1. **Communication.** The ability to convey and solicit information efficiently and effectively, in both lay and professional forums, with individuals, groups and communities in oral and written form.

2. **Community.** The ability and willingness to facilitate the learning experience of individuals, groups and communities, both within and beyond the health sector, and to advocate for their health needs.

3. **Critical Thinking.** The ability to reason, to analyse issues logically, to consider different options and viewpoints, to integrate new information into his or her understanding, and to make informed decisions and develop new solutions to old and new problems.

4. **Diversity.** An understanding of and respect for diversity within the frameworks of the Treaty of Waitangi and multiculturalism in New Zealand and the ability to apply these in clinical and research practice.

5. **Empathy.** A caring and empathetic attitude toward others; respect for patients and a dedication to work with patients to optimise their health and wellbeing.

6. **Ethics.** Knowledge of ethics and ethical standards and the application of this knowledge to clinical and research practice and conduct in both professional and nonprofessional forums; dedication to appropriate ethical behaviour and awareness of his or her own moral values; and the ability to maintain proper boundaries between professional and nonprofessional roles.
7. **Global Perspective.** A global perspective on research and practice in clinical psychology, and an informed sense of the impact of the international environment on New Zealand and New Zealand’s contribution to the international environment.

8. **In-Depth Knowledge.** A deep, coherent and extensive knowledge of clinical psychology research and practice, including:

   8.1 A sound knowledge of the philosophical, scientific and ethical principles underlying the practice of clinical psychology and an ability to apply this knowledge as part of competent practice.

   8.2 A sound understanding of the legal framework surrounding practice as a clinical psychologist in New Zealand.

   8.3 A commitment to the principles of patient-centred practice and the scientist-practitioner model of practice.

   8.4 Knowledge of factors impacting on inequalities in health status and outcomes of Māori, Pasifika, and other people groups.

   8.5 Awareness, knowledge, and skills relating to working with diversity, including developmental differences across the lifespan; recognition that points of difference between him or herself and patients affect the efficiency and effectiveness of clinical practice, and key corollaries arising from this recognition.

   8.6 Skills in eliciting, documenting and integrating information about a patient’s current problem, including its history, formulating a parsimonious explanation for that problem, and proposing efficacious and effective solutions.

   8.7 Skills in the design, evaluation, administration and scoring of standardized psychological and neuropsychological assessment instruments and interpretation of results from such instruments.

   8.8 Skills in negotiating, developing rapport, and collaborating with patients, and in negotiating with and working alongside family and other professionals, to achieve optimal assessment, management, and intervention results.

   8.9 Skills in identifying psychopathology and differential diagnosis.

   8.10 Skills in the identification, design, implementation and monitoring of effective and efficacious behavioural, cognitive, and cognitive-behavioural treatment and management strategies for common behavioural and mental health problems.

   8.11 Skills in the assessment and management of risk of harm to individuals.

   8.12 An awareness of, and the skills to manage, uncertainty in clinical practice.

9. **Information Literacy.** Strong information literacy and specific skills in acquiring, organising and presenting information, in particular through computer-based activity.

10. **Insight.** Awareness of his or her own needs as a person, how health needs may impact on competence to practise and an ability to access appropriate support, supervision or healthcare for him or herself.

11. **Interdisciplinary Perspective.** Intellectual openness and curiosity, and the awareness of the limits of current knowledge and of the links among disciplines.

12. **Lifelong Learning.** A commitment to lifelong learning, with the ability to apply knowledge, develop existing skills, adapt to a changing environment, and acquire new skills; and the ability to evaluate his or her own professional functioning and to act to remedy limitations of knowledge, skills and attitudes throughout his or her career, including seeking help when these limitations are met.

13. **Reflective Practice.** An awareness of his or her professional limitations, and the willingness to seek help when these limitations are met.
14. **Research.** A commitment to the fundamental importance of research to clinical psychology science and practice, the ability to design and conduct effective investigations into aspects of psychopathology, distress and clinical practice, recognising when information is needed, and locating, retrieving, evaluating and using research information effectively.

