

Madeline Bono, B.A. – NJPA Article

I am a second year student at Rutgers Graduate School of Applied and Professional Psychology (GSAPP), and I began my externship at the Foster Care Counseling Project (FCCP) in July 2019. Though I had some peripheral concept of what this position would be like, I could not have anticipated how impacting this practicum would be for me.

My own background prior to graduate school was in substance use disorder research. I worked in Yale's Methadone Research Unit at the APT Foundation in New Haven. My research was in alternate pain management strategies for people with co-morbid chronic pain and opioid use disorders, and clinician burnout. It was here, through my experiences with each study participant and hearing their stories, that my hope to become a clinical psychologist was cemented.

My first year at GSAPP, I held two clinical positions. One of these was at Rutgers' Counseling, Alcohol and Other Drug Assistance Program & Psychiatric Services (CAPS), where I provided CBT for a four-client caseload of university students with a variety of struggles, including anxiety disorders, depression, and grief. Additionally, I co-facilitated a number of weekly group workshops, which provided psychoeducation and skills development for anxiety reduction, stress management, and self-compassion. CAPS also provided a comprehensive weekly didactic curriculum. This covered topics pertinent to a broad range of treatment modalities and addressed clinical efficacy and cultural competency with a diverse population of clients. I feel that both the thorough didactic trainings and my personal experiences with clients provided me with a concrete foundation for my ongoing clinical practice.

In my first year I additionally worked as graduate student clinician at GSAPP's Center for Psychological Services (CPS). In my first year working there, I saw community-based clients through both dynamic and cognitive behavioral perspectives, and attended weekly small-group supervisions specific to the therapeutic orientation of each client's case. This year, my work at CPS continues in an expanded capacity; I now also conduct cognitive assessments through CPS's A-Team. Here, I receive supervision from both an experienced peer and licensed psychologist and complete comprehensive assessment reports based on each client's performance on their individually tailored assessment batteries. I also continue to work with community-based therapy-seeking clients from a CBT perspective, and attend weekly individual supervision with a licensed psychologist who has a specialty in treating OCD and body-focused repetitive behaviors.

Through the generous support of NJPAF, I have been able to work as a clinician at FCCP for my full-time externship position this year, and this has been an incredibly resonant experience for me. FCCP provides direct services to children and families who have open cases with Division of Child Protection and Permanency (DCP&P), and may provide continued services to children and families with prior DCP&P involvement. FCCP clinicians specialize in the provision of evidence-based trauma-informed therapy for our clients, and we are trained to deliver these through weekly didactics, individual supervision, and group supervision by licensed professionals.

The therapeutic models we deliver at FCCP are all evidence-based and designed to alleviate trauma symptoms in children, from the ages of three to twenty-one, depending on the model. We provide Game-Based Cognitive Behavioral Therapy (GB-CBT), Trauma-Focused Behavioral Therapy (TF-CBT), and Attachment, Regulation and Competency Therapy (ARC). Each client's unique situation is considered when the decision about which model to use is made, as each model has particular strengths, and we tailor delivery of treatment to each client's needs. These needs are assessed during the comprehensive intake and assessment, which FCCP clinicians complete for every new case. During intakes, integrated write-ups are completed based on trauma symptom assessments, DCP&P documentation, and interviews with caseworkers, caregivers, any persons involved in treatment, and the child themselves. The graduate student clinician and supervising licensed psychologist then select the treatment model most appropriate to each case, and through this lens, the clinician collaboratively strives towards meeting the child and family's treatment goals.

As a member of FCCP's clinical team, I have been struck by FCCP's commitment to approaching clients from a culturally humble perspective, with sensitivity and respect to the diverse clientele we work with. This is a perspective I hope and plan to bring with me in all my future work, and I feel privileged to currently be working among clinicians who hold this value to such high esteem.

I currently have a four-client caseload at FCCP, and I am deeply moved to have the opportunity to engage with the lives of these young people and their families. In my time as a clinician, I have been consistently amazed by the resilience of the people who I come into contact with. The children and families that I have worked with at FCCP have been striking exemplars of the strength of the human spirit. In the coming year, I hope to be able to help my clients build confidence and trust in themselves. I was speaking to a caregiver about her treatment goals in therapy at FCCP, and she replied "I only want this child to feel safe and loved", and in my own goals as a clinician at FCCP, I echo this goal. I hope that all of my clients are able to feel this in their life circumstances, and look forward to building my clinical skills in such a way as to facilitate this.