



Clinical Psychology: Nature and Scope

Sometime ago I (first author) was sitting in my office room in the university and a gentleman of about 30–31 years knocked the door. I asked him to come in and sit and offered him a glass of water and tried to get him relaxed. Then I asked 'how can I help you'. He said that he has some problem and need help. Going further, he himself said that he is having downward mood swings and the problem is increasing day by day. He said that he also went to psychiatrist and he has prescribed medicine but I need help of someone from a psychologist/clinical psychologist. The case was handled successfully and was published in the SIS Journal of projective psychology and mental health with a pseudo name. This person came at his own to seek psychological help.

Again after sometime a lady of about 40 years of age contacted me and asked for appointment as she was having problem. Appointment was fixed and even in the first session she elaborated her problem. She was having recurring negative thoughts and panic attacks. She was motivated to seek help. These two examples are indicative of increasing awareness about counseling, clinical psychology and psychological help, even in smaller cities and towns not to talk about metropolitan cities. After COVID-19 there is a sea change in the situation and awareness is increased and so is demand. It is indicative of recognition of mental health issues and services among the masses and clinical psychologists who used to work in medical colleges/hospitals have started establishing their own clinics even in smaller cities and towns. It is indicative of the popularity of the discipline and increasing awareness of mental health issues and so is the case for students who are eager to get admission in training programmes for clinical psychologists.

Clinical psychology has been and is an important and branch of psychology. Its popularity is reflected in many ways, e.g. APA (American Psychological Association), the largest body of psychologists in the world, has more than fifty divisions and the division 12 is clinical psychology. About half of the members of APA have listed their major interest in clinical psychology. Its popularity in USA and other developed

countries is also reflected in the admission in doctoral programmes which is far more difficult than getting admission in medical school. Also Clinical Psychology is reported to be the most popular undergraduate major in USA. It is not only the case in USA and developed countries rather in developing countries also, e.g. if we check the number of students in the departments of psychology in India we will find that the number of students opting for clinical psychology is significantly more than any other branch of psychology. It is interesting to note that clinical psychology is about 125-year-old and it has surpassed all other discipline in its popularity. The question therefore is, as to what is clinical psychology and what makes it so popular? The following section in this chapter, an attempt has been made to answer this question.

Clinical Psychology Defined

Clinical psychology is a branch of psychology, and therefore it is the scientific study of behavior. Goldenberg (1973) said that clinical psychology is a branch of psychology dealing with the search for and application of psychological principles to understand the uniqueness of the person (client/patient) help him reduce his/her personal distress and also helping him to function more meaningfully and effectively.

The official definition of clinical psychology was adopted by APA division 12 (clinical psychology) in 1991. It says that “the field of clinical psychology involves research, teaching and services relevant to the application of principles methods and procedures for understanding, predicting and alleviating intellectual, emotional, biological, psychological, social and behavioral maladjustment, disability and discomfort applied to a wide range of client populations (Resnick, 1991).

APA division 12 (APA, 2012) defined clinical psychology by saying that “the field of clinical psychology integrates science, theory and practice to understand, predict and alleviate maladjustment, disability and discomfort as well as to promote human adaptation, adjustment and personal development. Clinical psychology focuses on the intellectual, emotional, biological, psychological, social and behavioral aspects of human functioning across the lifespan in varying cultures and at all levels of socioeconomic status (APA 2012).

The above definitions make the nature and characteristics of clinical psychology clear. The characteristics are:

1. Clinical psychology is a branch of psychology.
2. Clinical psychology is the scientific study of behavior.
3. Clinical psychologists do engage themselves in research and teaching in clinical and academic settings.
4. Clinical psychology is an applied branch of psychology as it is application oriented. The clinical psychologist not only generate knowledge through research, they also apply the knowledge generated by the general psychologist and by their own self for the alleviation of distress and other behavioral problems in a wide variety of contexts.

5. Clinical psychologist also deal with the measurement of behavioral phenomena through psychological tests/scales, observation, interview, mental state examination (MSE), case studies, etc.
6. The clinical psychologists are following an idiographic approach rather than nomothetic one, as every individual is unique in his/her own self. Clinical psychology also respect the individuality and uniqueness but also adopt the nomothetic approach in the sense that they have to understand the behavior of a person and for that they can take help of other such cases and from this particular case to the understanding of other cases. In this sense they are using the inductive as well as deductive reasoning.