15. **Scholarship.** A commitment to the fundamental importance of the acquisition and development of knowledge and understanding.

16. **Social Responsibility.** An awareness of factors contributing to inequality in health outcomes, a sense of social responsibility and an understanding of the contribution clinical psychologists can make to redress such inequalities.

17. **Teamwork.** Respect for, and an ability to co-operate with colleagues, competence in teamwork and collegiality, and an understanding of the roles of other health professionals and healthcare teams.

18. **Workplace-Related Skills.** Enterprise, self-confidence, a sense of personal responsibility within the workplace and community, and the ability to be organised and the skills for time management so that time and resources are used effectively and efficiently.

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**ADMINISTRATION**

1. The clinical programme is administered by the Department of Psychology and students are registered in the Division of Sciences.

2. The Director of the clinical course is a clinically qualified member of staff in the Department of Psychology and is responsible for the day-to-day operation of the programme, coordination, and planning.

3. Overall coordination of courses in the Probationary Year is the responsibility of the Psychology 400 Coordinator (Dr Damian Scarf). All matters concerning the Master’s degree are the responsibility of the Master’s Coordinator (Associate Professor Liana Machado [Sem 2 in 2018 and Sem 1 in 2019] and Dr Richard Linscott [from Sem 2 in 2019]).

All matters concerning the Doctoral degree are the responsibility of the PhD Coordinator (Associate Professor Jackie Hunter).

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**TRAINING ADVISORY COMMITTEE**

1. The important function of the Training Advisory Committee (TAC) is to integrate the contributions made by University staff and field-supervisors. The committee meets on one or more occasions each year, as required. Membership includes: Director of the clinical course (Convenor), University clinical teaching staff, and clinical field supervisors.

2. **Terms of Reference**

   (a) To discuss developments in the structure, orientation, and content of the course, and the relevance of these to professional practice.

   (b) To advise on the coordination of academic coursework, research, and practical clinical training.

   (c) To finalise arrangements for practical placements of students in the second professional year.

   (d) To report on progress of students in their placements.
1. In general, the syllabus is structured so that as students proceed through the programme there is progressively less emphasis on formal academic course work and a correspondingly greater emphasis on practical clinical training and autonomous study. Within the academic component of the programme, there is a shift from theory to technical information. In the practicum component students are gradually introduced to situations involving increasing levels of clinical responsibility. Work on the research degree component is usually spread over the two professional years.

2. The probationary year follows the overall structure of the Department of Psychology’s 400-level programme and is not presented in detail in this booklet. Students should obtain a copy of the Department of Psychology Course Information booklet for further information.

Academic Component

1. **Probationary and First Professional Years:**

   During the probationary year, students complete courses covering the following topics:
   
   - The experimental analysis of behaviour and its application in clinical and nonclinical problems;
   - Techniques for measuring the cognitive, behavioural, and social-emotional functioning of children and adolescents;
   - Advanced topics in adult abnormal psychology, including features, pathogenesis, and causes of mental disorder;
   - Topics in psychometric theory and the clinical assessment of individuals with psychological disorders;
   - Advanced topics in neuropsychological assessment and remediation in neurological deficits;
   - The application and efficacy of cognitive-behavioural therapy techniques; and
   - Biological and environmental contributions to normal and abnormal child development.

   During the probationary year, a variety of teaching methods are used. Progress also depends on the development of self-directed learning skills as well as peer-to-peer teaching and collaboration.

   During the first professional year, students will attend a yearlong seminar series covering case formulation, psychopharmacology, assessment and treatment of psychological disorders, and professional issues. Self-identified learning needs become a significant driver of autonomous academic study. Learning is also directed by internal assessment requirements.

