

# EMBRACE CLINICAL TRAINING PROGRAM

## EVALUATION OF SUPERVISORS AND TRAINEES

YEAR 1



# I. PREAMBLE

## HOW IT STARTED

The Embrace Mental Health Center (EMHC) was established in 2020, following the August 4 Beirut Port explosion. What initially began as a volunteer project in response to the needs of those affected by the blast, transformed into a multidisciplinary mental health center that includes psychologists, psychiatrists, social workers, and other supporting staff.

Later in October of 2020, and in collaboration with the Psychology department at the American University of Beirut and Haigazian University the EMHC began a rigorous **Clinical Training Program** for psychologists-in-training. The EMHC becoming a training site further allowed it to meet its mission- capacity-building for future generations of mental health professionals, and the provision of mental health services for the community.

## PROGRAM GOALS

The overall **goal** of the Clinical Training Program at the EMHC is to *train competent, ethical, and reflective psychologists* through expansion of fundamental knowledge and skills, as well as gaining hands-on experience that contribute to professional development.

With the launch of the first Clinical Training Program in 2020, a total of **9** graduate psychology students enrolled.

This report provides a summary of trainee and supervisor evaluations of different components of the program and the various competencies it aims to instill in young mental healthcare professionals.

## II. DIDACTIC SESSIONS

Over the course of the program, trainees were expected to attend didactic lessons for two hours per week.

The sessions were led by multi-disciplinary experts and delivered various topics on evidence-based treatments, diagnoses, professional ethics and biopsychosocial approaches to mental illness and treatment.

Experts from established institutions around the globe, delivered weekly academic lectures:



Dr. Tania Bosqui  
Dr. Tima El Jamil  
Dr. Ghena Ismail  
Dr. Sabine Saade



Dr. Myriam Khoury



Dr. Ziad Nahas



Dr. Michel Daher  
Ms. Sara Mishli

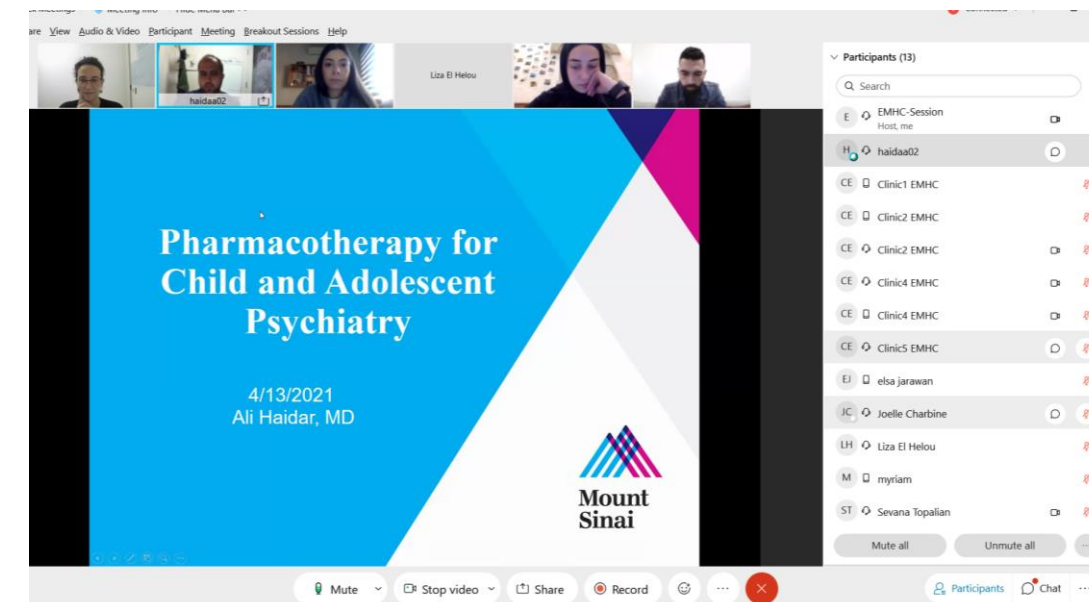
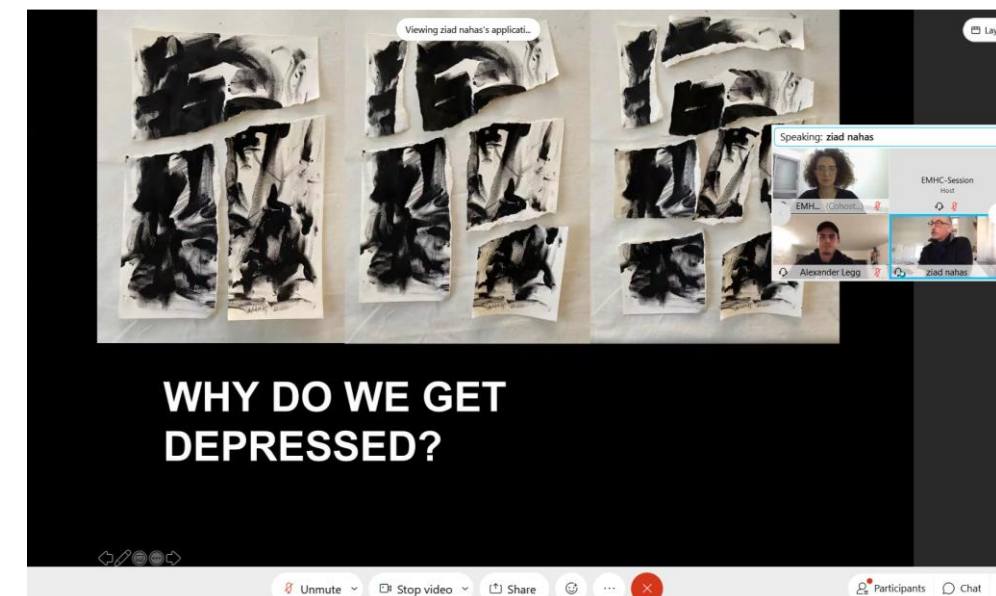


Established private  
clinicians from Gestalt  
Associates Training, Los  
Angeles

Dr. Nelly Nassar

TOTAL NUMBER OF DIDACTIC  
SESSIONS PROVIDED in 2020

20



## II. DIDACTIC SESSIONS

Following each didactic session, training clinicians were invited to complete an anonymous survey to evaluate the session content and delivery.

TOTAL RESPONSES TO EVALUATION IN SURVEYS ACROSS ALL SESSIONS

MINIMUM	1
MAXIMUM	8

### A. CONTENT EVALUATION

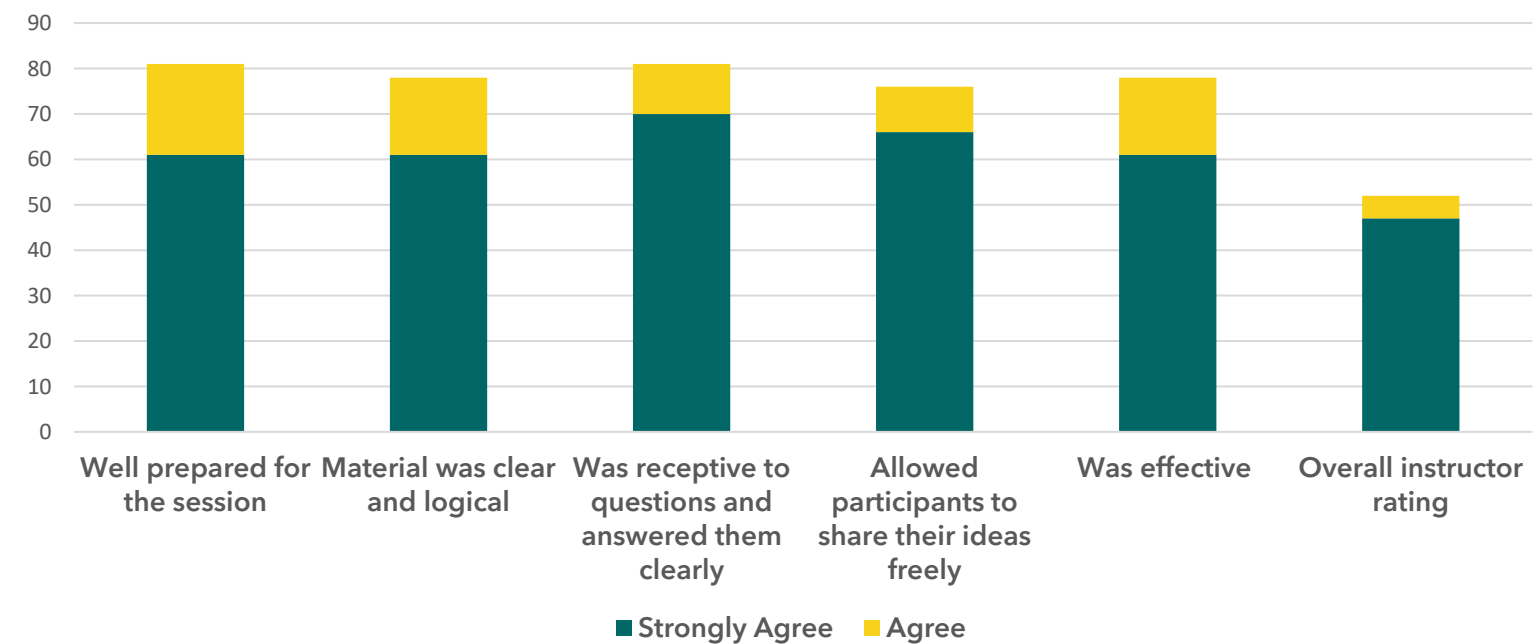
Experts delivered sessions on multiple topics

RATINGS OF DIDACTICS CONTENT



### B. INSTRUCTOR EVALUATION

RATINGS OF ALL INSTRUCTORS



## II. DIDACTIC SESSIONS

### C. OPEN ENDED FEEDBACK ON DIDACT SESSIONS

“ Learning from Dr. Nahhas was an *unequivocal opportunity*. He offered insights about depression in a linear and logical manner. Not only was it crucial to understand the biological basis of depression, but to notice it from different angles in the clinic. I could say that the least helpful aspect of the session was the time limit.

“ Dr. Ghena's sessions are always interesting. She *provides different perspectives* and this is exactly what she did when talking about Eating Disorders. The information was very beneficial especially in terms of assessment and treatment.

“ Dr. Maryse was very *responsive* to our questions. The session was very *interactive*. The explanation was *super clear*.

“ Dr. Michel Daher explains his content in a very smooth manner. The topic was interesting to learn and was *delivered with simplicity*.



### III. EVALUATION & ASSESSMENTS: BY TRAINEES

Part of the ongoing evaluation process at the EMHC encourages both supervisors and psychologists-in-training to continuously share feedback with each other throughout their journey in the Clinical Training Program.

