

**APPENDIX**

**CLINICAL PSYCHOLOGY PROGRAM  
DEPARTMENT OF PSYCHOLOGY  
UNIVERSITY OF REGINA**

**FALL 2012 PROGRAM REVIEW**

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## Overview of Review

CPA encourages us to evaluate our program on a regular basis. The purpose of this report is to review the goals, objectives and outcomes of the Clinical Psychology Program. Please send comments and feedback to [hadjista@uregina.ca](mailto:hadjista@uregina.ca).

### Research

*Research Goals:* We strive to prepare students to have an understanding and respect for both basic and applied research. We subscribe to the views that the clinical scientist, who is competently trained in practice, makes the most significant contributions to clinical research; and the practitioner, who is familiar with the body of basic and applied research, and, who can critically evaluate research findings makes the soundest contributions to society and the profession.

*Research Objectives:* To meet the above goals, students: 1) take courses in research methods and statistics and gain experience in program evaluation; 2) take clinical courses that incorporate research literature; 3) complete an M.A. thesis and Ph.D. dissertation; and 4) participate in faculty research projects.

*Outcomes:* The following are some indicators that represent how we are doing in this area:

	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	CPA Stats 2006-2007
Research Methods course average	90%	92%	90%	90%	88%	91%	91%	91%	-
Statistics course average	83%	88%	90%	95%	85%	86%	91%	88%	-
Students with at least one conference presentation	66.6%	72%	89%	77%	92%	97%	95%	92%	59%
Students with at least one refereed publication	48.5%	53%	56%	66%	64%	69%	71%	69%	40%
Students holding RA positions*	50%	70%	71%	77%	76%	61%	67%	73%	33%
Students with major external funding*, **	31%	56%	64%	65%	45%	55%	50%	63%	37%
Students with Faculty of Graduate Studies & Research (FGSR) funding*, **	45%	70%	61%	73%	45%	61%	70%	69%	33%

\* excludes students who are on or have completed the predoctoral internship

\*\* includes both tri-council funding and other major external funding

### Clinical Practice

*Clinical Practice Goals:* Students will be trained to be competent in assessment, diagnosis, and intervention. In each area, students will gain competency in the development and maintenance of interpersonal relationships, including competency in working with diverse groups. It is recognized, however, that the field of clinical psychology is diverse and no single practitioner can master all areas. Students will be taught to recognize their skills and when appropriate refer to colleagues who have the requisite skills.

*Clinical Practice Objectives:* Students will meet the clinical goals by: 1) completing course work in psychopathology, assessment and interventions exposing students to more than one theoretical orientation and skills for working with both adults and children and diverse populations; 2) carrying out at least 2700 hours of clinical training under supervision; and 3) completing comprehensive exams that require an oral case presentation, a review paper on a clinical topic, and an ethics oral exam.

Outcomes: Some indicators of our success in this area are:

	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Psychopathology	86.5%	88.2%	87%	86%	85%	89%	87%	87%
Assessment I	87.5%	87.5%	88%	78%	84%	88%	89%	87%
Assessment II	-	87.8%	-	86%	-	88%	-	88%
Interventions I	84.5%	83.4%	85%	84%	84%	84%	85%	86%
Interventions II	91.0%	-	86%	-	85%	-	87%	
Percentage Students Matched (includes those matched through clearing house)	100%	100% (81% matched by AAPIC)	100% (77% matched by AAPIC)	100% (79% matched by AAPIC)	75% (86% Canadian students matched by AAPIC)	100% (75% Canadian students matched by AAPIC)	100% (one non accredited match) compared to 83% match	80% (73% of Canadian Students matched by APPIC)