   All students must also have completed an introductory course on the theory and practice of Maori culture and society in traditional and contemporary contexts (at Otago, MAOR 102) before they can be admitted to the second professional year.

2. **Second Professional Year**

   Students are expected to attend evening classes that will be held at a time determined at the commencement of the first semester. Students enrolled in the second professional year have substantial control over the curriculum covered in these classes: The curriculum content is largely determined by learning objectives and needs identified by students in the second professional year. Over the past several years, the classes have involved a combination of seminars and skill development and consolidation in areas including legal issues for clinical psychologists, applied neuropsychological assessment, engagement with children in clinical work, risk assessment and safety, assessment and intervention with family violence, theoretical frameworks in clinical practice, specialty assessment and treatment approaches, and professional communication in case management, planning, and formulation.

   **Practical Clinical Training**

   1. The objective of the practical clinical training is for students to receive a wide-ranging introduction to the variety of assessment and intervention strategies used in clinical psychological practice. Although students may not normally develop high levels of expertise with all approaches to which they are introduced, they will be encouraged to acquire more specialist skills and knowledge in particular areas of clinical practice.
2. **Probationary Year**  
During the Probationary Year, students will be required to complete such clinical practicum work as required by the courses taken during this year. Practical training during this year focuses on the establishment of competence in rudimentary clinical skills.

3. **First Professional Year**  
During the first professional year, students will spend a minimum of two days per week in clinical practicum at the Clinical Psychology Centre. Practicum training begins in the first week of February and ends in the first week of December. Practical training during the first professional year focuses on the development of competencies in a broad range of clinical skills required for effective communication, assessment, intervention, and professionalism.

4. **Second Professional Year**  
During the final year, students will spend a total of 12 months in two clinical settings as intern psychologists. They will spend not less than four days per week in supervised clinical practice, and one day per week will be set aside for the completion of thesis research. Internship training during the second professional year focuses on the consolidation of the competencies required in order to permit students to practice clinical psychology safely and independently outside of a training programme. Areas of competence span a broad range of professional practice, assessment, and intervention areas.

5. **Professional Standards**  
It is of the utmost importance that clinical psychologists in training maintain a high level of personal and professional conduct in all their training placements. Students should be aware of the ethical standards adopted by the New Zealand Psychologists Board and note that this code of ethics provides guidelines for their behaviour in clinical settings. Students on placement are directly responsible to the psychologists supervising their training in each placement, who in turn will be responsible to the managers or directors of the units concerned. Clinical supervisors have the unreserved right to terminate trainees’ placements should their professional conduct, competence, or behaviour warrant this action being taken. Such a dismissal would automatically result in the review of a student’s continuing candidacy in the clinical training programme.

6. **Placement Settings**  
Clinical practicum experience will be gained in units selected from the following areas of the psychological services in the Otago and Southland regions:

- (a) Older Persons’ Health, Dunedin Hospital  
- (b) Community Mental Health Teams, Dunedin Hospital  
- (c) ISIS, Rehabilitation Service, Wakari Hospital  
- (d) Student Health and Counselling Service, University of Otago  
- (e) Psychological Service, Department of Corrections  
- (f) Department of Paediatrics and Child Health, Dunedin Hospital  
- (g) Child, Adolescent & Family Service, Dunedin Hospital  
- (h) Clinical Psychology Centre, University of Otago  
- (i) Inpatient Psychiatric Services, Wakari Hospital  
- (j) Youth Speciality Services, Dunedin Hospital  
- (k) Mental Health Services, Southland District Health Board

In any one year, attachment to these units depends on the approval of the managers of the clinical units, as well as the availability of satisfactory clinical supervision.