As such, psychologists-in-training were prompted to rate their supervisors and the practicum site, once 2-months into the program and then again at the end of the program.

The survey included 30 items that assessed:

- a) Quality of the relationship with the supervisor
- b) Supervisor’s knowledge and style of supervision
- c) Quality and culture of the practicum site
- d) Focus on multicultural/diversity issues
- e) The survey also asks students to report on the types of interventions and populations they have worked with thus far

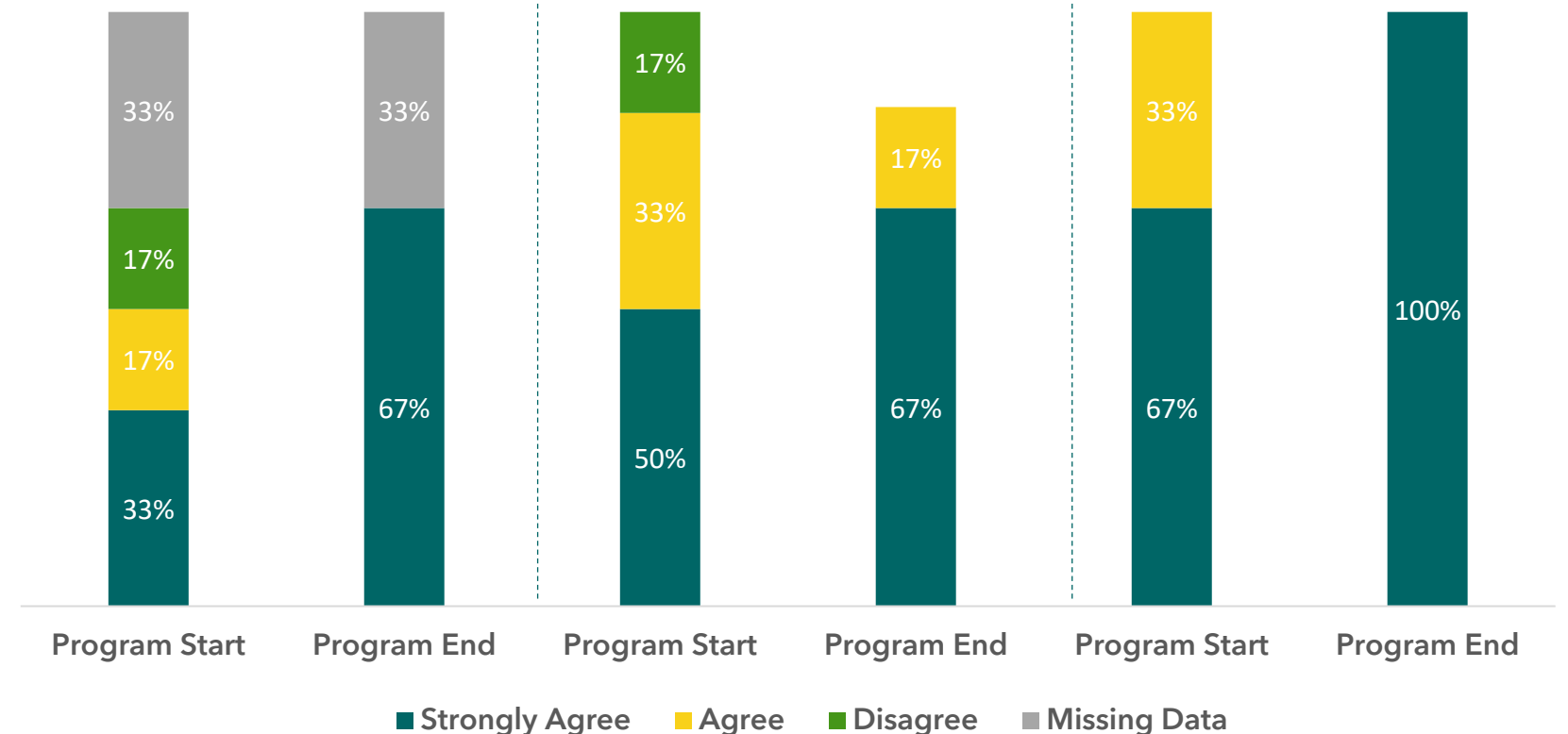
This section of the report summarizes the evaluations completed by psychologists-in-training and their change over time.

#### A. SUPERVISORY RELATIONSHIP

The supervisor was accessible, provided feedback and knowledge.

The supervisor provided alternative resources and material

There was comfortable work rapport & open communication



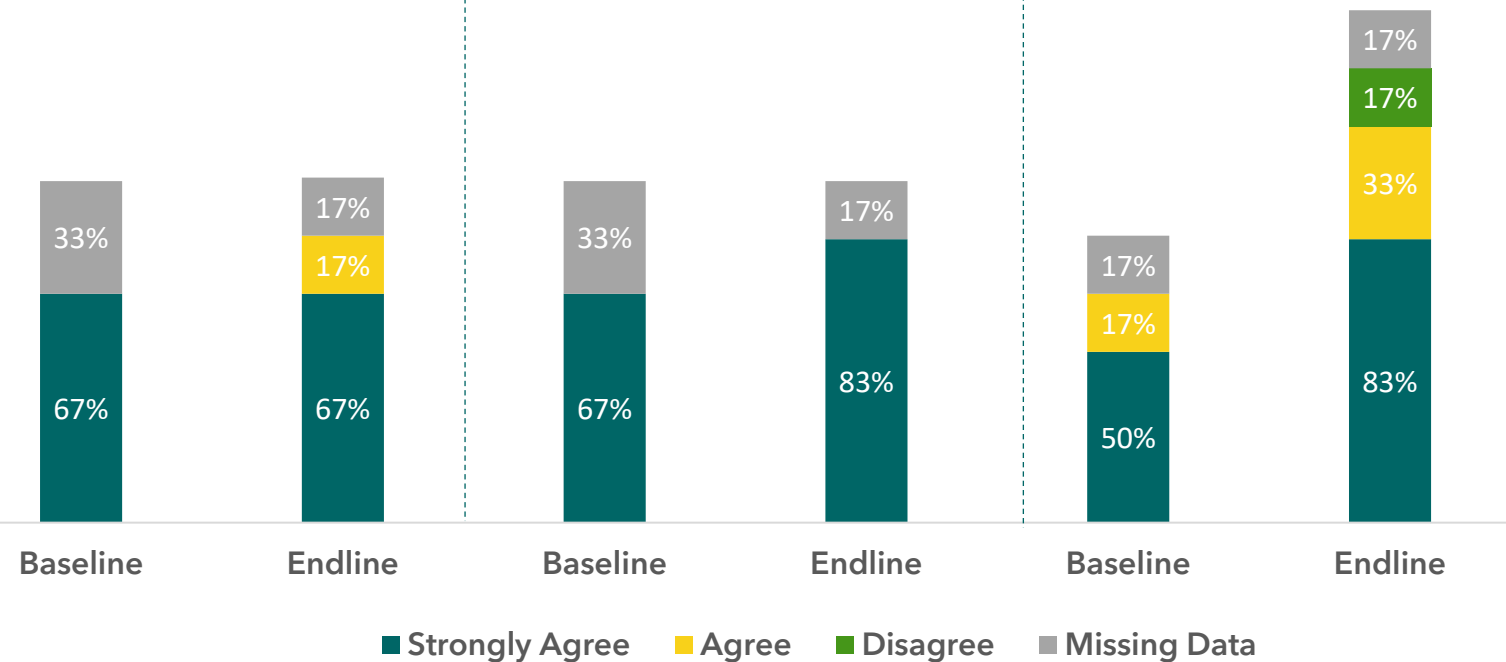
# III. EVALUATION & ASSESSMENTS: BY TRAINEES

## B. SHARING TECHNICAL/THEORETICAL KNOWLEDGE

Taught Assessment Modalities Relevant to Beneficiary Needs

Taught Treatment Modalities & Interventions Relevant to Beneficiary Needs

Provided Community Resources to Assist Beneficiaries



## C. SITE EVALUATION

All 9 trainees agreed that "services at the Embrace site followed professional and ethical guidelines"

The majority of trainees (~80%) also agreed that they were treated with respect and in a professional manner, while the remaining rated this statement neutrally.

Most trainees (~70%) found that the work expected of them was appropriate.

80% of trainees agreed that the site provided avenues for professional development by the end of the practicum site experience.

## D. CULTURAL SENSITIVITY IN TRAINING

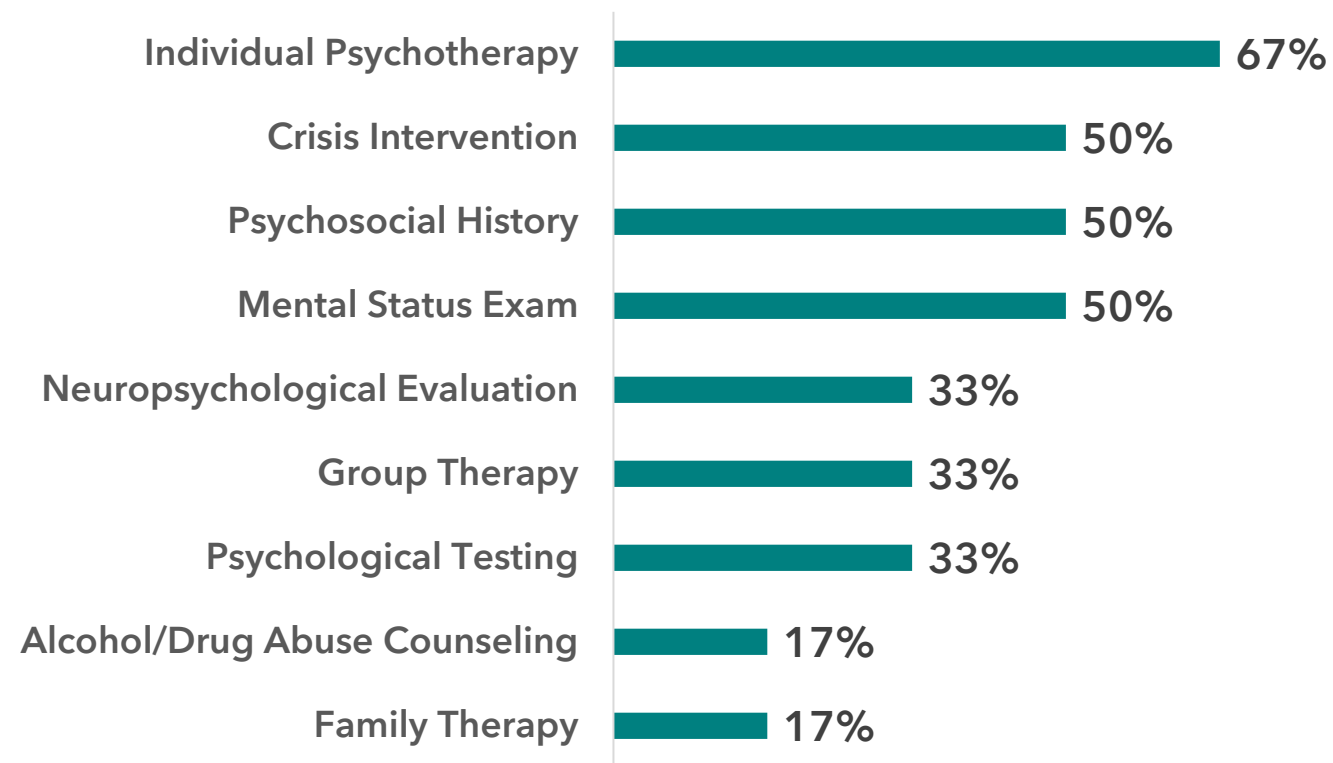
All 9 trainees who completed evaluations 'Strongly Agreed' that the site excelled on all 5 categories of the multicultural issues domain:

- (1) Training involved sensitivity to sociocultural background of beneficiaries,
- (2) Professionals demonstrated appreciation of individual differences
- (3) Training encouraged awareness of own values and beliefs regarding differences on their impact on others
- (4) Supervisor demonstrated respect for individual differences between the supervisor and supervisee and offered case conceptualizations that were culturally sensitive when relevant.