### Predoctoral Residencies

2012-2013	<input type="checkbox"/> Calgary Health Region <input type="checkbox"/> Royal Ottawa Health Care Group <input type="checkbox"/> Regina Qu'Appelle Health Region (primary rotation: Functional Rehab Program) <input type="checkbox"/> Regina Qu'Appelle Health Region (primary rotation: WRC Children's Program)
2011-2012	<input type="checkbox"/> University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB <input type="checkbox"/> UBC Counselling Services <input type="checkbox"/> BC Mental Health and Addiction Services, Clinical Child and Adolescent Track, BC Children's Hospital
2010-2011	<input type="checkbox"/> Centre for Addiction & Mental Health - Clarke Division – Toronto, ON <input type="checkbox"/> Millard Health Centre, Edmonton Alberta <input type="checkbox"/> <a href="#">Ongwanada: Kingston Internship Consortium</a> <input type="checkbox"/> Queen Elizabeth II Health Sciences Center, Halifax, NS <input type="checkbox"/> Regina Qu'Appelle Health Region (2) <input type="checkbox"/> Saskatoon Health Region, Saskatoon, SK(2)
2009-2010	<input type="checkbox"/> Calgary Health Region (2) <input type="checkbox"/> University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB
2008-2009	<input type="checkbox"/> Ottawa Hospital <input type="checkbox"/> Royal Ottawa Mental Health Centre <input type="checkbox"/> Regina Qu'Appelle Health Region
2007-2008	<input type="checkbox"/> Edmonton Consortium Clinical Psychology Residency <input type="checkbox"/> Regina Qu'Appelle Health Region
2006-2007	<input type="checkbox"/> Queen Elizabeth II Health Sciences Center, Halifax, NS (2) <input type="checkbox"/> Saskatoon Health Region <input type="checkbox"/> University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB
2005-2006	<input type="checkbox"/> University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB <input type="checkbox"/> Centre for Addiction & Mental Health - Clarke Division – Toronto, ON <input type="checkbox"/> Queen Elizabeth II Health Sciences Center, Halifax, NS <input type="checkbox"/> River Valley Health Internship, Fredericton, NB
2004-2005	<input type="checkbox"/> Central California Psychology Internship Consortium Association, Fresno, CA <input type="checkbox"/> Department of Corrections, Mental Health Services Division, Salinas Valley State Prison, Soledad, CA <input type="checkbox"/> Saskatoon Health Region, Saskatoon, SK <input type="checkbox"/> St. Joseph's Healthcare, Hamilton, ON <input type="checkbox"/> Annapolis Valley Health - Valley Regional Hospital, Kentville, NS



## Knowledge

*Knowledge Goals:* Students will gain a working understanding of biological, social, cognitive and affective bases of behaviour as well as individual differences, statistics and research methods. A more thorough knowledge of personality, psychopathology, assessment, diagnostics, intervention, ethics and professional behaviour will be obtained.

*Knowledge Objectives:* To meet the knowledge goals students: 1) complete course work at the graduate level in all of the above areas, 2) gain knowledge through clinical experiences, and 3) complete comprehensive exams.

*Outcomes:* Indicators of success are reflected in course work completion noted above but also in marks for the following courses:

	<b>2004-2005</b>	<b>2005-2006</b>	<b>2006-2007</b>	<b>2007-2008</b>	<b>2008-2009</b>	<b>2009-2010</b>	<b>2010-2011</b>	<b>2011-2012</b>
803 (Psychometrics)	92.3%	89.6%	-	91%	-	91%	-	91%
845 (Neuropsychology)	-	86.8%	-	88%	89%	85%	-	90%
881 (Information Processing)	80.0%	88.5%	87%	86%	86%	85%	86%	88%
820 (Social)	91.7%	-	89%	-	86%	-	91%	-

## Ethics and Professional Conduct

*Ethics and Professional Conduct Goals:* Students will be prepared to be ethical and professional in their research, clinical, and teaching activities, and sensitive to issues of racial and cultural diversity and individual differences.

*Ethics and Professional Conduct Objective:* To meet the ethical goals of our program, students: 1) take a course in professional ethics, 2) are exposed to diverse clients at clinical training sites (over 2700 hours of clinical training), 3) complete an oral ethics exam as part of the comprehensive examination process, and 4) apply for ethics approval for M.A. and Ph.D. research.

*Outcomes:* This is measured through the following:

	<b>2004-2005</b>	<b>2005-2006</b>	<b>2006-2007</b>	<b>2007-2008</b>	<b>2008-2009</b>	<b>2009-2010</b>	<b>2010-2011</b>	<b>2011-2012</b>	<b>CPA 2006-2007</b>
806 Ethics Average	95%	85%	85%	86%	88%	85%	89%	86%	-
Supervised clinical hours when applied to internship	1439	1547	1604	1456	1334	1389	1739	1595	1552
Direct Hours						411	527	648	
Supervision Hours						217	250	204	

Also note that all Ph.D. graduates have registered or are going through the registration process.

