

Concept Paper

Masters in Behavioral Health Sciences College of Health Sciences and Technology

“The Masters in Behavioral Health Sciences program at RIT will produce counseling professionals who use science and technology to function at the highest levels in integrated health care environments through the use of preventative, progressive, client-centered and evidence-based approaches.”

I. Title: Behavioral Health Sciences (M.S.)

II. Goals and Justification for the Program

The time has come to provide integrated health care that is grounded in science and uses technological advances to deliver and augment treatment. Moreover, it is also clear that there is ‘no health without mental health.’ Recent studies report that approximately 50% of primary health care clients within urban settings have an untreated psychiatric problem and comparable rates of psychiatric clients have co-occurring medical conditions (NIH). The Substance Abuse and Mental Health Services Administration (SAMHSA) has a mission to reduce the impact of substance abuse, mental illness and legal involvement on America's communities through their support of: a) Integrated behavioral and medical health and b) Integration of behavioral health with technology assisted approaches (e.g., smart phone applications and web-based interventions).

New, integrated health care initiatives are moving away from standard models of disparate interventions and utilizing science as well as evidenced-based practices that conform with SAMSHA’s mission and provide a comprehensive, effective plan of care focused on improving overall health. Behavioral approaches are being used to engage clients in mental health interventions and they are a cost-effective method of increasing compliance with medical health treatment (NIDA, 2011). The Affordable Care Act has been a catalyst for the integration of mental health, substance abuse, medical treatment and preventative medicine. Further, the rapidly expanding recognition of the reciprocal nature in which behavioral and physical health mutually influence one another (e.g., depression and weight) portends the need to meet emerging training needs of behavioral health counselors and to establish integrated educational and service networks across these two distinct fields with the goal of providing a more effective treatment approach to the “whole person” (Butler, et al., 2008).

The Masters in the Behavioral Health Sciences (MBHS) program will offer training and education in behavioral health and wellness. The program will focus on client-centered approaches and it will always target *trauma informed care practices*. *The new standard of care is moving away from asking: “What is wrong with you?” and instead asks: “What happened to you?”* The use of client- centered and evidenced based care approaches

are being embraced as a new standard of care.

The proposed program will train students in methods of care that integrate and use the latest technological advancements and evidenced-based interventions across child and adult populations with behavioral health treatment needs. Based on existing strengths within RIT, the curricular and training focus will be on the integration of science, technology and application of health principles. Additional emphases will be placed on wellness and prevention through links with CHST's Nutrition Management and Exercise Science programs. This is a strategic advantage over all other programs as CHST already houses a curriculum for medical training *and* placements for critical experiential learning (e.g., P.A.'s, ultrasound, pre-med majors). Moreover, these partnerships will allow us to teach our students about the integration of interactive technologies through multidisciplinary teams of psychologists, physicians, medical illustrators, students in health informatics, and computer/game designers. Technology assisted tools (e.g., games for behavioral health, smart phone coping skill apps) will be used by students to augment and improve treatment outcomes. It should also be noted that the Department of Labor Bureau of Labor Statistics predicts an increased need for behavioral health professionals in coming years due to a healthcare environment that increasingly addresses preventative interventions and values or requires interdisciplinary collaboration in diagnosis and treatment.

III. Description of the Program Curriculum

The core program will follow the standards set forth by the *Council for Accreditation of Counseling and Related Educational Programs (CACREP)* which stipulates that students earn a total of 60 credits; 48 credit hours of core areas of emphasis and 12 credit hours of elective courses and practicum or internship experience. The program will offer 3 core areas of counseling focus: community mental health, Integrated Health, and forensics.

An example of the curriculum for a full-time student is provided below.

Year 1-Fall

Course Title	Credits
MBHS 500- History and Ethics of Integrated Counseling Practice	3
MBHS 510- Counseling/Motivational Theories and Strategy	3
MBHS 520- Integrated Assessment and Clinical Evaluation	3
MBHS 525- Measurement, Diagnoses, and Psychopathology	3
Total Credits	12

Year 1-Spring

Course Title	Credits
MBHS 515- Social and Cultural Diversity in Practice	3
MBHS 530- Integrated Treatment Planning	3
MBHS 540- Attachment and the Biology of Prevention	3
MBHS 535- Group Therapy in Integrated Settings	3
Total Credits	12