### III. EVALUATION & ASSESSMENTS: BY TRAINEES

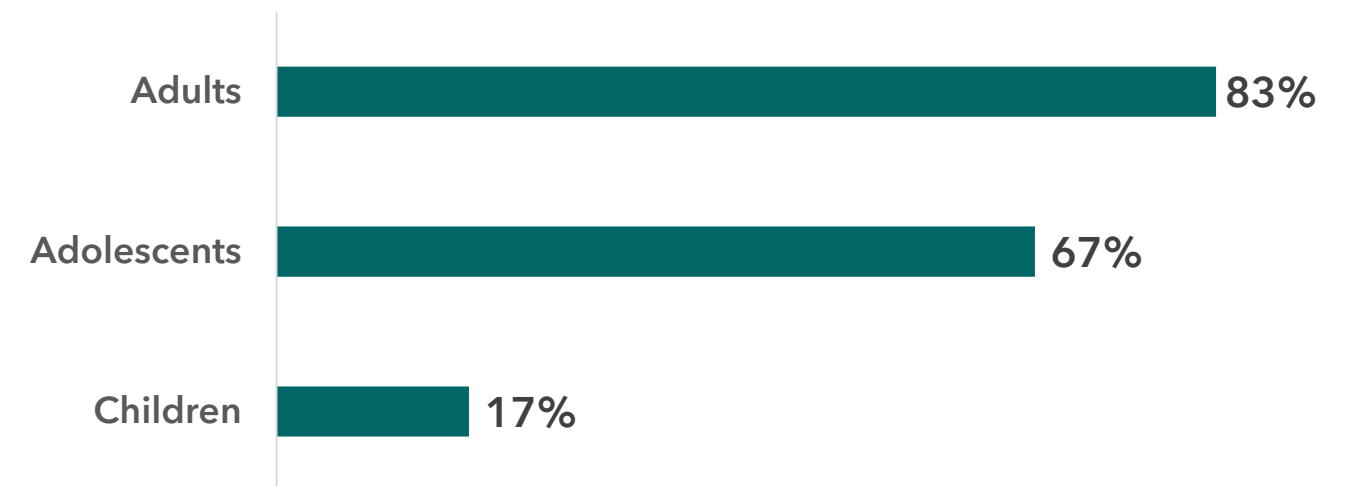
#### E. PROFESSIONAL EXPERIENCE

**Case Exposure:** The below chart represents a summary of self-reported professional/case experiences gained throughout the course of the program. For example, **17%** of trainees reported gaining professional experience in family therapy.



*\*Percentages to not add up to 100% because one trainee may have experience in multiple fields, e.g. crisis intervention and group therapy.*

**Population Exposure:** The below chart represents the percentage distribution of exposure to various clinical populations as indicated by trainees. For example, **17%** of trainees reported working with children.



*\*Percentages to not add up to 100% because one trainee may have experience in multiple fields*



## IV. EVALUATION & ASSESSMENTS OF TRAINEES

Psychologists-in-training were evaluated on the American Psychological Association (APA) Competency Benchmarks for Professional Psychology, which fall under 6 main clusters: *Professionalism, Relational, Application, Science, Education, and Systems*; with 16 core competencies.

All competencies were assessed twice throughout the training program:

- **November 2020** - Following 2 months enrolment in the program
- **June 2021** - At the end of the Training year to assess final readiness to practice as an independent practitioner.

The following section of the report summarizes the evaluations of psychologists-in-training completed by their respective supervisors for each of the core components of the APA Benchmarks.



# IV. EVALUATION & ASSESSMENTS OF TRAINEES

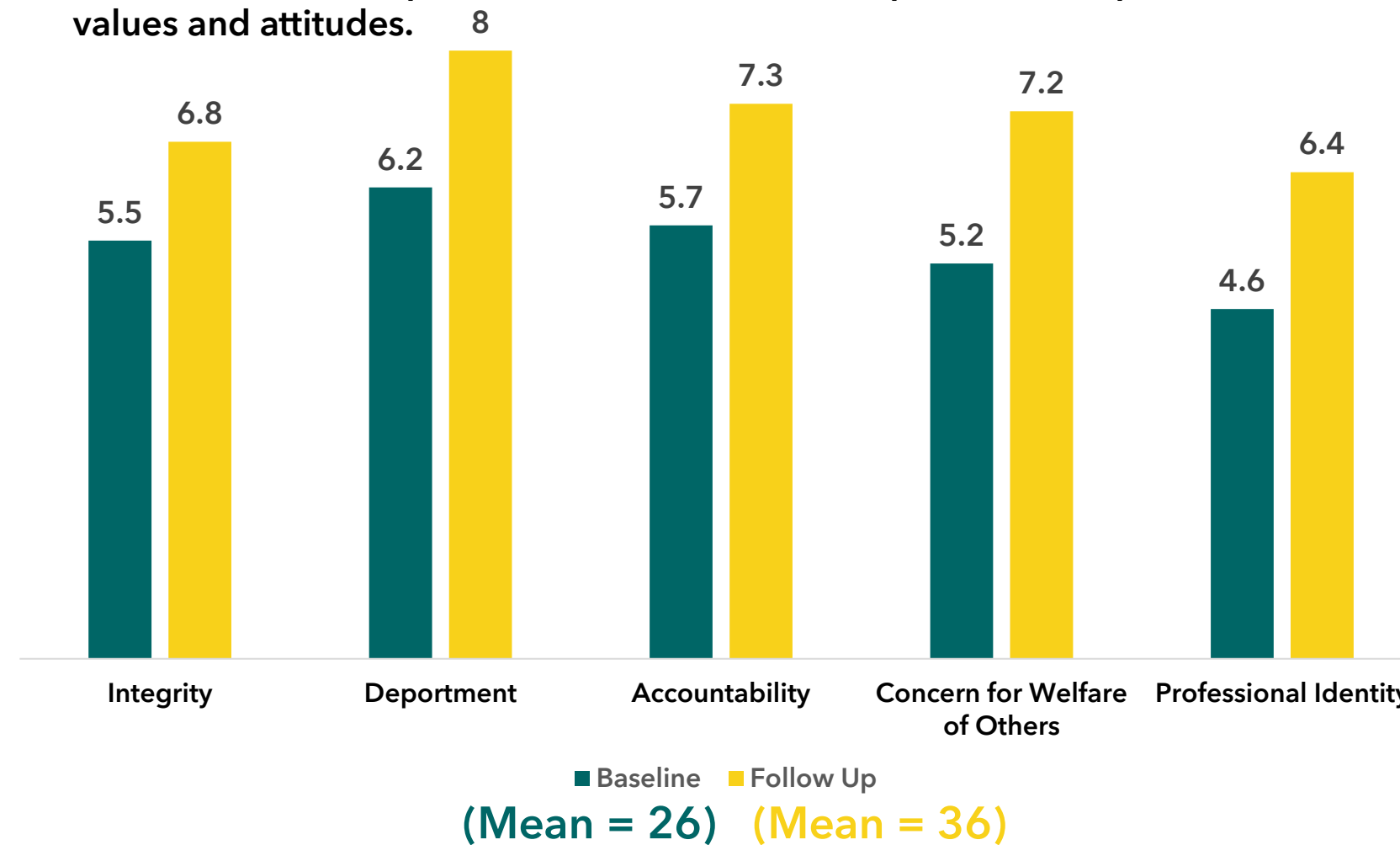
## A. PROFESSIONAL VALUES & ATTITUDES

**Professional values and attitudes** is evidenced in behavior and comportment that reflect the values and attitudes of psychology.

Five different core competencies fall under this main category: *integrity, deportment, accountability, concern for welfare of others, and professional identity.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 45.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 5 different core competencies for professional values and attitudes.