7. **Field Supervisors (Registered Clinical Psychologists)**  

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
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<tbody>
<tr>
<td>Bronwyn Billinghurst, MSc PGDipCIPs</td>
<td>Jo Parry, MSc PGDipCIPs</td>
</tr>
<tr>
<td>Anna Campbell, PhD PGDipCIPs</td>
<td>Ryan Perkins, MA PGDipCIPs</td>
</tr>
<tr>
<td>Adell Cox, MA DipCIPs</td>
<td>Helen Rathore, PhD PGDipCIPs</td>
</tr>
<tr>
<td>Karyn Daniels, PhD PGDipCIPs</td>
<td>Matt Richardson, DClinPsy</td>
</tr>
<tr>
<td>Anna Dawson, MSc PGDipCIPs</td>
<td>Malgosia Szukel, MA PGDipCIPs</td>
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<tr>
<td>Rob Devereux, MSc DipCIPs</td>
<td>Shelley Taylor, PhD PGDipCIPs</td>
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<tr>
<td>Jake Dickson, MSc PGDipCIPs</td>
<td>Shona Tourell, MA DipCIPs</td>
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<tr>
<td>Brian Dixon, MSc DipCIPs</td>
<td>Jayde Walker, MSc PGDipCIPs</td>
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<tr>
<td>Holly Hammond, MA PGDipCIPs</td>
<td>Rebecca Walker PhD PGDipCIPs</td>
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<tr>
<td>Jackie Lodge, PhD DipCIPs</td>
<td>Ione Woole, MA DipClinPsych</td>
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<tr>
<td>Sasha McComb, MA PGDipCIPs</td>
<td>Philippa Youard, MSc DipCIPs</td>
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<tr>
<td>Ben McEachen, PhD PGDipCIPs</td>
<td>Helen Paton, MA MPsychClin</td>
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<tr>
<td>Mike Parkes, MSc DipCIPs</td>
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1. The clinical training programme has a strong emphasis on developing research skills. Implicit in the training of clinical psychologists is the expectation that they will develop skills that will allow them to make a significant contribution to the design and completion of research projects within the settings in which they will be employed. Experience and training in this area contribute substantially to the applied scientist component of the model of the professional clinical psychologist adopted at Otago. Clinical psychologists must be actively committed to contributing wherever possible to the expanding database of the profession.

2. During the Probationary Year, Honours students will complete a short dissertation while other non-Honours students will begin work towards their Master’s degree. During the subsequent two years, all students will be required to complete a piece of research to a standard consistent with the Master’s degree requirements of the University of Otago. In some cases, where the quality, and scope of the research is appropriate, students may be permitted to enrol for the PhD degree.

3. Students are encouraged to select a topic and supervisor before the start of the first professional year and certainly no later than the end of March in the first professional year. A detailed research proposal, reviewing relevant literature and outlining the research format is expected no later than 1 June of the first year. The thesis should be submitted at the end of the second year. Students must have submitted their thesis for examination in order to be permitted to sit the final clinical examination in the second professional year.

4. Many of the areas of research within the domain of applied psychology present a considerable and often esoteric variety of design and control problems. Students are generally encouraged to observe and involve themselves, wherever feasible, in any ongoing research projects in the Clinical Psychology Centre and in other practical placement settings, in addition to their thesis research.

5. Listed below are the staff of the Department of Psychology of the University of Otago, and their relevant research interests:

- **Abraham, Wickliffe** PhD(Flor) Professor
  - Neural mechanisms of learning and memory, cellular and molecular events underlying nervous system plasticity and Alzheimer’s disease.

- **Alsop, Brent** PhD(Auck) Senior Lecturer
  - Experimental analysis of human and animal behaviour in detection and choice procedures.

- **Beanland, Vanessa** PhD (ANU) Senior Lecturer
  - Human factors, applied cognitive psychology, transport safety, visual attention.

- **Bilkey, David** PhD(Otago) Professor
  - Biological basis of memory and learning. Spatial memory and navigation. Hippocampal function in schizophrenia.

- **Colombo, Michael** PhD(Rutgers) Professor
  - Neural basis of memory and learning, effects of brain damage on behaviour, comparative animal cognition.