Why clinical psychology is so popular? What makes it unique?

We have seen that clinical psychology is one of the most popular specialty of psychology in academic setting and is one of the most popular helping profession, the question then arises what is there in clinical psychology which makes it unique and popular. We have seen that it is a branch of psychology which studies behavior and mental processes but it is not something unique to clinical psychology as other branches also do this. Secondly, it is said that clinical psychologist do research but again it is not unique to clinical psychology. It is also said that it is a helping specialty where the clinical psychologist helps people in distress and difficulty but other professions like psychologist, social workers, counselors, health psychologists, rehabilitation psychologists also help people. Thus, the uniqueness of clinical psychology does not lie in its study of behavior, indulging, in research, assessment, measurement and helping profession. Rather it is the unique way in which they do this and that is in the words of Korchin, (2004) the 'clinical attitude'. The clinical psychologist intervene in the lives of specific individuals respecting their complexity and uniqueness. Thus, it is more of a personological approach, in a nonjudgmental and emphatic way. He/she tries to understand the problem in his /her uniqueness and context and help him/her in solving it. Wyatt (1968) has also explained the concept of clinical attitude by emphasizing that "concern with the actual behavior and with the actual urges, interests and apprehensions of people in on-going life".

Thus, clinical psychology can be defined as the applied branch of psychology which deals with the application of knowledge generated by themselves and their fellow psychologists in other branches to the understanding of behavioral phenomena in clinical settings and helping in alleviation of behavioral problems. They are also constantly engaged in research, teaching, assessment and measurement.

Who are clinical psychologists?

Basically clinical psychologist is a psychologist, a man of psychology. Anyone who is trained in clinical psychology is a clinical psychologist. Anyone who wants to pursue career in clinical psychology has to get specialized training after doing Masters in Psychology. In India, it is MPhil in clinical psychology (only qualification

approved by RCI) or PsyD. MPhil is a two-year course, whereas PhD is a three-year course (for MPhil) or four years (non MPhil in clinical psychology) programme offered by institutions approved by Rehabilitation Council of India (RCI). After obtaining required qualifications one has to get oneself registered with RCI only then one can start practice or pursue career in hospital. In USA and other countries, it is PhD in clinical psychology having compulsory supervised internship (*see detail in Chapter 3*).

What do clinical psychologists do?

In the first section the nature and characteristics of clinical psychology have been described and has been defined also another way of defining is that is “clinical psychology is what clinical psychologist do”. This definition though not comprehensive and all-encompassing yet technically correct. Therefore, it is another way of understanding what clinical psychology is.

Clinical psychologists work in a variety of areas/setting performing different roles. Since its birth 1896, it has spread its wings in so many directions and if Lightner Witmer come out of his grave and see how well the specialty he started is doing now, he probably will not recognize it. Though clinical psychologists are performing wide variety of activities and listing out all of these here will be difficult. It is important to mention the major functions which are being performed by more than 95% of the clinical psychologist. These can be represented by the acronym ‘ATRCTA’ which is formed taking the first letter of each of the six activities these are assessment, measurement, treatment, research, consultation, teaching and administration.

Assessment

Assessment is one of the major activities of clinical psychologists. All clinical psychologists engage in assessment of one form or other. They have to identify the problem, its causal mechanisms, so that they can help the needy persons called patients/clients. For this they have to do assessment. A number of methods are used for this, like observation, case history, mental state examination, interview and use of psychological test. It is to note that they do not blindly follow the results of one method/source rather a combination of methods are used, e.g. one who is administering psychological test is not only depending on the responses to test items rather his facial expression and body language is also important. More over the information provided by the attendants/family members is also an important source. The clinical psychologists thus gathers information about the behavior/problem of the client, analyze this information and then draws inferences about the problem and its possible causal mechanisms. It also helps him to increase the reliability of the diagnosis which is done following this. Norcross et al (1997) on the basis of survey reported that about 74% of their time the clinical psychologists devote to assessment and other diagnosis related work.