increased by 10 points from the beginning of the training program

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

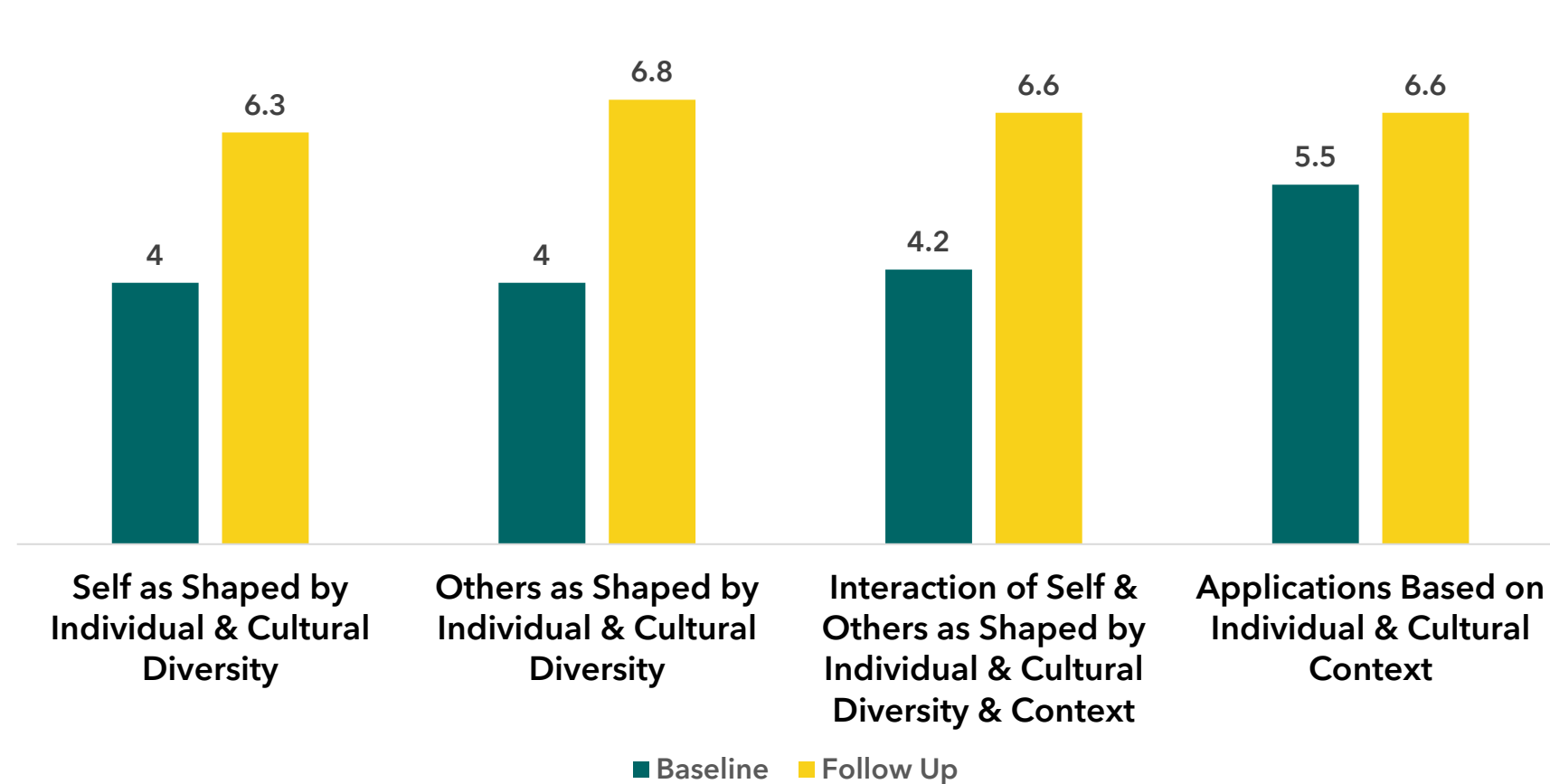
## B. INDIVIDUAL & CULTURAL DIVERSITY

**Individual and cultural diversity** is defined as awareness, sensitivity and skills in working professionally with diverse individuals, groups and communities who represent various cultural and personal background and characteristics defined broadly.

Four different core competencies fall under this main category: *self as shaped by individual and cultural diversity, others as shaped by individual and cultural diversity, interaction of self and others as shaped by individual and cultural diversity and context, applications based on individual and cultural context.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for individual and cultural diversity.



(Mean = 12) (Mean = 25)



increased by 17 points from the beginning of the training program

## IV. EVALUATION & ASSESSMENTS OF TRAINEES

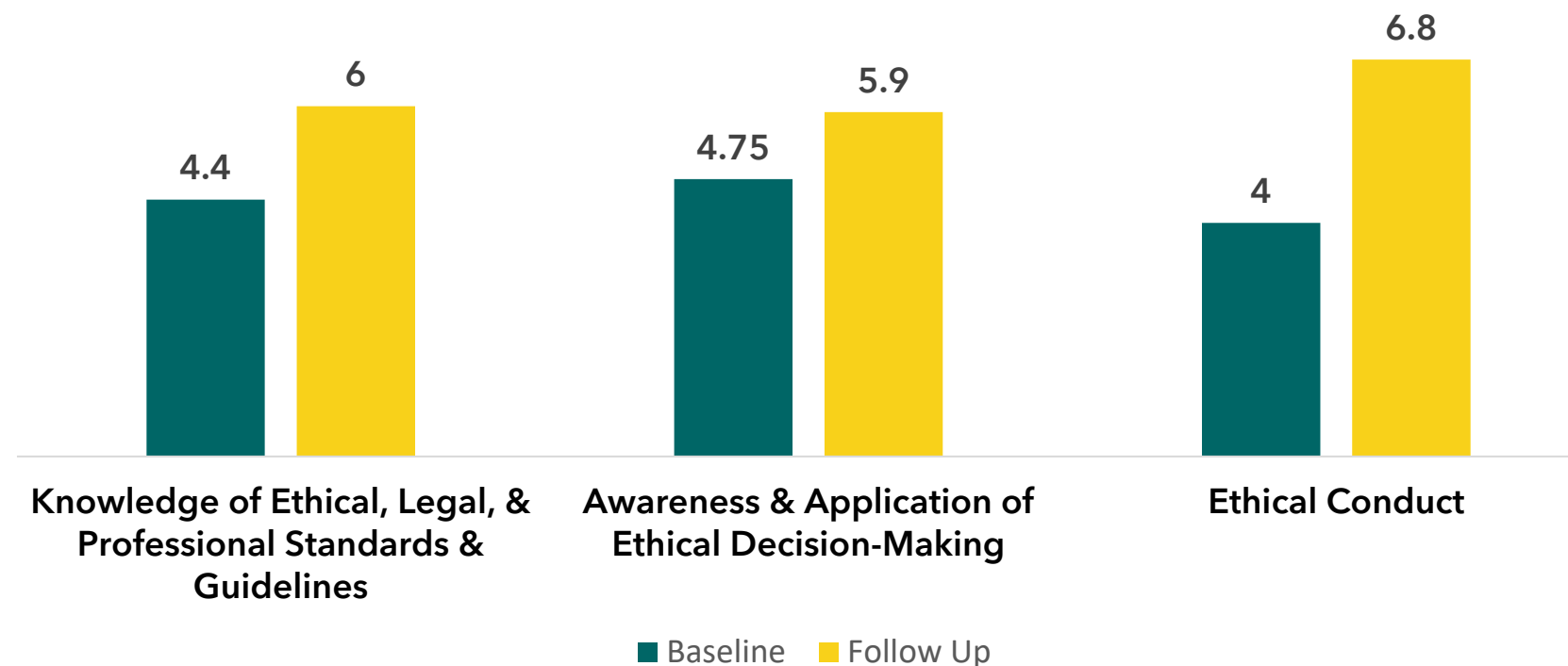
### C. ETHICAL LEGAL STANDARD & POLICY

**Ethical legal standards and policy** involved the application of ethical concepts and awareness of legal issues regarding professional activities with individuals, groups, and organizations.

Three different core competencies fall under this main category: *knowledge of ethical, legal, and professional standards and guidelines, awareness and application of ethical decision-making, and ethical conduct.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 27.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 3 different core competencies for ethical legal standards and policy.



(Mean = 10) (Mean = 18)



increased by 8 points from the beginning of the training program

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

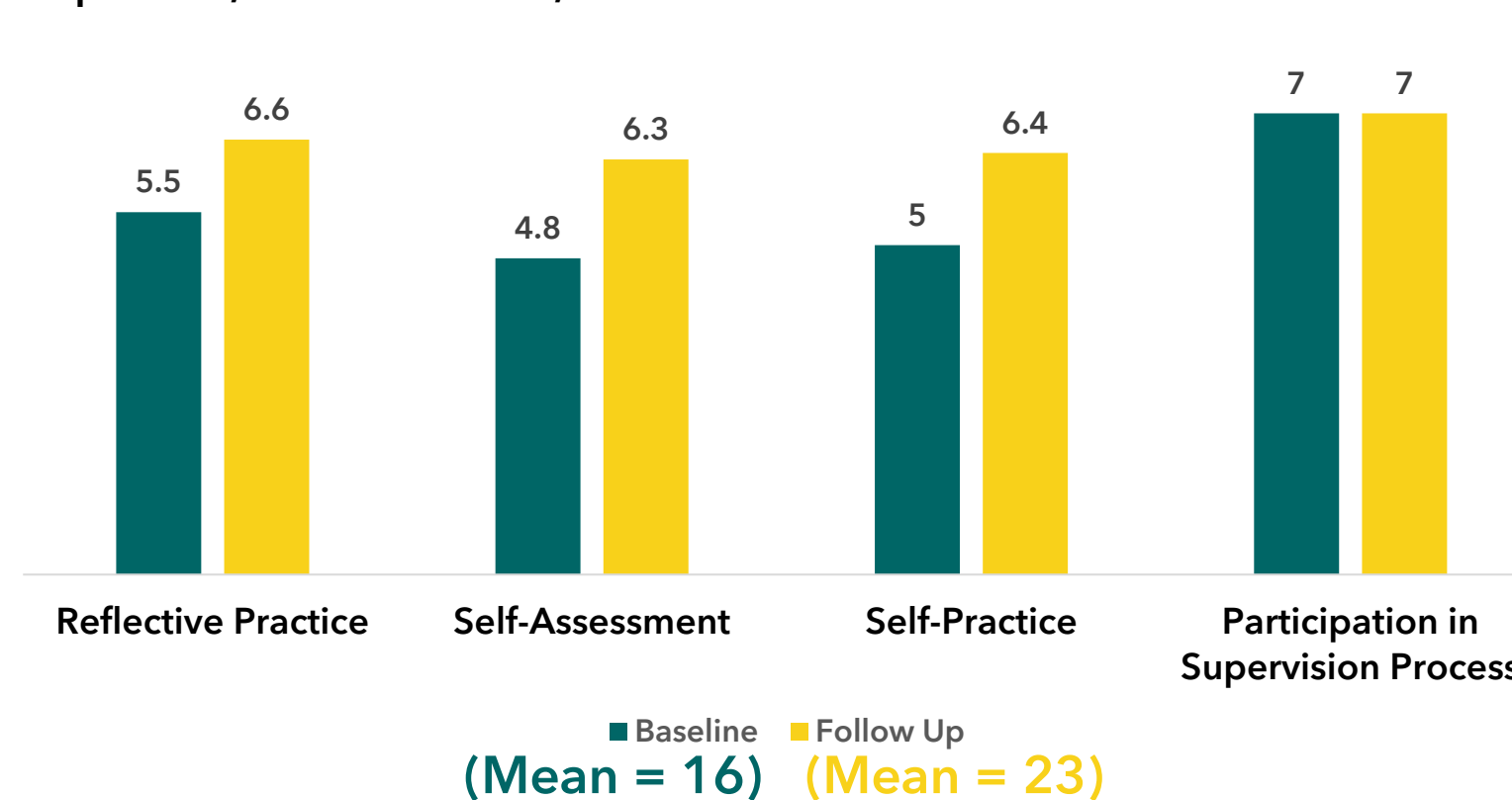
## D. REFLECTIVE PRACTICE, SELF-ASSESSMENT, & SELF-CARE

**Reflective practice, self-assessment, and self-care** involves practice conducted with personal and professional self-awareness and reflection; with awareness of competencies; with appropriate self-care.