- **Conner, Tamlin** PhD(Boston College) Senior Lecturer
  - Emotional and physical well-being, nutrition and psychology, smartphone surveys, experience sampling methods.

- **Franz, Elizabeth** PhD(Purdue) Professor
  - Planning, attention, and memory processes of complex actions in neurologically-normal and impaired individuals, with a specific focus on bimanual skills.

- **Halberstadt, Jamin** PhD(Indiana) Professor
  - Social cognition; intuition and decision making; emotion; social categorisation; religious cognition.

- **Hayne, Harlene** PhD(Rutgers) Professor
  - Memory development in infants and children, childhood amnesia, the development of children’s drawing skills interviewing children in clinical and legal contexts, risk-taking by adolescents.

- **Healey, Dione** PhD DipClinPsych(Cant) Senior Lecturer
  - Attention Deficit Hyperactivity Disorder, temperament and psychopathology, neuropsychological development in childhood.

- **Hillman, Kristin** PhD(North Dakota) Lecturer
  - Neural basis of goal directed behaviour and decision-making, work ethic, neuropharmacology.

- **Hunter, Jackie** DPhil(Ulster) Associate Professor
  - Social identity, belonging, prejudice and intergroup relations.

- **Linscott, Richard** PhD DipCLP(Otago) Senior Lecturer
  - Schizophrenia, psychosis risk, and suicide.

- **McNaughton, Neil** PhD(S’tamps) Professor
  - The neural basis of anxiety and its disorders; the Reinforcement Sensitivity Theory of human personality; testing EEG biomarkers for internalising and externalising disorders in the clinic.
Machado, Liana PhD(UCD) Associate Professor
Neuropsychology, visual attention, automaticity and control.

Miller, Jeff PhD(Mich) Professor
Cognitive psychology and psychophysiology, visual perception and attention, mathematical and statistical models and methods.

Murray, Janice PhD(Waterloo) Associate Professor
Visual cognition, face and object recognition, face perception and aging, visual attention.

O’Hare, David PhD(Exon) Professor
Cognitive ergonomics, human factors, aviation psychology, expertise and decision-making.

Poulton, Richie PhD(NSW) PGDipCIPs(Otago) Professor
Developmental psychopathology; gene-environment prediction of complex disorders; and psychosocial determinants of chronic physical disease.

Reese, Elaine PhD(Emory) Professor
Social influences on cognitive development; autobiographical memory development; early literacy.

Ruffman, Ted PhD (Toronto) Professor
Theory of mind in infants, children (including disadvantaged children) and older adults as well as prejudice and the origins of prejudice in children.

Sellbom, Martin PhD (Clinical)(Kent State) Associate Professor
Personality and psychopathology; personality disorders; psychopathy; personality assessment; forensic psychology.

Scarf, Damian PhD(Otago) Senior Lecturer
Adolescence eg, reducing university student alcohol consumption, building psychological resilience in adolescents, maintaining mental health during life transitions, the impact of violent video games on aggressive behaviour, etc.

Schaughency, Elizabeth PhD(Georgia) Senior Lecturer
How to promote evidenced-based practice and decision-making to bridge the research-to-practice gap in professional practice with children.

Taumoepeau, Mele PhD(Otago) Senior Lecturer
Preschoolers’ socio-emotional development; parent-child language and social interactions; child language development; language and culture.

Treharne, Gareth PhD(Birmingham) Senior Lecturer
Psychosocial influences on the experience of illness, treatment decisions and constructions of health in the media.

Ward, Ryan PhD(Utah State) Senior Lecturer
Neurobiology of motivation, cognition, and their interaction; temporal information processing and learning; animal models of psychiatric disease.

Zajac, Rachel PhD PGDipCIPs(Otago) Associate Professor
Psychology and the law, eyewitness testimony, legal/investigative procedures for witnesses.