Treatment/Therapy

As is clear in the definition of clinical psychology by APA (2012) that the major focus of clinical psychology is on to understanding, prediction and alleviation of maladjustment, disability and discomfort and promotion of adaptation, adjustment and personal development. Therefore, the therapy/intervention/treatment is one of the most important activities of the clinical psychologists. All the surveys relating to the time devoted by clinical psychologists to different activities beginning from Kelly (1961), Garfield and Kurtz (1976), Norcross, Prochaska and Gallagher (1989) and Norcross, Karg and Prochaska (1997) have revealed that therapy or treatment is the activity to which clinical psychologist devote maximum of their time. Norcross, Karg and Prochaska (1997) reported that about 84% of their total time the Clinical Psychologist devote to this activity.

There are a variety of therapies used by clinical psychologists that are based on different models, e.g. psychoanalytic therapy, Gestalt therapy, existential therapy, behavior therapy and cognitive behavior therapy. Some of the problems arise because of lack of proper skill development, i.e. deficits and for these, there are specific therapeutic technique like, life skill development and social skill development, assertiveness training, etc.

In most of the cases there is one to one interaction, i.e. the therapist and the patient but in some other cases there may be one is to more, e.g. in group psychotherapy.

Research

Research is important for generation of knowledge may it be purely for the sake of knowledge (pure science) or for the solution of practical problems (applied science). We know that behavior is dynamic and keeps on changing and so is for the behavioral problems. We can see how clinical psychology and its methods of assessment and treatment have changed since its birth 1896 and the time of First and Second World War. So, the clinical psychologist also have to work for development of new assessment/diagnostic tools and therapeutic techniques. It is not that only development of new knowledge is important rather its dissemination to fellow colleagues is equally important. For example, one who got trained 50 years ago many not be aware of the modern techniques and the new knowledge therefore the results of the research studies have to be published in Journals and magazines. Workshops seminars/conferences have to be conducted regularly wherein they can update their knowledge and skills.

Consultation

Some clinicians provide advice to some organizations for a variety of problems which is called consultation. Consultation is of differed types for different reasons. For example, one may consult with colleagues for the difficulty he/she is having in handing a particular case. Another may be where a clinician is hired by an organization for a variety of problems. Consultation may range from clinical case to business, personal and profit related matters. It may be remedial or preventive.

Nietzel, Bernstein and Milich (1994) described three basic dimensions of consultation. The *first* is the orientation or goal of consultation. When consultation is case oriented than the clinician can focus attention on the case. He may handle the case independently or give advice as to how the case be handled. Example: giving treatment to a problem case in hospital/clinic or health agency. When consultation is program or administration oriented than the focus is not on the problems of a particular case rather it is the organizational fracture and structure causing trouble. For example, you are being consulted by an organization for screening candidates for job and you have developed a program for it.

Second is the locus of responsibility; in some cases, the locus of responsibility is transferred to the consultant e.g. when someone is hired for assessment of suspected cases of organacity among the new clients. Here the responsibility rests with the consultant, and merely giving advice and going home is not sufficient. However, the responsibility for problem resolution rests with the organization.

The *third* dimension involves functions. Here it is the type of function served by the consultation. Function may include, education i.e. educating people about problem or disease, providing reading material to staff.

Another function can be giving advice about cases or programs, offering direct service e.g. assessment, treatment and evaluation. It can also be resolution of intra-organizational conflicts.

Teaching

Teaching is another important activity of clinical psychologists. Though, those who take admission in clinical psychology programs aspire to do practice, offer direct services (assessment, treatment and evaluation), yet if no one become teacher then there will be a void and who will provide training to students so it is one of the most important activity. They teach in medical colleges to the MBBS students, to the MD psychiatry students, MPhil./PhD. clinical psychology courses continuously. Moreover, some of the clinical psychologists also opt for courses in University/Colleges and teach the undergraduate and post graduate students of psychology. Norcross et al. (1985) on the basis of their survey reported that division 12 clinical psychologists on an average devote about 14% of their time to teaching.

Administration

Out of the six major activities reported here, administration in the least liked activity, among clinical psychologists in countries like US but it may not be the case everywhere. You may ask, why it is least liked, the reason lies in the fact that the clinical psychologists enjoy power, prestige and money at their own they are doing excellent practice, earning good enough. They are enjoying freedom of work which they may not find to that extent in the organization. However, administration and management is a challenging job as the administrator has to manage the facilities, faculty and the students. Moreover, he has to act as a bridge between the top management and the department institute. Starting and continuing new

courses arranging for funding and other intra and inter departmental/institute related issues. The administrative position can be Director of institute, Head of the department in medical college/hospital, or in university department.