Four different core competencies fall under this main category: *reflective practice, self-assessment, self-care, and participation in the supervision process.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for reflective practice, self-assessment, and self-care.



**increased by 7 points from the beginning of the training program**

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

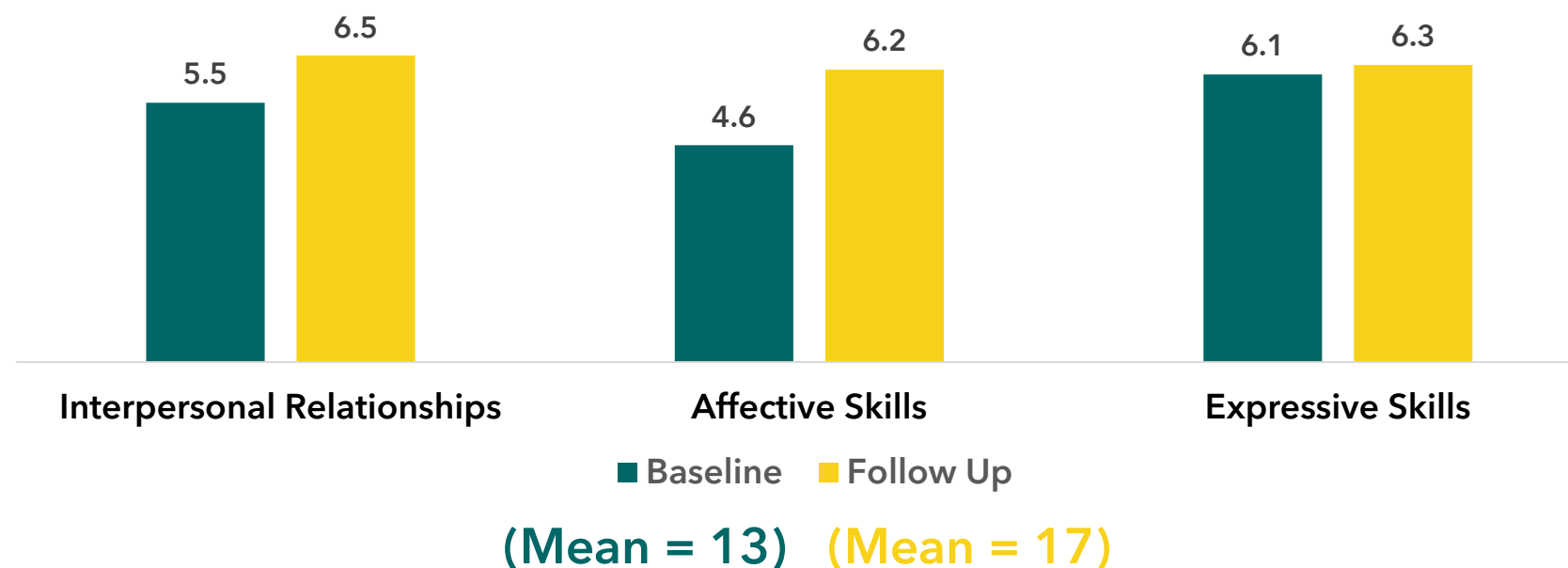
## E. RELATIONSHIPS

**Relationships** entail relating effectively and meaningfully with individuals, groups, and/or communities.

Three different core competencies fall under this main category: *interpersonal relationships*, *affective skills*, and *expressive skills*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 27.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 3 different core competencies for relationships.



**increased by 4 points from the beginning of the training program**

## IV. EVALUATION & ASSESSMENTS OF TRAINEES

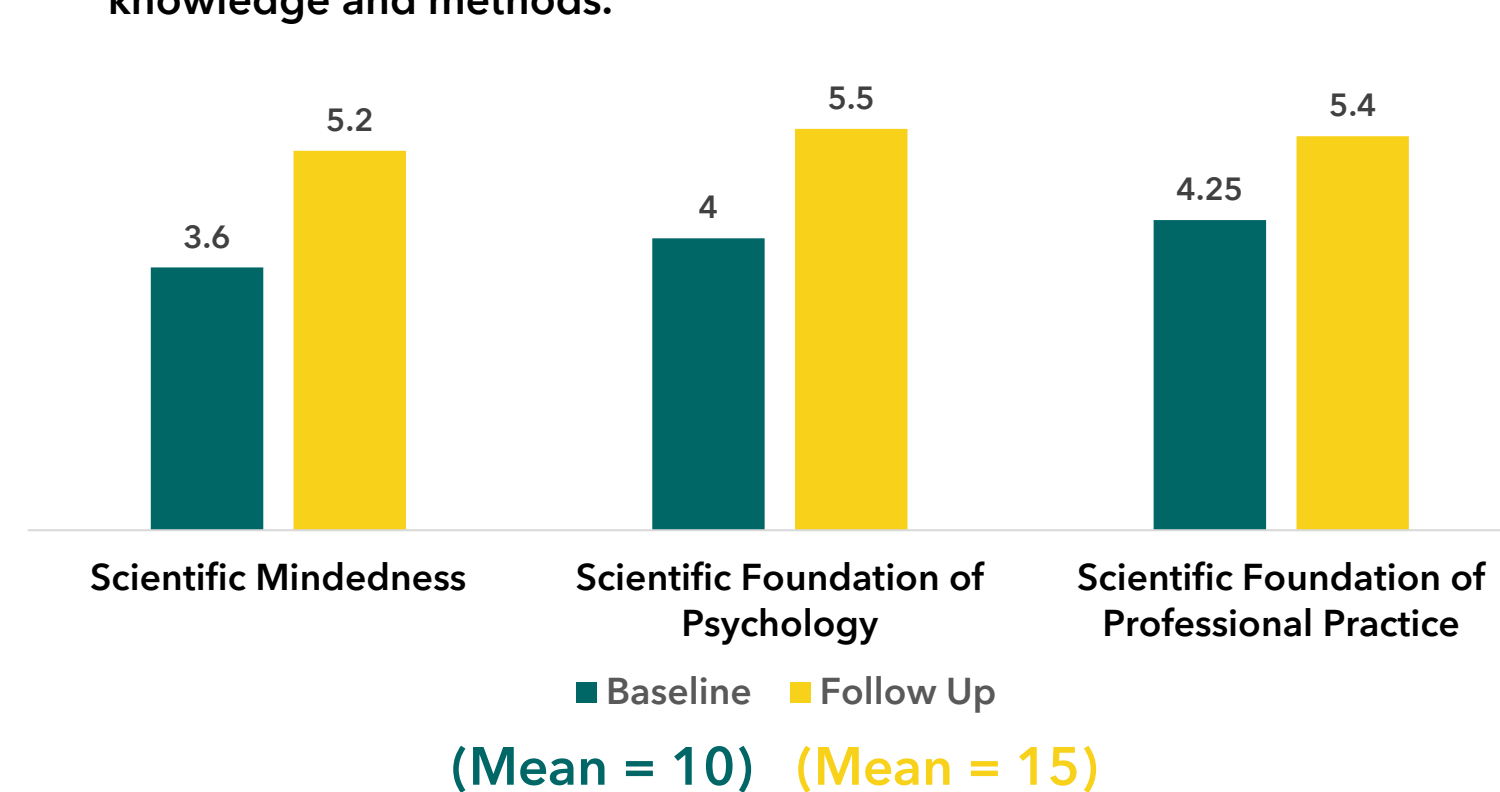
### F. SCIENTIFIC KNOWLEDGE & METHODS

**Scientific knowledge and methods** includes the understanding of research, research methodology, techniques of data collection and analysis, biological bases of behavior, cognitive-affective bases of behavior, and development across the lifespan. It also includes respect for scientifically derived knowledge.

Three different core competencies fall under this main category: *scientific mindedness*, *scientific foundation of psychology*, and *scientific foundation of professional practice*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 27.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 3 different core competencies for scientific knowledge and methods.



increased by 5 points from the beginning of the training program

## IV. EVALUATION & ASSESSMENTS OF TRAINEES

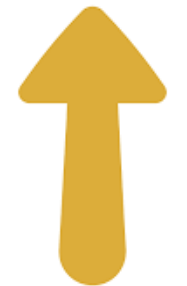
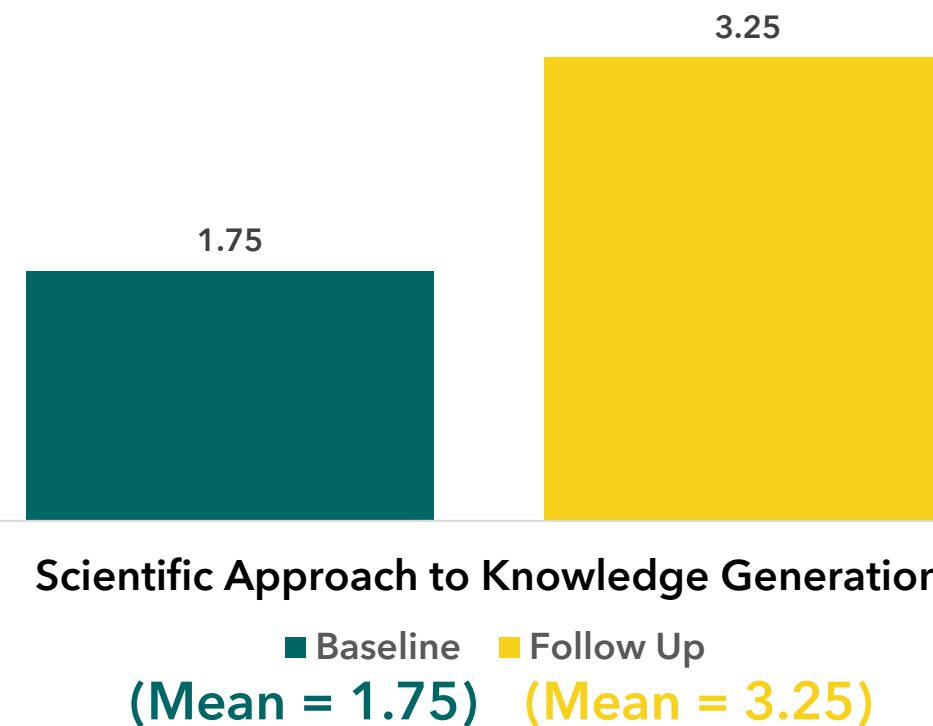
### G. RESEARCH EVALUATION

**Research evaluation** involves generating research that contributes to the professional knowledge base and/or evaluates the effectiveness of various professional activities.