Year 1-Summer

Course Title	Credits
MBHS 600- Attachment Relationships and Family Therapy	3
MBHS 550- Counseling Practicum	3
Total Credits	6

Year 2-Fall

Course Title	Credits
MBHS 560- Neurobiology and Psychopharmacology	3
MBHS 575- Research, Measurement, and Evidence-Based Practice	3
MBHS 620- Trauma-Informed Therapy and Crisis Intervention	3
MBHS 650- Counseling Internship	3
Total Credits	12

Year 2- Spring

Course Title	Credits
MBHS 640- Evidence-Based Family Interventions	3
MBHS 610- Individual Differences and Vocational Counseling	3
MBHS 630- Integrated Counseling in Medical Settings	3
MBHS 650- Counseling Internship	3
Total Credits	12

Year 2-Summer

Course Title	Credits
MBHS 6##- <i>Choice of Elective</i>	3
MBHS 650- Counseling Internship	3
Total Credits	6

The MSBH program will coordinate within CHST and beyond to offer students the opportunity to work toward acquiring skills in bio-psychological techniques and interventions. Through didactic and practical training, students will learn to use evidence-based practices, such as Cognitive Behavioral Therapy (CBT), Trauma-Focused CBT, Motivational Interviewing (MI), and Dialectical Behavioral Therapy (DBT). Behavioral techniques that enhance motivation to change are broadly applicable among RIT students pursuing careers in diverse healthcare settings. Students will explore the use of meditation, biofeedback, as well as relaxation strategies within the framework of motivationally focused counseling approaches to assist with myriad physical (e.g., pain management) and psychological (e.g., coping with chronic diseases) needs that promote overall wellness. Regarding prevention efforts, motivational techniques work to encourage exercise and healthy nutrition while operant conditioning paradigms reinforce healthy behavior change. Emphasis on fitness, exercise, and cardiovascular health promote the recovery of the whole person by emphasizing the mind-body connection.

Each graduate will have a foundation in the use of current scientific, technologically sound, and evidence-based approaches to ensure student preparation for the emerging integrated health care environment. Courses will go beyond the standard content of counseling, diagnosis, prevention, and intervention, to incorporate additional competencies in motivational interviewing, family therapy, addiction and forensic services, attachment theory, neurobiological influences on psychopathology and

intervention, and counseling in integrated care settings. Please refer to the appendix for a full description of the courses.

This integrated and comprehensive curriculum will generate students well prepared for counseling jobs across a wide array of physical and behavioral health care settings. Access to medical illustration, therapeutic gaming, and other advanced applications of health care technologies make the College of Health Sciences and Technology the logical host for the MBHS program. The strategy of designing select program courses to overlap across multiple disciplines will create efficiencies and enhance the educational experience for all.

IV. Fit with RIT Academic Portfolio Blueprint Characteristics

Counselors working in the health care environment of the future will utilize state-of-the-art science and technology protocol approaches directed toward integrated treatment of physical and behavioral health care needs. The Affordable Care Act has catalyzed an emphasis on wellness and prevention. The planned delivery of integrated health care training within the College of Health Sciences and Technology creates the ideal environment to bring different disciplines and approaches together on the foundation of RIT's published Academic Portfolio Blueprint ideals. Counselors graduating from this program will be in a position to help individuals understand and address the underlying biological, neurological, cultural, behavioral, and emotional factors, which interact in complex ways. They will have expertise regarding how best to navigate the behavioral and physical health care systems to benefit their clients' health and well being.

At the local level, one of the greatest strengths in support of the proposed MBHS program is the strong community partnerships that have already been established to support clinical practicums, internship placements, clinical research initiatives, and adjunct faculty participation in curriculum delivery. At the local and community level, RIT's CHST has affiliation agreements with the Monroe County Office of Mental Health, the Socio-Legal Center, Coordinated Care Services Incorporated, the Canandaigua Veterans Administration and associated satellite centers, Monroe County specialty courts (e.g. drug court, veteran's court, mental health court, family court, and human trafficking court) as well as associated RGHS ambulatory addiction clinics. Training our students in the use of integrated, technologically advanced approaches will place graduates at the forefront the new initiatives that will be set forth by the Affordable Care Act (e.g., integration of behavioral health and medical care at one location in a systematic way).