FACILITIES

Early in 1979 the Department of Psychology opened the Clinical Psychology Centre (previously the Community Counselling Centre), which is the professional training facility for postgraduate students in the first professional year of the clinical psychology programme. A further function of the Centre is to provide a facility for training in clinical research. The Centre is situated on Level 5 of the William James Building, in the Department of Psychology, and comprises four interview rooms with audio visual recording facilities, a test library, a DVD viewing suite, a shared study space for first year students, a seminar room, staff offices and a reception area. Most of the work of the Centre involves providing help to clients who present with anxiety, relationship difficulties, stress-related problems, insomnia, phobias, depression, child management problems, obsessive-compulsive disorders, self-control problems and children with learning difficulties.

FINANCE AND VACATIONS

1. **Probationary Year**
   During this year of the programme, students attend university and have the same vacations as would any Psychology 400 student in the Department.

2. **First and Second Professional Years**
   Normally, the first professional year of the Postgraduate Diploma in Clinical Psychology course commences in the first week of February and ends in the first week of December. The second professional year begins in January and ends in December.

   Students should note that during both Professional years of the Diploma there is little opportunity for part-time employment or work during vacations. During the first professional year, a two-week period of leave is scheduled in June and a further week during mid-Semester break in August. Between the end of the first professional year and the beginning of the second professional year, students are advised to spend time working on their thesis research. During the second professional year students may take a one week vacation between the first and second placement. **Students must apply to the Director of Clinical Programme for leave at any other time.**
EXAMINATIONS AND ASSESSMENT OF STUDENTS

Probationary Year

See the Department of Psychology Course Information booklet for Psychology 400 requirements. The progress of all probationary students will be reviewed at the end of the year before their advance to the first professional year is confirmed.

First Professional Year

Examinations

To proceed to the second professional year, students are expected to obtain a pass mark in PSYC 501.

Terms Requirements

Only students who satisfy the terms requirements will be allowed to sit the PSYC 501 examination. The requirements are:

1. **Satisfactory attendance and completion of assignments.** Students are expected to attend all course commitments and complete all assignments.

2. **Satisfactory evaluations by Clinical Supervisors.**

Second Professional Year

Examination

1. The procedure for the examination may vary in detail from year to year. Students will be examined on their performance in a clinical setting. The examination normally takes place over several weeks and includes:

   (a) Submission of a clinical folio containing:

      (i) A log of practical field experience since enrolment for the Diploma (list of placements, dates, and an indication of the variety of clinical work performed).

      (ii) A sample of routine case-reports on patients seen under supervision during the second professional year clinical placements.

      (iii) An extended report of between 5000 and 10000 words on psychological intervention with a patient seen during the year.

   (b) An interview and assessment of a patient seen under clinical conditions.

   (c) An oral examination on (a) and (b) above.

   (d) An oral examination on a selection of paper referrals.

2. The final grade for PSYC 601 examination will be based upon the candidate’s submissions and performance during the examination period. Clinical supervisors’ reports may be used as supplementary material.
**Terms Requirements**

Terms for the PSYC 601 examinations are decided no later than two weeks in advance of the date of the examination and are based upon the following requirements:

1. Submission of the clinical folio.
2. Submission for examination of the Masters or PhD thesis research undertaken to meet the concurrent programmes requirement.
3. Satisfactory reports from clinical supervisors (students are evaluated at the end of each second professional year placement).

**Overall Grade for the Postgraduate Diploma in Clinical Psychology**

The Postgraduate Diploma in Clinical Psychology may be awarded with distinction. Candidates would normally average an A grade in both the first professional year and the second professional year to be considered for a pass at this level.

A failure in the second professional year examination will result in an overall fail.