Clinical Psychology and Other Related Disciplines

The first and foremost important thing is that providing mental health services the direct services offered by the clinical psychologists is a very tough and challenging job. Moreover, it is also important to mention here that the clinical psychologists do not work alone rather in the mental hospitals/hospitals there are teams and these are often headed by psychiatrists. Clinical psychologists, psychiatric trained nurses, social workers are the members of the team. Therefore, the clinical psychologists have to work with other mental health providers. The question is who are the other health professionals with whom clinical psychologists have to work but before that we have to see who is a clinical psychologist?

Clinical psychologist is a man of psychology. Usually in US it is doctoral degree-five year courses with one-supervised clinical internship in clinical psychology. In India, it is the MPhil in clinical psychology (earlier it was named as diploma in medical and social psychology (DM&SP). The most famous and preferred model of clinical training is the bolder model (Chap 3) but some institutes are also offering clinical training programs following Vail model (discussed in Chapter 3).

In India, the regulatory body for rehabilitation (where clinical psychology is included) services is the Rehabilitation Council of India (RCI). Those clinical psychologists who want to do private practice and jobs in govt or private sector, RCI registration is mandatory and the registrations is qualification based. As per RCI M. Phil. Clinical psychology-two years post PG psychology degree is essential. Earlier National Institute of Mental Health and Neurosciences (NIMHANS), Bangalore, Central Institute of Psychiatry (CIP), Kanke (Ranchi), and Ranchi Institute of Neuropsychiatry and Allied Sciences (RINPAS), Ranchi were the only institutes offering these courses but now many other state and private institutes have started these courses. Interested person may check RCI website for current update as RCI may withdraw the approval if deficiencies are found. But there are some critical issues also. RCI does not consider PhD. Clinical psychology which is higher qualification than MPhil. The second most important concern is that RCI has clubbed Clinical Psychologists with other rehabilitation service providers like occupational therapists. Speech therapist-though they are lesser qualified than clinical psychologists. The clinical psychologists are protesting this and hope in future an independent statutory body separately for clinical psychologists be mandated and the sooner it is done the better it will be.

Psychiatrist

Psychiatry is one of the oldest mental health discipline. Psychiatrist enjoy the greater status and own major responsibility among mental health professionals.

Psychiatrist is a medical man, after doing medical graduation they pursue post graduate programme, i.e. MD psychiatry (a three year programme). It is a specialized degree in psychiatric medicine. Besides, specializing in medicine for psychiatric disorders they also have courses in psychological assessment and psychotherapy, however, the major responsibility of psychotherapy and psycho-diagnosis rests with clinical psychologist. Psychiatrist is the head of mental health team in mental hospital, department of psychiatry.

Psychiatric Social Work

The third major mental health profession consists of social workers specially trained to deal with the psychosocial problems of people with psychiatric disturbances. Psychiatric social worker is basically a man from sociology/social work. After doing MSW/MA Sociology they can opt for this career. Most of the training institutes offering psychiatry and clinical psychology programmes, also offer MSW programmes. It is noteworthy that the clinical psychology, psychiatry (PG) and MSW pursue have some classes together. The major concern of the social worker is to help in diagnosis by providing the relevant information about the family, neighborhood and society. They also help in rehabilitating the patient after treatment.

Other Mental Health Workers

As we know that the caregiving to psychiatric patients also requires special training and aptitude. Therefore, the psychiatric trained nurses are also an important constituent of the mental health workers team.

In addition, the psychiatric problems may arise because of a variety of factors and there may be some medical and organic conditions. Therefore, the clinical psychologists have to deal with medical person (MD medicine) who will rule out that the disease doesn't have any medical or organic base. Here it is important that one of the specialized super specialities of clinical psychology, i.e. neuropsychology has also become important.

It is very important to note that the clinical psychologists have to deal with other clinical psychologists and therefore they need to have cordial relations with each other, they also need to have cordial relation with the psychiatrists, social worker, neurologists, neuropsychologists, general physicians, and fellow psychologist, etc. the major focus is to help the person who has come to you.