At the national level, RIT has a collaborative relationship with Yale's School of Medicine, Psychiatry Department and the University of Connecticut, Farmington, CT that could offer placements in research and clinical training in a range of settings within behavioral health.

Mental illness and issues of behavioral health present great challenges to public and population health on the global scale. In addition to providing didactic training in these global health issues, efforts are being made to expand existing collaborative research

and training relationships with international partners with faculty at King's College in London, England, Glasgow University in Scotland and Melbourne University in Australia. These sites could offer study abroad placements as both clinical rotations and/or research initiatives in behavioral health.

Our college has the foundation necessary to implement the highest quality of education through highly unique and specialized training to ensure quality clinicians, leaders and scholars in the field. Our students will be ambassadors of major change at the local, national and international level.

V. Synergy with Other Programs

Students enrolled in undergraduate programs in psychology, social work, the biomedical sciences, criminal justice and other undergraduate programs within and outside of RIT would be eligible to enroll in the Masters in Behavioral Health Sciences program at RIT. Great potential exists in collaboration with faculty of the College of Liberal Arts around foundational course work and potential research initiatives that could benefit both academic units.

The Masters in Behavioral Health Sciences curriculum will also be designed in a way that encompasses the substantive content areas of the New York State Department of Education State Board for Psychology. This will continue the theme of opening classes up to students from different programs within RIT, which enhances classroom diversity and bolsters, scheduling efficiencies. It is also our intention to utilize many components of the proposed curriculum and external clinical partnerships as foundation for a new Ph.D. program in Clinical Psychology (e.g., Forensic Psychology Specialization) that will follow this Concept Paper. Such future doctoral program directions include but are not limited to training in:

- Forensic assessment and treatment approaches
- Neuroscience and the physiological bases of behavior, cognition, motivation, and emotion
- Understanding social and organizational dynamics
- Quantitative measurement of intelligence, achievement, aptitudes, interests, and personality
- Research Design, Methodology, and Statistics

The proposed graduate degree offering will set a focus for the new College in behavioral health training that will reach across the other two limbs of the Institute of Health Sciences and Technology. We will expand our reputation as a Research Center and Center for Community Outreach with its impact on the local, regional, national, even global, scale. As to the latter, international collaborations (research and clinical centers in London, Spain, Hong Kong and Brazil) have already been established and formalized. Research grants have been submitted and preliminary discussions are underway to pave the way for graduate/undergraduate student and internship fellowship exchanges between affiliated universities and clinical sites. This new degree program will also impact progressive change and new educational and training experiences to enhance behavioral health training for Physician Assistants and Biomedical Science students (e.g., students advancing to medical school who will have a foundation in psychiatry). Additional discussions are also underway to introduce concepts of exercise science and nutrition

(existing areas of focus within CHST) into the forensic psychology-training program. The development and implementation of exercise science and nutrition treatment protocols can help benefit overall health and wellness in forensic clients' that aligns with the mission of our college and the goals within the health care reform act. By teaching motivational approaches to students from other areas of study, the MS program will help produce professionals who understand the mind-body connection and can promote Prevention and Wellness across diverse settings and populations.

In accordance with the goals of the Masters in Behavioral Health Sciences program, potential internship training sites with span the physical and behavioral health and Educational fields. Many opportunities for collaboration and internship placements exist through current partnerships with Rochester General Health System/Rochester Regional Health System, the local Veterans Administration, agencies licensed by both the New York State Office of Mental Health (NYSOMH) and the Office of Alcoholism and Substance Abuse Services (OASAS), the Monroe County Office of Mental Health (MCOMH), Coordinated Care Services, Inc. (CCSI), and their affiliates.

VI. Administrative Structure of the Program

The Program will be administered through the College of Health Sciences and Technology (CHST) with a dedicated budget and Program Director in support of operations quality oversight. The CHST is comprised of a number of academic programs that stand alone within the organizational design of the College; there is no departmental structure in place at this time. The Program Director would report directly to the Dean of the College of Health Science and Technology, serve as a member of the CHST Administrative Council, and be responsible for recruitment, maintenance and assessment of the program and associated outcomes, oversight of student progress and success, and compliance with budget allocations. Clinical practicum experiences (externships) will be organized with the help of a dedicated clinical coordinator who would secure and oversee clinical training sites and functions of clinical instructors to ensure student learning that would meet accreditation standards.