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**APPLICATIONS**

1. All applications are to be made online. Application information and the link to the application portal is available via the Department website at [http://www.otago.ac.nz/psychology/study/postgraduate/clinicalpsyc.html](http://www.otago.ac.nz/psychology/study/postgraduate/clinicalpsyc.html)

2. Completed application forms must reach the Division of Sciences, University of Otago, PO Box 56, Dunedin 9054, no later than **20 October** of the preceding year.

3. Applicants being considered for a place on the course will be asked to attend for an interview in mid to late November.

4. The final selection is made by the Admissions Committee of the Division of Sciences and candidates can expect to hear the outcome of their application in early to mid December.

5. Requests for further details about the programme should be addressed to:

   Director of Clinical Psychology Programme  
   Department of Psychology  
   University of Otago  
   PO Box 56  
   Dunedin 9054  
   New Zealand

   Email: dionehealey@psy.otago.ac.nz
1978
David Mellor, MSc DipClPs
1980
Richard Thomson, MA DipClPs
Philippa Youard, MSc DipClPs
1981
Brian Dixon, MSc DipClPs
1982
Maureen Barnes, MA DipClPs
Barry Longmore, MA PhD DipClPs
Raymond Mitchell, MA DipClPs
Gillian Pow, PhD DipClPs
Alison Scarth, MA DipClPs
Eric Shelton, MSc DipClPs
1983
Hamish Godfrey, MSc PhD DipClPs
Glenda Graham, MSc DipClPs
Bernadette Moroney, MSc DipClPs
Shona Parmenter, MA DipClPs
Jane Powell, MSc DipClPs
Ruth Ross, MSc DipClPs
Christine Scott, MSc DipClPs
Geoffrey Shirley, MA DipClPs
1984
Susan Dykes, MSc DipClPs
Karen Haye, MSc DipClPs
Paul Merrick, PhD DipClPs
Tess Molteno, MSc DipClPs
Anne Power, MSc DipClPs
1985
Janice Collins, MA DipClPs
Annette Egan, MA DipClPs
Marianne Quinn, MA DipClPs
1986
Ann Connell, MSc DipClPs
Juliet Sanders, MSc DipClPs
Ross Young, MA DipClPs
1987
Susan Cowie, MSc DipClPs
Michael Feehan, MSc DipClPs
Terence Henry, MA DipClPs
Fiona Partridge, MA DipClPs
Gregory Tims, MA DipClPs
1988
Barbara Chisholm, MSc DipClPs
Helen Colhoun, PhD DipClPs
Katrina Falconer, MSc DipClPs
Stephanie Frost, MA DipClPs
Fiona Longmore, MA DipClPs
Richie Poulton, MA DipClPs
Gail Tripp, PhD DipClPs
1989
Robin Jones, MA DipClPs
Ann Monahan, MSc DipClPs
1990
Paul Clymer, MA DipClPs
Colleen Coop, PhD DipClPs
Lisa Delaval-Willis, MSc DipClPs
Elisabeth Money, MSc DipClPs
Lynley Stenhouse, MSc DipClPs
1991
Jocelyn Burke, MSc DipClPs
Oliver Davidson, PhD DipClPs
Thomas Gati, MA DipClPs
Dale Mercier, MSc DipClPs
Sharon Spence, MSc DipClPs
1992
Bindy Baker, MSc DipClPs
Malcolm Stewart, PhD DipClPs
Shirley Tan, MSc DipClPs
Rebecca Webster, MSc DipClPs
1993
Justine Harris, MA DipClPs
Linzi Jones, MA DipClPs
Clare Wilson, PhD DipClPs
1994
Aaron O’Connell, MSc DipClPs
David Scott, PhD DipClPs
Rose Silvester, MA DipClPs
Louise Smith, PhD DipClPs
1995
Tara Cathie, MA DipClPs
Jemima Greenstock, PhD DipClPs
James Hegarty, PhD DipClPs
Sarah-Jane Ivory, PhD DipClPs
Janet Janata, MA DipClPs
Roger Shave, MSc DipClPs
Tracey Turner, MA DipClPs
1996
Rachael Collie, MA DipClPs
Robert Devereux, MSc DipClPs
Ann Huggett, MSc DipClPs
Mark Hutchinson, MSc DipClPs
Louisa Medlicott, MA DipClPs
Janet Milne, MA DipClPs
1997
Joanne Boniface, MA DipClPs
Nicola Brown, MSc DipClPs
Diana Harte, MA DipClPs
Laura Hedayati, PhD DipClPs
Jackie Lodge, PhD DipClPs
Deborah McLean, MSc DipClPs
Stephanie Rolinson, MA DipClPs
Abigail Squire, MSc DipClPs
Jessica Talbot, MSc DipClPs
1998
Glenda Clark, MSc DipClPs
Adell Cox, MA DipClPs
Philippa Drew, MA DipClPs
Kate Harrison, MSc DipClPs
Emma Raymond-Speden, PhD DipClPs
Nickolai Titov, MA PhD DipClPs
1999
Rachel Barr, PhD DipClPs
Sarah-Jane Booth, MA DipClPs
Vanessa Clough, MSc DipClPs
Emily Cooney, PhD DipClPs
Johanna Dean, MSc DipClPs
Kelly Holmes, MA DipClPs
Richard Linscott, PhD DipClPs
Michael Parkes, MSc DipClPs
Gina Priestley, PhD DipClPs
2000
Kate Farrant, PhD DipClPs
Leah Godfrey, MSc DipClPs
Geraldine Hancock, PhD PGDipClPs
Alison Lovegrove, MSc DipClPs
Juanita Ryan, MA DipClPs
Dougall Sutherland, PhD PGDipClPs
2001
Dominique du Plessis, MSc PGDipClPs
Kate McDermott, MSc PGDipClPs
Ruth Pracy, MSc PGDipClPs
Juanita Smith, PhD PGDipClPs
2002
Andrea Green, PhD PGDipClPs
Karyn Daniels, PhD PGDipClPs
Sallie Dawa, MA PGDipClPs
Annabel Dawson, MSc PGDipClPs
Paula Sowerby, PhD PGDipClPs
Lee Treacy, PhD PGDipClPs
Anita Turley, PhD PGDipClPs
Samuel O’Sullivan, MA PGDipClPs
Rosanne Taylor, MSc PGDipClPs