One core competency falls under this main category: *scientific approach to knowledge generation*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 9.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the core competency for research evaluation.



increased by  
1.5 points from  
the beginning  
of the training  
program



## IV. EVALUATION & ASSESSMENTS OF TRAINEES

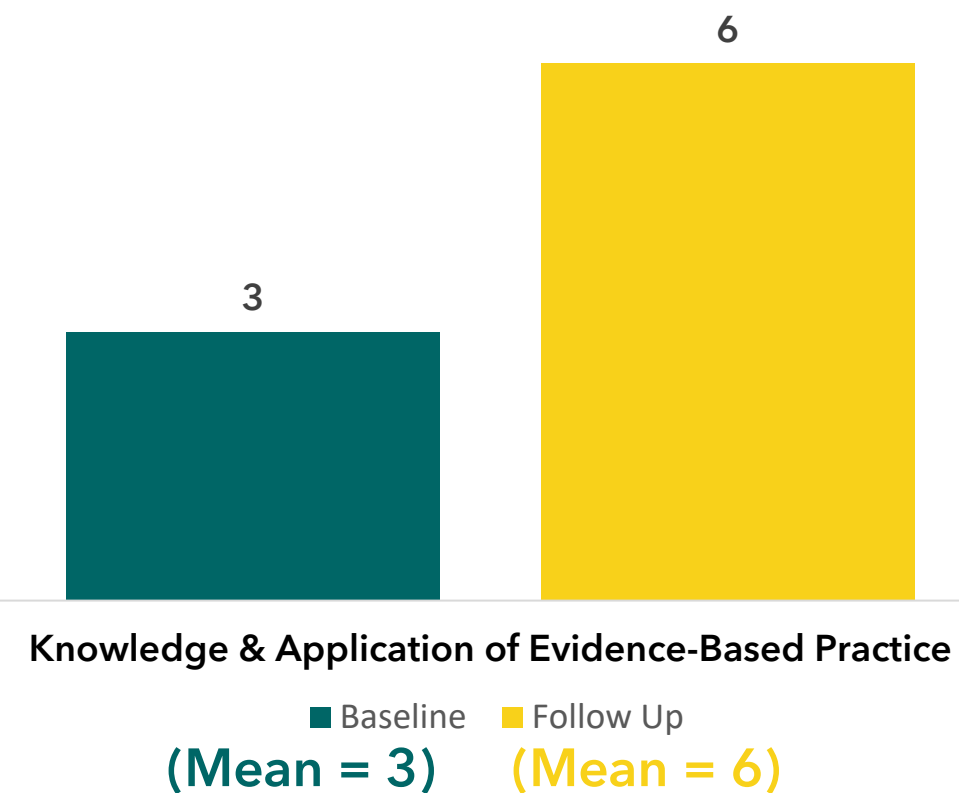
### H. EVIDENCE BASED PRACTICE

**Evidence-based practice** involves the integration of research and clinical expertise in the context of patient factors.

One core competency falls under this main category: *knowledge and application of evidence-based practice*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 9.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the core competency for evidence-based practice.



**increased by 3 points** from the beginning of the training program

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

## I. ASSESSMENT

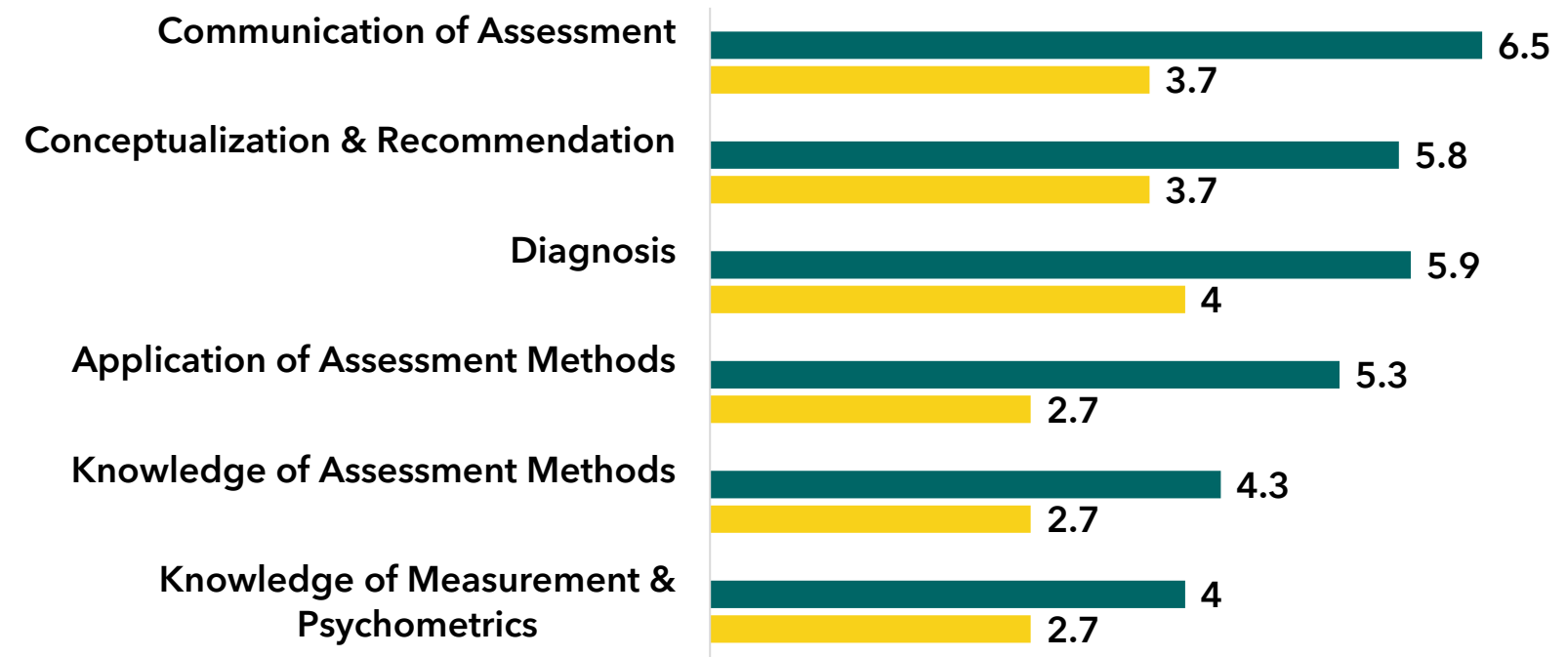
**Assessment** includes both assessing and diagnosing of problems, capabilities and issues associated with individuals, groups, and/or organizations.

Six different core competencies fall under this main category: *knowledge of measurement and psychometrics, knowledge of assessment methods, application of assessment methods, diagnosis, conceptualization and recommendation, and communication of assessment.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 54.

It is worth noting that there are several competencies with missing data, thus contributing to lower total scores and a lower total average.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 6 different core competencies for assessment.



■ Follow Up ■ Baseline  
**(Mean = 13.5) (Mean = 21)**



**increased by 7.5 points from the beginning of the training program**

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

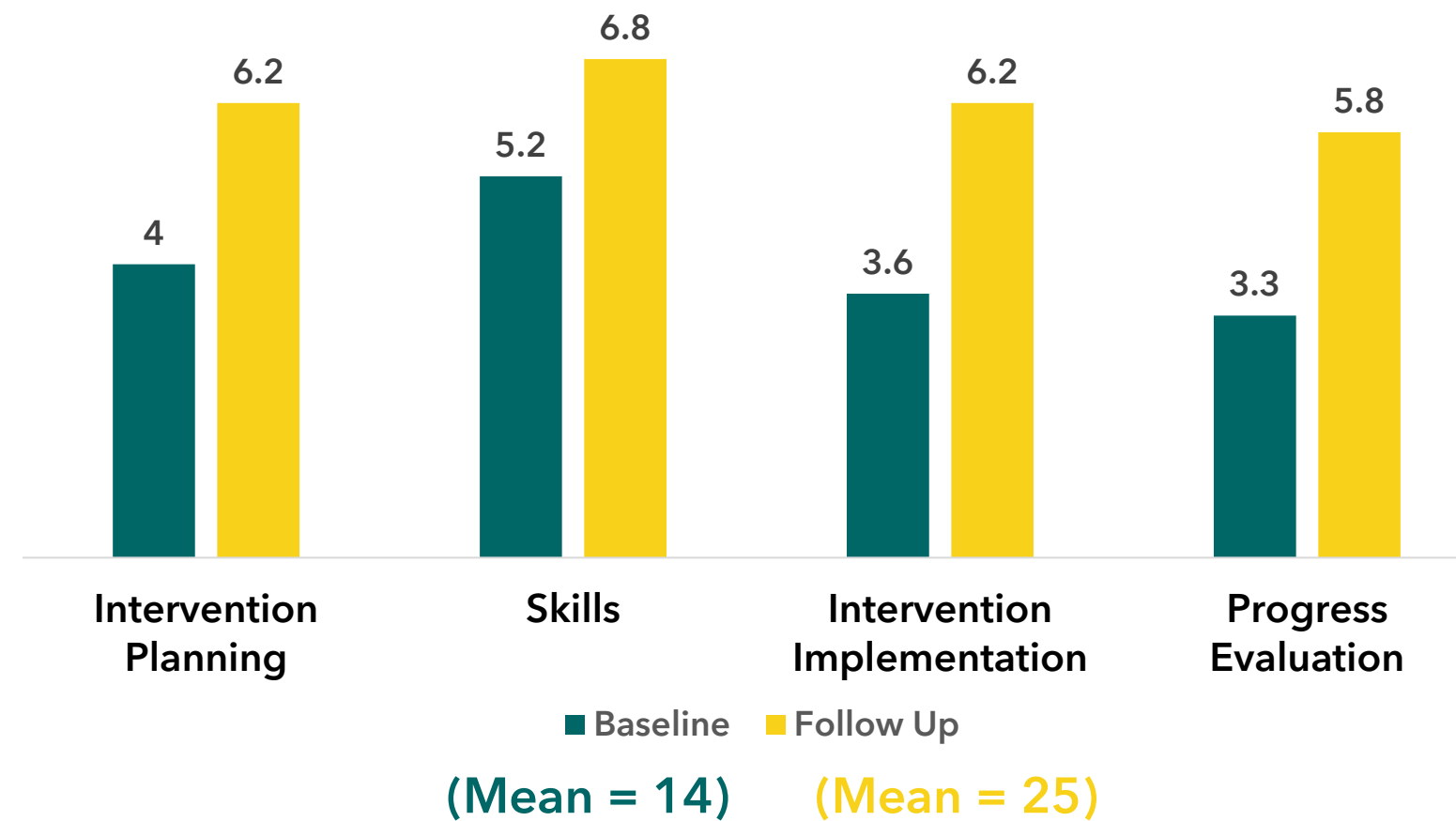
## J. INTERVENTIONS

**Interventions** are those designed to alleviate suffering and to promote health and well-being of individuals, groups, and/or organizations.