## Leadership

*Leadership Goals:* Students will gain experiences that prepare them to take leadership roles and contribute to psychology as a profession.

*Leadership Objectives:* Students complete a seminar in professional issues at the PhD level and are encouraged to: 1) present and publish their work, 2) attend professional seminars and conferences when possible; 3) gain experience in supervision of junior students; 4) obtain experience as teaching assistants or sessional instructors; 5) be active in the department and the PGSA and the community, and 6) be members of the Canadian Psychological Association or other professional organizations.

*Outcomes:* Indicators of outcome in this area are seen through examination of students enrolled each year:

	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	CPA 2006-2007 Stats
Conference Presentations	72%	89%	77%	83%	92%	97%	95%	92%	60%
Publications	53%	56%	66%	56%	64%	69%	71%	69%	40%
TA/Sessional Positions	69%	57%	58%	43%	34%	51%		50%	40%
Professional Org Membership	94%	100%	100%	86%	94%	100%	97%	92%	74%
Additional Workshops	NA	75%	94%	81%	56%	76%	97%	90%	-

## Graduates

<b>Year</b>	<b>Name</b>	<b>Position After Graduation</b>
2003-2004	Diane LaChapelle, R. Psych	Assistant Professor, UNB, Fredericton
2004-2005	Heather Switzer, R. D. Psych	Child Psychologist, Children's Program, Wascana Rehab Center, Regina
	Jennifer Boisvert, R. Psych	Research Consultant, Population Research Laboratory, University of Alberta
2005-2006	Jody Carrington, R. Psych	Psychologist, Inpatient and Day Unit of the Alberta Children's Hospital, Calgary.
	Kristy Kowalyk, R. D. Psych	Psychologist, Functional Rehab Program, Regina, SK
	Marc Woods, R. D. Psych	Psychologist, Chronic Pain Center, Saskatoon, SK
2006-2007	Sheryl Green, C. Psych	Assistant Professor, Department of Psychiatry and Behavioural Neurosciences, McMaster University Acute Mental Health & Consultation Liaison St. Joseph's Healthcare, Hamilton
	Shannon Fuchs-Lacelle (in process of registering in SK)	Child Psychologist, Children's Program, Wascana Rehab Center, Regina, SK
2007-2008	Lucille Rossiter (in process of registering in NB)	Psychologist, River Valley Hospital, Fredericton, NB
	Katherine Owens, R. D. Psych	Senior Psychologist, Mental Health, Regina, SK, Adjunct Professor & Professional Associate, U of R,
	Jaime Williams	Assistant Professor, Department of Psychology, University of Saskatchewan
	Regan Hart-Mitchell, R. D. Psych	Psychologist, Mental Health, Regina, SK

2008-2009	Pam Clarke, R. D. Psych	Psychologist, Mental Health, Regina, SK
	Veronica Hutchings, R. Psych	Psychologist, Queen Elizabeth II Health Sciences Center, Halifax, NS
	Allisson Quine, R. D. Psych	Psychologist, Child & Youth Services, Regina, SK
	Kim Buchanan, R. Psych	Psychologist, Glenrose Rehabilitation Hospital, Edmonton, AB (60%) Instructor, <i>Grant MacEwan University</i> (40%)
2009-2010	Liz Brass, R. D. Psych	Psychologist, Child and Youth Services, Regina, SK
	Nicholas Carleton	Assistant Professor, Department of Psychology, University of Regina
	Jennifer Stapleton	Psychologist, Acute Care, Waterford Hospital, St. John's, NL
2010-2011	Michelle Bourgault-Fagnou	Psychologist, Functional Rehab Program, Regina, SK
	Amanda Lints-Martindale	Assistant Professor, Department of Clinical Health Psychology, University of Manitoba, and Staff Psychologist, Community Mental Health Program, Steinbach, MB
	Megan Tuttle	Psychologist, Child and Youth, Regina, SK
2011-2012	Kelsey Collimore	Postdoctoral Fellow, Dr. Neil Rector, Sunnybrook, Toronto, ON
	Amy Janzen	Psychologist, Adult Mental Health, Regina, SK
	Candice Bovell	In process of registering in ON
	Paulette Hunter	Assistant Professor, St. Thomas More College, Saskatoon, SK
	Kim McKay-McNabb	Assistant Professor, First Nations University

### **Graduate Survey**

The past ten graduates of our PhD program completed a survey about our program. Below is a summary of feedback from this survey.