2015
Elle Black, MA PGDipClPs
Anna Campbell, PhD PGDipClPs
Matthew McDonald, PhD PGDipClPs
Hannah Macgregor-Wolken, MA PGDipClPs
Brodie McKinlay, MA PGDipClPs
Sarah Morton, PhD PGDipClPs
Helen Shuk Ling Tsui, PhD PGDipClPs
Shinayd Van Rooy, MA PGDipClPs

2016
Christopher Brett, MSc PGDipClPs
Benjamin Jaquiery, PhD PGDipClPs
Charlotte Levings, MSc PGDipClPs
Aimee Peacock, MSc PGDipClPs
Aimee Richardson, MSc PGDipClPs

2017
Kate Edgar, MSc PGDipClPs
Samuel Flannery, MSc PGDipClPs
Rebecca Grattan, PhD PGDipClPs
Max Major, PhD PGDipClPs
Dannielle O’Brien, PGDipClPs
Paris Pidduck, MSc PGDipClPs
Phoebe Poulter, PhD PGDipClPs
Charmaine Strickland, PhD PGDipClPs
Penny Tipu, MSc PGDipClPs

2018
Jennifer Baxter, PhD PGDipClPs
Genevieve Iversen, PhD PGDipClPs
Alice McClintock, MSc PGDipClPs
Julia McIntosh, MSc PGDipClPs
Phoebe Naldoza Drake, MSc PGDipClPs
Max Nicolson, MSc PGDipClPs
Michela Verwey, MSc PGDipClPs
Shannon Westgate, PhD PGDipClPs