Four different core competencies fall under this main category: *intervention planning, skills, intervention implementation, and progress evaluation.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for intervention.



increased by 11 points from the beginning of the training program

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

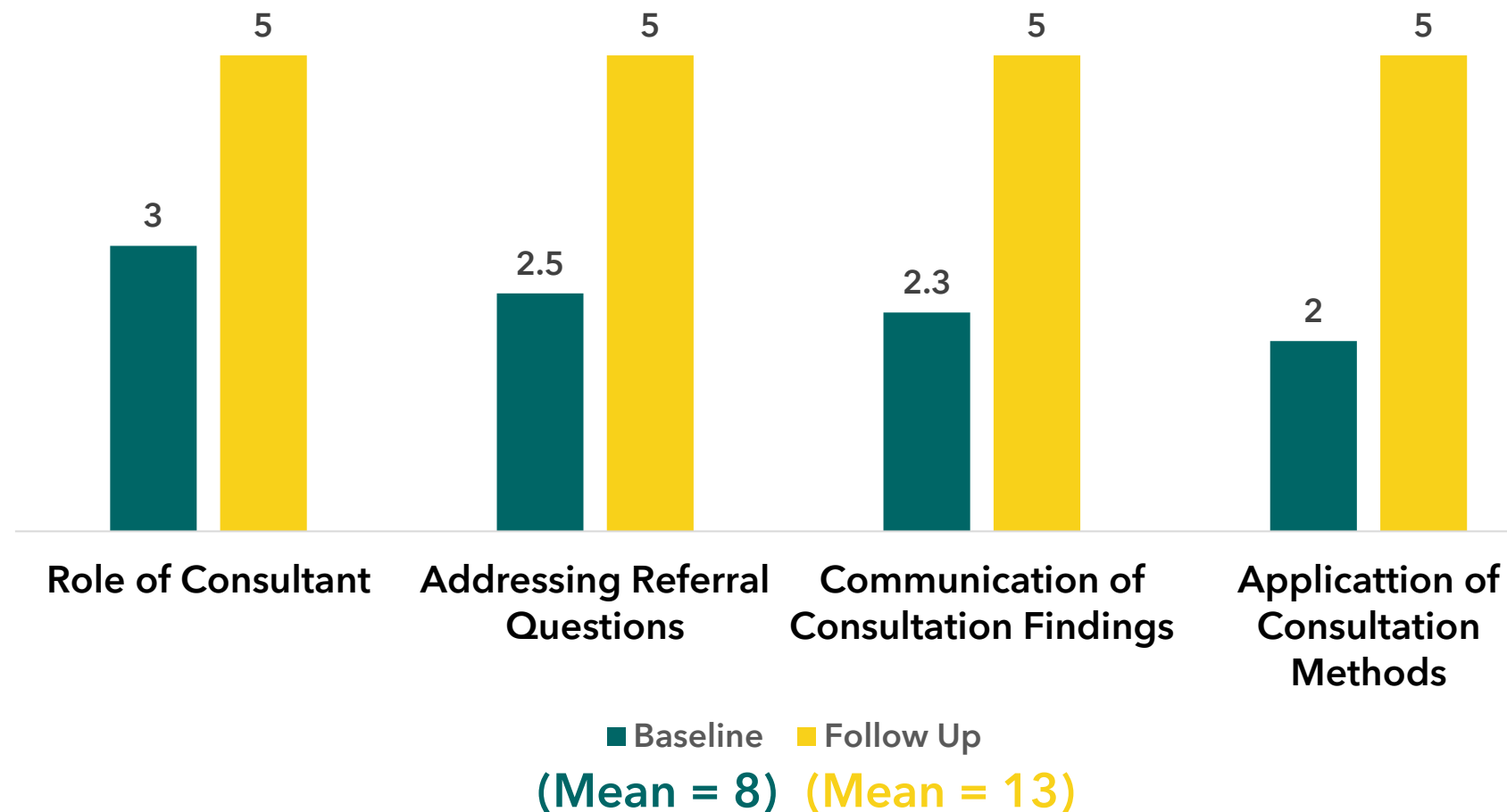
## K. CONSULTATION

**Consultation** involves the ability to provide expert guidance or professional assistance in response to a client's needs or goals.

Four different core competencies fall under this main category: *role of consultant*, *addressing referral questions*, *communication of consultation findings*, and *application of consultation methods*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for consultation.



increased by 5 points from the beginning of the training program

## IV. EVALUATION & ASSESSMENTS OF TRAINEES

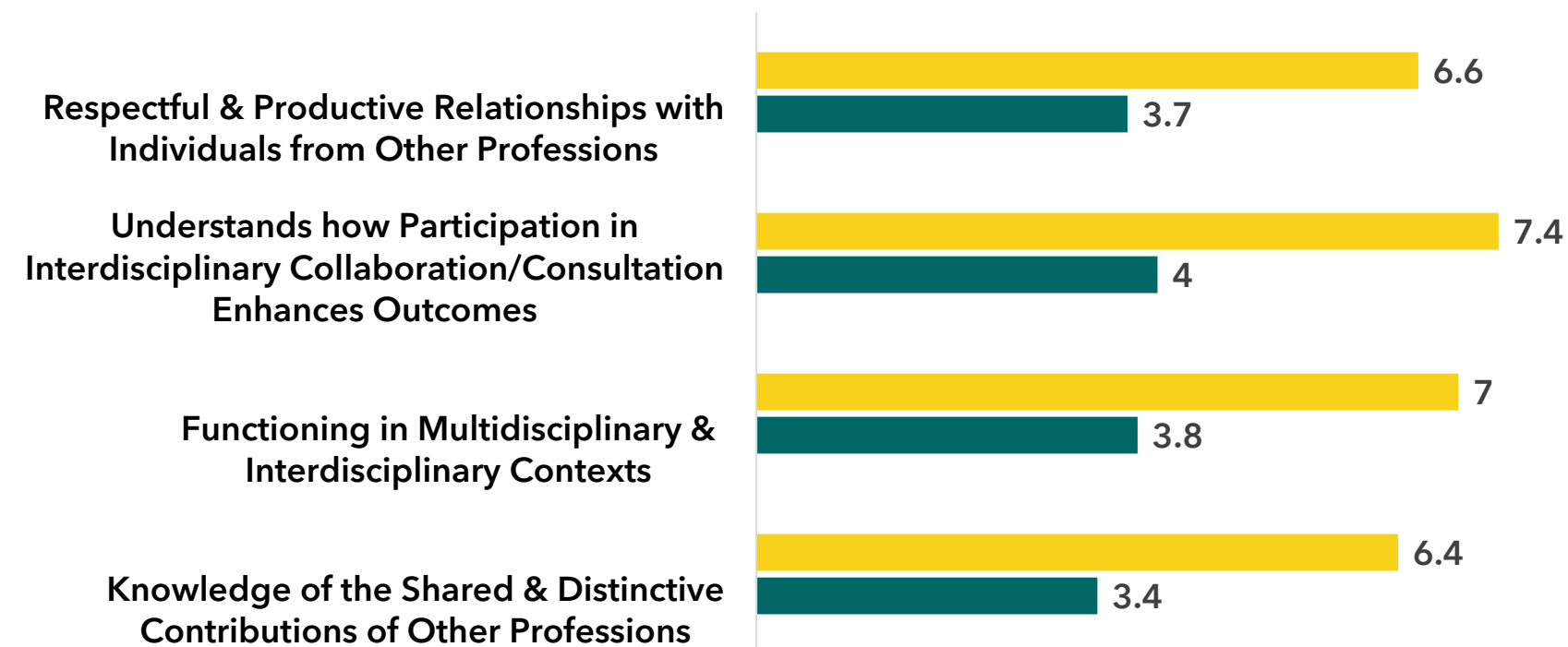
### L. INTERDISCIPLINARY SYSTEMS

**Interdisciplinary systems** involves knowledge of key issues and concepts in related disciplines and identify and interacting with professionals in multiple disciplines.

Four different core competencies fall under this main category: *knowledge of the shared and distinctive contributions of other professions, functioning in multidisciplinary and interdisciplinary contexts, understanding how participation in interdisciplinary collaboration/consultation enhances outcomes, and respectful and productive relationships with individuals from other professions.*

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for interdisciplinary systems.