	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
To what extent did the program achieve its goal to train you as a scientist practitioner?	Completely – 40% Mostly – 60%	Completely – 30% Mostly – 70%	Completely – 40% Mostly – 60%	Completely – 40% Mostly – 60%	Completely – 60% Mostly – 40%
How would you rate the overall quality of the training you received?	Excellent – 50% Good – 50%	Excellent – 60% Good – 40%	Excellent – 60% Good – 40%	Excellent – 50% Good – 50%	Excellent – 40% Good – 60%
How prepared did you feel for:					
Conducting clinical assessments	Great- 40% Good – 50%	Great- 60% Good – 40%	Great- 70% Good – 30%	Great- 60% Good – 40%	Great- 6% Good – 40%
Conducting clinical interventions	Great-60% Good- 40%	Great-60% Good- 40%	Great- 60% Good- 40%	Great- 60% Good- 40%	Great- 40% Good- 60%
Consulting with other professionals	Great-30% Good-40% Fair- 30%	Great-30% Good-40% Fair- 30%	Great- 50% Good-50%	Great- 50% Good-50%	Great- 50% Good-40% Fair- 10%
Conducting research	Great-90% Good-10%	Great-90% Good-10%	Great- 80% Good-10% Fair – 10%	Great- 70% Good-20% Fair – 10%	Great- 40% Good-50% Fair – 10%
Consuming research	Great-90% Good- 10%	Great-90% Good- 10%	Great-100%	Great-90% Good-10%	Great-90% Good-10%

Teaching	Great – 40% Good – 40% Fair – 20%	Great –30% Good – 30% Fair – 40%	Great –30% Good – 20% Fair – 40% Poor –10%	Great –30% Good – 20% Fair – 50% Poor –10%	Great –40% Good – 20% Fair – 30% Poor –10%
Supervising clinical work	Great – 20% Good-30% Fair- 40% Poor -10%	Great –10% Good-30% Fair- 50% Poor -10%	Great –10% Good-30% Fair- 30% Poor -30%	Great –10% Good-40% Fair- 20% Poor -30%	Great –20% Good-40% Fair- 20% Poor -20%
Dealing with ethical issues	Great – 40% Good- 50% Fair - 10%	Great – 30% Good- 60% Fair - 10%	Great –40% Good- 60%	Great –40% Good- 60%	Great –40% Good- 60%
Working with diverse clients	Great – 40% Good – 40% Fair- 20%	Great – 40% Good – 40% Fair- 20%	Great -60% Good -40%	Great -60% Good -40%	Great -50% Good -50%
In an overall sense, how satisfied are you with the training you received?	very satisfied - 40% mostly satisfied - 60%	very satisfied - 40% mostly satisfied - 60%	very satisfied - 40% mostly satisfied - 60%	very satisfied - 30% mostly satisfied - 70%	very satisfied - 30% mostly satisfied - 70%
If a friend of yours was interested in attending graduate school, would you recommend our program?	Yes, definitely – 70% Yes, I think so - 30%	Yes, definitely – 60% Yes, I think so - 40%	Yes, definitely – 80% Yes, I think so - 20%	Yes, definitely – 70% Yes, I think so - 30%	Yes, definitely – 80% Yes, I think so - 20%

### Notable Strengths – reported by many students

Accredited program

Research:

- Quality of research education and training; requiring both MA and PhD
- Availability of multiple research opportunities beyond MA and PhD – highly productive research labs
- Quality of research supervisors and committee members
- Flexibility of students to focus on key areas of interest
- Collaborative research labs
- Quality of research space

Clinical:

- Clinical seminar series involving students from MA to PhD
- Quality of clinical experiences in multiple community settings
- Development of strong assessment skills
- Applied components to assessment courses
- Strong emphasis on empirically supported assessment and intervention
- Emphasis on scientist practitioner model
- Psychology Training Clinic

Teaching:

- Excellent opportunities for teaching
- High quality courses



Support:

- Mentorship of DCT
- Availability of financial support
- Supportive peers in program
- Availability of scientist practitioner role models
- Supportive clinical supervisors
- Collaborative program

Suggested Areas for Development:	Clinical Committee Response
<ul style="list-style-type: none"> <li>• Increase difficulty of Neuropsychology (e.g., presentations and measures)</li> </ul>	<ul style="list-style-type: none"> <li>• Unfortunately, the size of the program does not allow for specialized training in neuropsychology at this time; students come into this course with variable knowledge from the undergraduate level and therefore the course provides foundational knowledge.</li> </ul>
<ul style="list-style-type: none"> <li>• Add further training in consultation</li> </ul>	<ul style="list-style-type: none"> <li>• This is now covered in the PhD seminar</li> </ul>
<ul style="list-style-type: none"> <li>• Add courses in health psychology</li> </ul>	<ul style="list-style-type: none"> <li>• We have offered a directed reading before in health psychology; offering of this course on a more consistent basis is something we'd like to work towards, but must be balanced with demands for other courses</li> </ul>
<ul style="list-style-type: none"> <li>• Add courses in child psychopathology, assessment and treatment of children, family therapy</li> </ul>	<ul style="list-style-type: none"> <li>• We would like to offer more courses in child psychopathology, assessment and interventions, but interest in taking these courses has not been sufficient to offer the courses. Many students also feel very strongly about not adding another course</li> </ul>
<ul style="list-style-type: none"> <li>• Include more of an applied component to intervention courses (e.g., developing therapeutic relationships, dealing with therapeutic process issues).</li> </ul>	<ul style="list-style-type: none"> <li>• There is a certain amount of knowledge that needs to be shared during courses and the applied experience is best offered in clinical placements. That said, in both treatment courses we have applied components.</li> </ul>
<ul style="list-style-type: none"> <li>• Eliminate MA</li> </ul>	<ul style="list-style-type: none"> <li>• We have given serious consideration to elimination of the MA, but continue to feel the benefits of completing the MA out way the negatives (e.g., MA thesis is positive, allow students to terminate after the MA if necessary; Tri-council funding available for the MA, in Saskatchewan those with MA can register)</li> </ul>
<ul style="list-style-type: none"> <li>• Have five year minimum for MA and PhD</li> </ul>	<ul style="list-style-type: none"> <li>• At this time, we do not see ways that it is possible to meet the requirements for CPA accreditation and for the MA and PhD to take five years.</li> </ul>
<ul style="list-style-type: none"> <li>• Provide course work in clinical supervision*</li> </ul>	<ul style="list-style-type: none"> <li>• We offer extensive course work now in clinical supervision</li> </ul>
<ul style="list-style-type: none"> <li>• Use U of R psychology clinic in coursework*</li> </ul>	<ul style="list-style-type: none"> <li>• The U of R Psychology Clinic is used extensively in clinical courses.</li> </ul>
<ul style="list-style-type: none"> <li>• Add additional course options in therapy</li> </ul>	<ul style="list-style-type: none"> <li>• We would like to add more courses, but there are barriers including: 1) low enrolment; and 2) time to completion. For the time being, we will encourage students to explore directed reading options.</li> </ul>
<ul style="list-style-type: none"> <li>• Additional opportunities for diverse client contact spanning different therapies and populations</li> </ul>	<ul style="list-style-type: none"> <li>• We continue to look for additional practica for students. Over the past several years, we have been able to secure several new placements. In 2010, we were able to place students in Swift Current and are also able to offer a new practicum in the Psychology Training Clinic focused on trauma symptoms. In 2011, several new placements were added as well (e.g., RCMP, Prairie Psychological Services, Bariatric Surgery Clinic).</li> </ul>
<ul style="list-style-type: none"> <li>• Additional support for students to complete out of province practica</li> </ul>	<ul style="list-style-type: none"> <li>• The MA and PhD are set up so that students can complete out of province practica at several points during their program. The Clinical Placement Coordinator will assist the student in exploring</li> </ul>