Example Links to CACREP Accredited Masters in Counseling Programs

- http://www.brooklyn.cuny.edu/courses/acad/program_info.jsp?major=646&div=G&dept_code=27&dept_id=99#646
- <http://www.sjfc.edu/academics/nursing/departments/mentalhealth/>
- http://www.soe.syr.edu/academic/counseling_and_human_services/default.aspx
- <http://counselored.pages.tenj.edu/>
- <http://www.monmouth.edu/school-of-humanities-social-sciences/psychological-counseling.aspx>
- <http://www.neumann.edu/>

VII. Enrollment Management Expectations and Sustainment

Feedback from the Office of Enrollment Management in response to this concept paper included the following:

"... we should work together to carefully consider and test the program name, based on the target market and how those interested will be searching online resources. Results vary when conducting online searches based on program titles or keywords, and being

sure the program title resonates based on how the market is searching will be key to awareness and the ability to reach appropriate candidates for the program.

Leveraging internal resources and efforts, results from the contacts and connections you describe, aggressive marketing efforts centrally and in the department, and identifying external resources for tuition and assistantship will be required to achieve enrollment goals. It is anticipated that enrollment in this program could yield your enrollment target of 12-15 students (FTE) per year..." The accompanying fiscal business model is based on an enrollment of 12 students/year as full-time students scheduled to complete all requirements in 2 years (includes two summer semesters of mainly practicum experiences). Initially, courses will be offered on-campus but feasibility of online course options will be explored.

"Scholarship support is limited to RIT central funding of 25 - 30% of overall tuition revenue redirected to scholarship through Institute Graduate Scholarship allocation. Any additional funding for graduate students will come from research grants and outside resources. Aggressive external marketing, as well as the development of partnership agreements with appropriate government and industry partners and organizations, RIT undergraduate programs and external colleges and universities will be critical to marketing and enrolling students.

The timing of the approval process will affect projections for the first year; to achieve the stated goal, program marketing should begin 9 – 12 months prior to the start date."

VIII. Impact on Resources

The College of Health Sciences and Technology currently offers a number of elective courses in behavioral sciences of interest to students of the Biomedical Sciences program. Three faculty have been hired, are engaged in teaching, and working in areas of clinical research who carry partial appointments and responsibilities with select organizations outside of RIT (Easter Seals, Monroe County Office of Mental Health, the Veterans Administration, etc.). In addition to incremental faculty planned for implementation of the proposed program, the existing faculty will contribute to core offerings and oversight of clinical preparation for program graduates. It is anticipated there will be additional benefit to the undergraduate population who seek a minor in behavioral health sciences. This will allow students to package select courses from both the undergraduate and 500-level graduate course portfolio.

The primary resources needed to start the program will be additional personnel in the form of adjunct and incremental core faculty.

IX. Conclusion

In sum, the "Affordable Care Act of 2010" will lead to a radical change in our health care system as we know it. With the implementation of the proposed Masters in Behavioral Health Sciences program, the plan is to integrate behavioral health, medical health care and interactive technologies in a systematic way. Health care professionals will be expected to administer best practice approaches to improve treatment outcomes and the quality of life for clients and their families in the most cost effective way. One major target population of the affordable care act is the vulnerable, high-risk, disadvantaged clients who have addiction, trauma, mental health and criminal justice involvement. This plan creates opportunities for unique synergy between programs and will produce

professionals who are prepared to meet the needs of multi-cultural populations in a wide array of settings.

Students graduating from the proposed Masters in Behavioral Health Sciences Program at RIT will be uniquely equipped to meet these needs as they will have been provided with an understanding of the complex interactions between physical and behavioral health, and they will know how to apply current research, best practice approaches and advanced technology to promote wellness and move individuals with varied disabilities toward recovery.

References

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Appendix A

Course Descriptions

History and Ethics of Integrated Counseling Practice (MBHS 500): Includes the roles, functions, responsibilities, credentialing, history and philosophy of the counseling profession as applied across integrated health care settings.