	out of province practica that are of interest to the student. We currently have agreements with CAMH in Toronto, St. Jo's in Hamilton, Royal Ottawa Health Care Group, and several settings in Calgary and Edmonton allowing our students to train in these sites.
<ul style="list-style-type: none"> <li>Add additional practica with more clients in each placement</li> </ul>	<ul style="list-style-type: none"> <li>The clinical hours that students obtain in our program follow the recommendations set out by CPA. Students obtain experience in at least four settings (one 4-month internship and three practica). The Clinical Placement Coordinator closely monitors hours to ensure that students meet the national standards.</li> </ul>
<ul style="list-style-type: none"> <li>More workshops</li> </ul>	<ul style="list-style-type: none"> <li>Over the past three years, we have offered at least one additional workshop to students each year (e.g., interprofessional pain workshop)</li> </ul>
<ul style="list-style-type: none"> <li>Examine case studies</li> </ul>	<ul style="list-style-type: none"> <li>In the clinical seminar series, we have at least four students present a case each year.</li> </ul>

### Financial Support

#### M.A. Funding

	2004-2005 (n=13)	2005-2006 (n=12)*	2006-2007 (n=9)*	2007-2008 (n=11)*	2008-2009 (n=14)*	2009-2010 (n=13)*	2010-2011 (n=13)	2011-2012 (n=12)
Average level of income:	\$18,438	\$19,946	\$28,187	\$17,019	\$18,640	\$22,432	\$25,105	\$27,187
# of students reporting income below \$10,000	4	2	0	2	1	0	1 (lowest \$8300)	1 (student did not apply for any support)
# of students reporting income between \$10,000-19,999	5	5	2	6	8	6 (lowest income \$14,600)	2	0
# of students reporting income between \$20,000-\$29,999	1	3	3	3	4	6	7	8
# of students reporting income above \$30,000	3	2	4	0	1	1	3	3
% with external funding	31%	58.3%	78%	45%	29%	54%	62%	50%
% with FGSR	77%	58.3%	100%	73%	50%	92%	100%	83%

funding								
% who obtained TA funding	38%	50%	11%	27%	29%	54%	92%	67%
% who obtained RA funding	77%	83.3%	78%	64%	86%	83%	77%	92%
% who held outside employment	38%	16.6%	0	0	1	0	8%	17%
% who obtained a Sask Health Bursary	38%	33.3%	33%	27%	0	0	0	0

\* excludes 2 students because data unavailable because student on leave or ABD

*Ph.D. Funding*

	2004-2005 (n=19)	2005-2006 (n=13) )*	2006-2007 (n=15)*	2007-2008 (n=17)*	2008-2009 (n=14)*	2009-2010 (n=18)*	2010-2011 (n=15)*	2011-2012 (n=18)
Average level of income:	\$38,342	\$37,858	\$33,379	\$28,903	\$27,598	\$26,584	\$26,866	#32,215.88
# of students reporting income between \$0-19,999	2	1	4	3	2	5 (lowest \$14,300)	4 (lowest \$16,000)	5 (lowest \$6944)
# of students reporting income between \$20,000-\$29,999	7	3	2	7	8	7	4	3
# of students reporting income between \$30,000-\$39,999	2	5	4	4	4	3	6	4
# of students reporting income above \$40,000	8	4	5	3	0	3	1	6
% with major external funding	58%	76.9%	53%	59%	57%	56%	47%	67%
% with FGSR	53%	61.5%	87%	53%	50%	44%	47%	55%

funding									
% who obtained TA/sessional funding	58%	46.1%	53%	41%	36%	56%	47%	40%	
% who obtained RA funding	37%	46.1%	47%	47%	71%	56%	67%	72%	
% who held outside employment	21%	38.5%	53%	35%	14%	28%	20%	22%	
% who obtained a Sask Health bursary	21%	7.6%	6%	0	0	11%	NA	NA	

\* excludes those who are on or have completed the pre-doctoral internship

### Program Statistics

	2002 - 2003	2003-2004	2004 - 2005	2005-2006	2006 - 2007	2007- 2008	2008- 2009	2009- 2010	2010- 2011	2011- 2012
Number of M.A. Students Admitted/Number of MA. Graduates from Class To Date	6/6	7/6 (1 student withdrew after 1 <sup>st</sup> semester)	4/3	6/5(1 student withdrew after 1 <sup>st</sup> semester)	4/4	6/6	6/5	6/6	6/NA	6/NA
MA Time to Completion	29 mths	35 months	26 mths	27 months	25 mths	28 mths	28 mths	23 mths	NA	NA
Number of Ph.D. Students Admitted	2	5	5	4	6	2	7	3	6	8
Number of Ph.D. Graduates	0	1	2	3	2	4	3	2	3	3
PhD Time to Completion	-	67 m	46 & 72 m	54,58, 60 m	57 & 62* m	57, 60, 72, 77, m	47, 51, 55, 78	50*, 70, 96* m	48, 50, 64, 70 m	51, 59, 79, 80 m

\* student transferred to clinical from an experimental program

### Other Student Statistics

	As of 2011	As of 2012	CPA 2006-2007
Average time to completion MA	28.7 months (last 43 graduates 2003-2011)	28.3 months (last 49 graduates 2003-2012)	NA
Average time to completion for total program (MA & PhD) for all students	7.62 years (20 graduates 2003-2011)	7.38 years (23 graduates 2003-2012)	7.28 years
Withdrew from MA	2 of 62 admissions 2001-2011	2 of 67 admissions	NA

program before completion		2001-2012	
Withdrew from PhD program before completion	2 of 55 admissions 2001-2011	2 of 60 admissions 2001-2012	NA
Current percentage male	26.3% (out of 38)	26% (out of 46)	16.5%

### Faculty Statistics

	U of R 2007-2008	U of R 2008-2009	U of R 2009-2010	U of R 2010-2011	U of R 2011-2012	CPA 2006-2007
Authors/co-authors of papers at professional or scientific meetings	100%	100%	100%	100%	100%	93%
Authors/co-authors of articles in refereed journals	100%	100%	100%	100%	100%	84%
Member of Journal editorial board	30%	30%	40%	40%	30%	43%
Thesis supervisor	80%	80%	90%	90%	80%	89%
Thesis supervisor (complementary faculty)	40%	20%	11%	22%	20%	67%
Recipients of grants or contracts	100%	100%	100%	100%	90%	77%
Members in professional associations	100%	100%	100%	100%	100%	93%
Engaged in professional practice	90%	90%	90%	100%	100%	73%
Engaged in professional practice (adjunct)	100%	94%	100%	100%	100%	86%
Registered in program jurisdiction	90%	90%	90%	100%	100%	84%
Registered in program jurisdiction (adjunct)	100%	94%	100%	100%	100%	89%
Male tenured	40%	40%	40%	40%	40%	39%
Male non-tenured	0%	0%	0	10%	10%	10%
Female tenured	40%	40%	50%	40%	40%	39%
Female non-tenured	20%	20%	10%	10%	10%	12%
Total number of core faculty	10	10	10	10	10	10.5
Total number of complementary faculty	10	10	9	9	10	10.2
Total number of adjunct faculty & professional associates	13	16	16	19	22	24.9

### Course Offerings

	U OF R 2007-2008	U of R 2008-2009	U of R 2009-2010	U of R 2010-2011	U of R 2011-2012	CPA 2006-2007 STATS
Total number of core courses (neuro, cognitive, social, psychopathology, history)	3	5	4	4	3	5.1
Total number of foundational courses (ethics, research design, statistics, psychometrics, MA seminar)	5	4	3	4	5	5.4
Total number of professional courses (assessment I and II, interventions I and II, doctoral seminar)	3	4	4	4	3	8.1
# core faculty teaching core courses	20%	10%	20%	10%	20%	42.6%
# core faculty teaching foundational courses	20%	20%	10%	20%	20%	38.5%
# core faculty teaching professional courses	30%	40%	40%	40%	50%	67.4%
# of complementary faculty teaching core courses	10%	30%	22%	33%	40%	51.1%
# of complementary faculty teaching foundational courses	30%	30%	11%	11%	20%	45.5%
# of complementary faculty teaching professional courses	0	0	0	0	0	10.4%
# of adjunct teaching core courses	0	0	0	0	0	6.2%
# of adjunct teaching foundational courses	0	0	0	0	0	8.9%
# of adjunct faculty and professional associates teaching professional courses	0	0	0	0	0	16.2%

**Feedback Wanted**

What are our strengths?

What are our weaknesses?

What could we improve?

**Please Send Feedback to:**

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