Counseling/Motivational Theories and Strategy (MBHS 510): Provides the framework for an orientation to wellness and prevention through the use of evidence-based motivational enhancement skills and technologically advanced tools applied in a wide array of settings to diverse populations. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Social and Cultural Diversity in Practice (MBHS 515): Studies provide an understanding of the cultural context of relationships, values, and identity in a multicultural society. *Note synergy with Ph.D. in Clinical Psychology.*

Integrated Assessment and Clinical Evaluation (MBHS 520): Involves the use of a broad array of testing and evaluation tools and techniques in a way that promotes reliable and valid clinical information. Emphasis is placed on social and cultural factors in aiding the diagnosis of psychiatric, cognitive, and substance use disorders. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Measurement, Diagnoses, and Psychopathology (MBHS 525): Incorporates the use of scientific approaches such as the use of fMRI technology to diagnose, educate, and motivate clients toward positive change. Neurological advances will be emphasized as students utilize current research findings to understand behavioral health disorders. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Integrated Treatment Planning (MBHS 530): Provides students with a developmental and clinical understanding of the etiology of behavioral health and medical conditions to prepare them to engage clients in person-centered planning and systemic interventions. *Note synergy with Ph.D. in Clinical Psychology.*

Group Therapy in Integrated Settings (MBHS 535): Highlights the use of evidence-based group therapy and motivational enhancement approaches as catalysts for the change of a wide array of disorders across diverse health care settings.

Attachment and the Biology of Prevention (MBHS 540): Explores the protective functions of positive attachment as the foundation for healthy neurological development and relationship dynamics throughout the life span and will utilize health informatics in client education. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Course Descriptions (continued)

Counseling Practicum (MBHS 550): Initial placement to introduce students to counseling in a variety of health care settings.

Neurobiology and Psychopharmacology (MBHS 560): Utilizes advances in psychopharmacology and the neurosciences to provide students with an integrated understanding of the role neural pathways and neurotransmitters play in the treatment of behavioral health disorders. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Research, Measurement, and Evidence-based Practice (MBHS 575): Focuses on the research methods, statistical analysis, and implications of findings for effective use in evidence-based approaches. Emphasis is placed on the importance of measurement in a data-driven environment and will prepare students for scholar and thesis preparation. *Note synergy with Masters in Experimental Psychology and Ph.D. in Clinical Psychology.*

Individual Differences and Vocational Counseling (MBHS 610): Includes the use of the latest technology and measurement tools to assess client aptitudes and skills. The importance of educational and vocational goals as central to recovery will be emphasized. *Note synergy with Ph.D. in Clinical Psychology.*

Trauma-informed Therapy and Crisis Intervention (MBHS 620): Students will gain and understanding of the use of best practice tools and techniques to mitigate the effects of trauma through the use of individual, family systems, and evidence-based crisis response approaches.

Integrated Counseling in Medical Settings (MBHS 630): Notes the behavioral health disorders that frequently co-occur with common medical conditions and teaches students how to deliver effective counseling approaches in medical settings.

Evidence-Based Family Interventions (MBHS 640): Emphasizes the family as the social context for healing and utilizes evidence-based family therapy approaches to promote recovery from behavioral and physical health disorders.

Counseling Internship (MBHS 650): Students contribute their counseling skills in Community Mental Health, Medical, and/or Forensic settings.

Electives

Forensic Assessment and Treatment (MBHS 644): Addresses the behavioral health needs of individuals involved in the judicial system. State of the art assessment, measurement, and treatment designed to promote recovery and reduce recidivism are emphasized. *Note synergy with Ph.D. in Clinical Psychology.*

Electives (continued)

Neurobiology In Counseling (MBHS 645): Specifically details the neurological underpinnings of behavioral health disorders that inform the use of evidence-based treatment interventions.

Attachment, Positive Parenting, and the Biology of Wellness (MBHS 646): Explores the role of positive attachment, effective parenting, supportive relationships, and self-care across the life span. Includes the use of advances in personal health aids and technology to promote optimal health.

Substance Use Counseling, Prevention, and Intervention (MBHS 647): Highlights an understanding of the neurobiology of addiction and the use of fMRIs and advanced technology in the assessment, measurement, and treatment of substance use disorders.

Appendix B

Part Time Curriculum Table Masters in Behavioral Health Science

Part-time Year 1-Fall

Course Title	Credits
MBHS 500- History and Ethics of Integrated Counseling Practice	3
MBHS 510- Counseling/Motivational Theories and Strategy	3
Total Credits	6

Part-time Year 1-Spring

Course Title	Credits
MBHS 515- Social and Cultural Diversity in Practice	3
MBHS 530- Integrated Treatment Planning	3
Total Credits	6

Part-time Year 1-Summer

Course Title	Credits
MBHS 520- Integrated Assessment and Clinical Evaluation	3
MBHS 525- Measurement, Diagnoses, and Psychopathology	3

Total Credits	6
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Part-time Year 2-Fall

Course Title	Credits
MBHS 530- Integrated Treatment Planning	3
MBHS 540- Attachment and the Biology of Prevention	3
Total Credits	6

Part-time Year 2- Spring

Course Title	Credits
MBHS 560- Neurobiology and Psychopharmacology	3
MBHS 575- Research, Measurement, and Evidence-Based Programs	3
Total Credits	6

Part-time Year 2-Summer

Course Title	Credits
MBHS 620- Trauma-Informed Therapy and Crisis Intervention	3
MBHS 550- Counseling Practicum	3
Total Credits	6

Part-time Year 3-Fall

Course Title	Credits
MBHS 600- Attachment Relationships and Family Therapy	3
MBHS 610- Individual Differences and Vocational Counseling	3
MBHS 650- Counseling Internship	3
Total Credits	9

Part-time Year 3- Spring

Course Title	Credits
MBHS 640- Evidence-Based Family Interventions	3
MBHS 630- Integrated Counseling in Medical Settings	3
MBHS 650- Counseling Internship	3
Total Credits	9

Part-time Year 3-Summer

Course Title	Credits
MBHS 6##- <i>Choice of Elective</i>	3
MBHS 650- Counseling Internship	3
Total Credits	6

Appendix C

Additional Courses Electives As Foundational Courses for a Ph.D. in Clinical Psychology

Appendix C:

- Counseling, Prevention, and Intervention: Advances knowledge in the principles of addiction education, prevention, intervention, and consultation as applied in individual, family and group counseling modalities. Students will be instructed in the use of fMRIs in assessment and client education, and biofeedback in treatment.
- Motivational Interviewing: The use of MI and other evidence-based counseling approaches in behavioral and physical health care settings will include an emphasis on the use of technology to enhance motivation, reinforce therapeutic interventions, and measure outcomes.
- Family Therapy: Promotes the use of Family Systems theories in conceptualizing, assessing, planning, and delivering a broad array of behavioral and physical health treatment interventions. Course work will include emphasis on the importance of positive attachment, effective parenting, and integrated models of care, which weave behavioral health into pediatrics.
- Neurobiology in Counseling: Highlights the advances in the neurosciences as counselors consider the role neurobiology plays in the prevention and treatment of behavioral and physical health conditions. Students will gain an understanding of neural pathways and processes, the role of epigenetics, and evidence-based family-centered interventions, which mitigate the effects of trauma.
- Attachment and the Biology of Prevention: Students will understand the vital developmental importance of positive caregiver attachment as a cornerstone of health and wellness later in life.
- Counseling in Physical Health Care Settings: Provides information about common comorbid conditions encountered by individuals with behavioral health care needs (i.e., diabetes, asthma, cardio-metabolic syndrome, obesity, etc.) and provides students with an understanding of how technology can be used to enhance motivation, reinforce therapeutic interventions, and measure outcomes.

**MS Behavioral Health
SUMMARY REPORT**

Fiscal Year	2017	2018	2019	2020	2021	Total
Avg Enrollment: Students (FT + PT)	12	23	23	23	23	105
Part-time Faculty expense	\$ 22,032.00	\$ 22,472.64	\$ 22,922.09	\$ 23,380.53	\$ 23,848.15	\$ 114,655.41
Full-time faculty expense	\$ 337,573.39	\$ 688,649.72	\$ 702,422.71	\$ 716,471.17	\$ 730,800.59	\$ 3,175,917.59
Total Expenses	\$ 284,277.74	\$ 446,438.41	\$ 453,899.92	\$ 462,598.08	\$ 471,470.20	\$ 2,118,684.34
Revenue (Net of Aid)	\$ 372,991.98	\$ 748,930.59	\$ 775,143.16	\$ 802,273.17	\$ 802,273.17	\$ 3,501,612.06
CONTRIBUTION MARGIN Surplus/(Deficit)	\$ 88,714.24	\$ 302,492.17	\$ 321,243.24	\$ 339,675.09	\$ 330,802.97	\$ 1,382,927.71

Note : This sheet is password protected to maintain the formulas.