■ Follow Up ■ Baseline  
**(Mean = 23)** **(Mean = 11)**



**increased by 12 points from the beginning of the training program**

# IV. EVALUATION & ASSESSMENTS OF TRAINEES

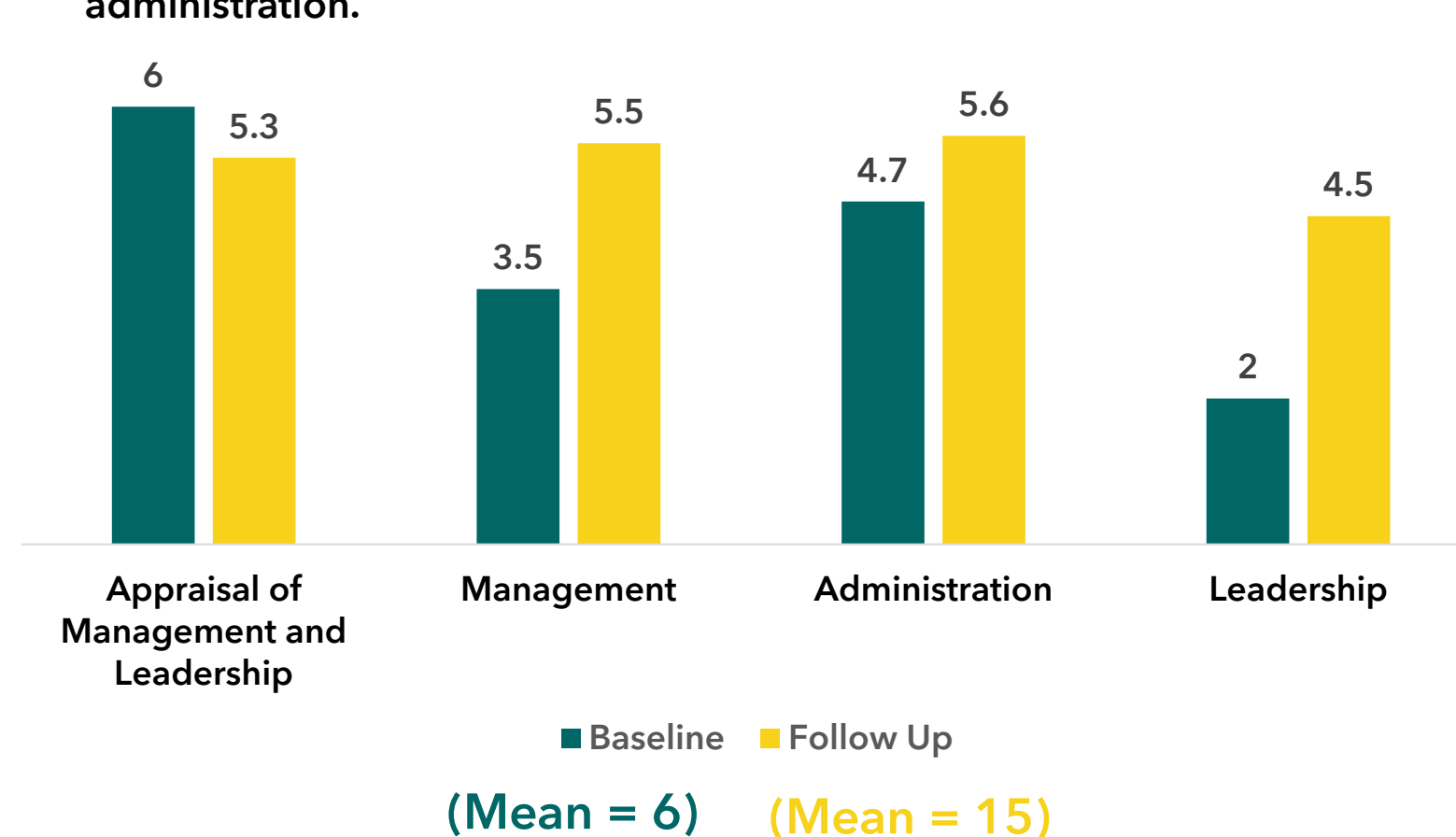
## M. MANAGEMENT-ADMINISTRATION

**Management-Administration** involves managing the direct delivery of services (DDS) and/or the administration of organizations, programs, or agencies (OPA).

Four different core competencies fall under this main category: *appraisal of management and leadership*, *management, administration*, and *leadership*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 36.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 4 different core competencies for management administration.



increased by 9 points from the beginning of the training program

## IV. EVALUATION & ASSESSMENTS OF TRAINEES

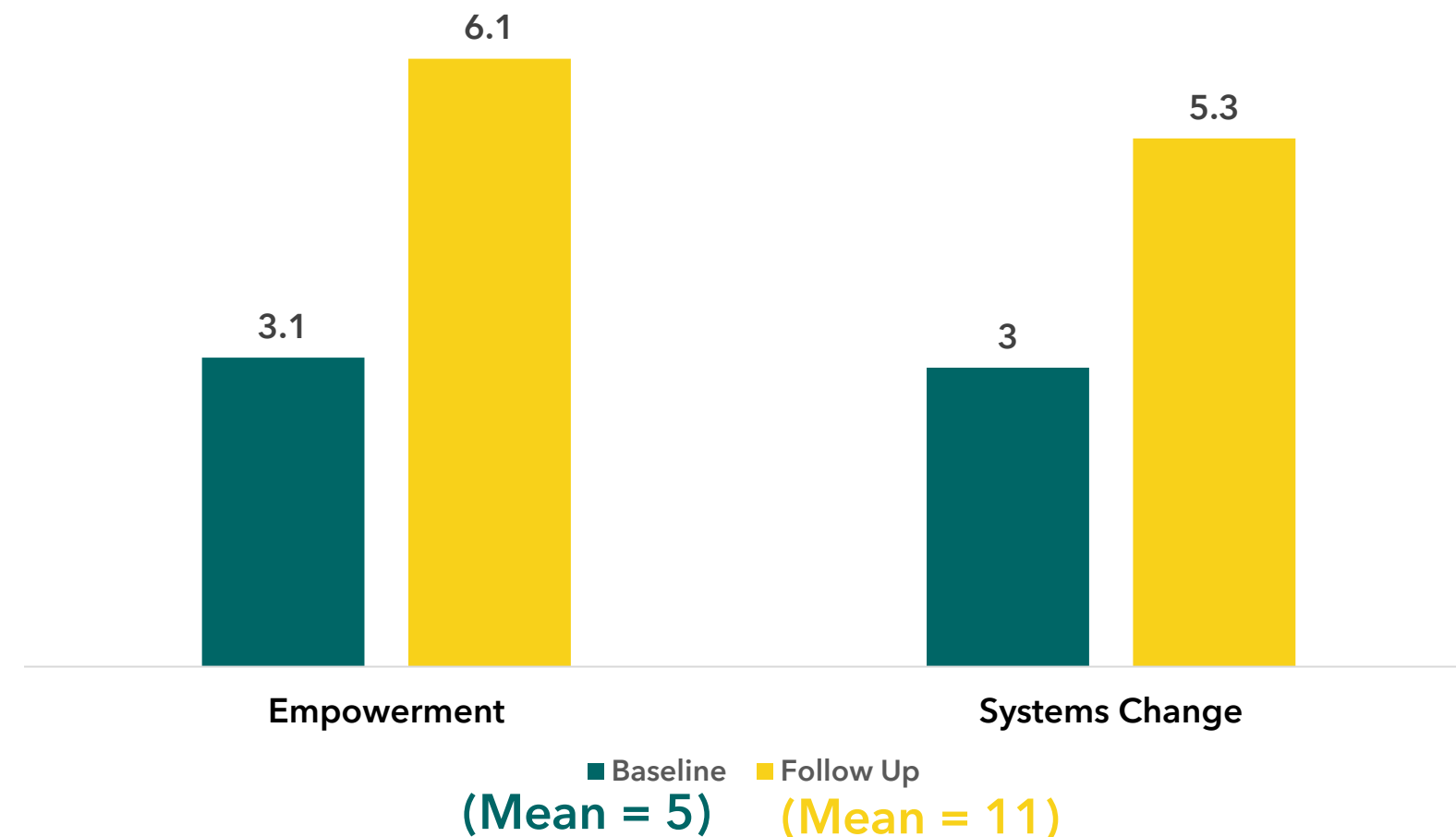
### N. ADVOCACY

**Advocacy** includes the actions targeting the impact of social, political, economic or cultural factors to promote change at the individual (client), institutional, and/or systems level.

Two different core competencies fall under this main category: *empowerment*, and *systems change*.

Each individual competency was rated on a scale ranging 1-9 (1 being the lowest and 9 being the highest), and the total score for this category is 18.

The below chart presents a comparison of the evaluations for trainees at baseline vs. follow up for the 2 different core competencies for advocacy.



increased by 6 points from the beginning of the training program

## V. DIRECT CLINICAL SERVICES

Psychologists-in-training used various therapeutic interventions based on training and education, supervisor background, and the evidence-based interventions required for the person; in addition to note taking and report writing.

TOTAL NUMBER OF SESSIONS CONDUCTED BY TRAINEES

1590

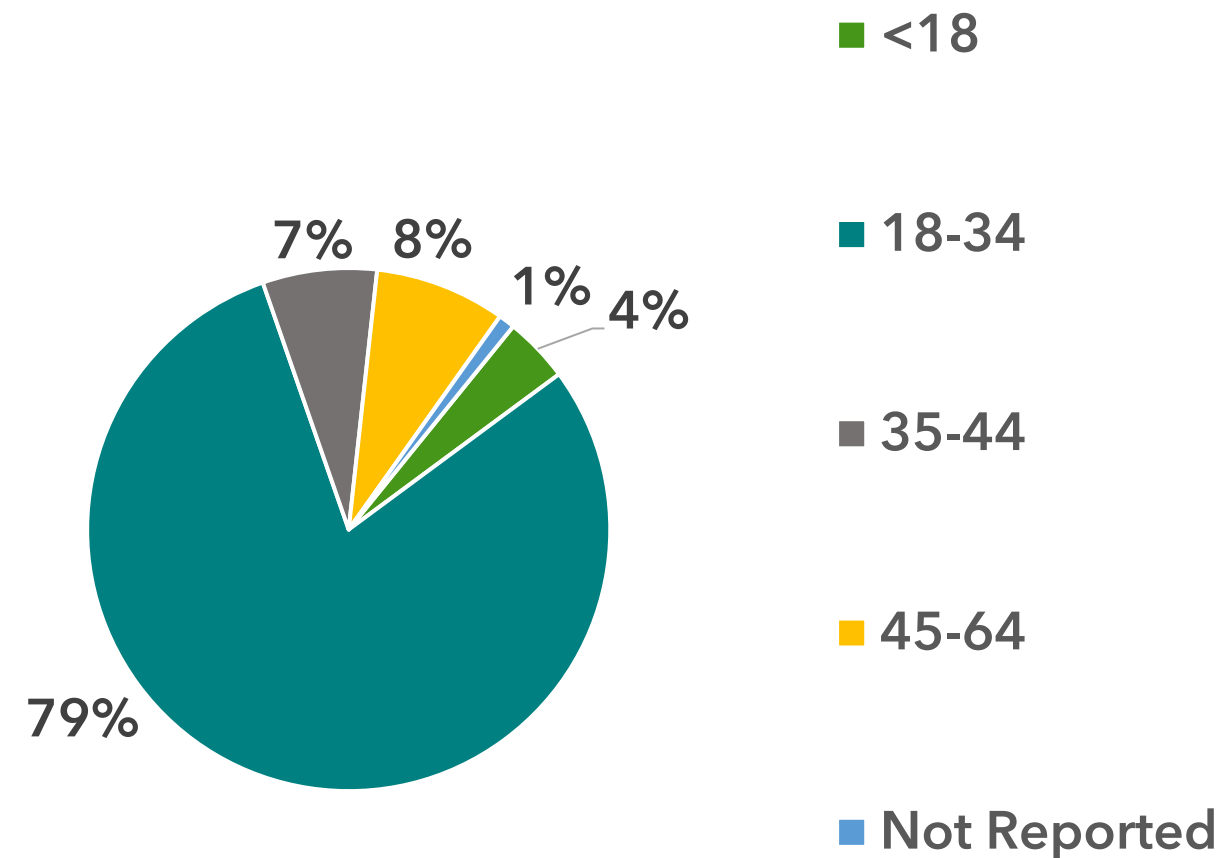
TOTAL NUMBER OF BENEFICIARIES SEEN BY TRAINEES

87

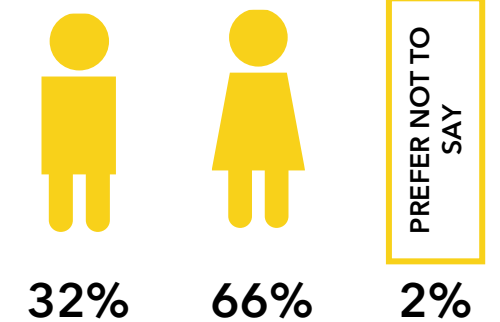
The following section of the report summarizes various demographic and social characteristics of those beneficiaries seen by psychologists-in-training.

### A. AGE OF BENEFICIARIES (N=33)

MEAN AGE: 26



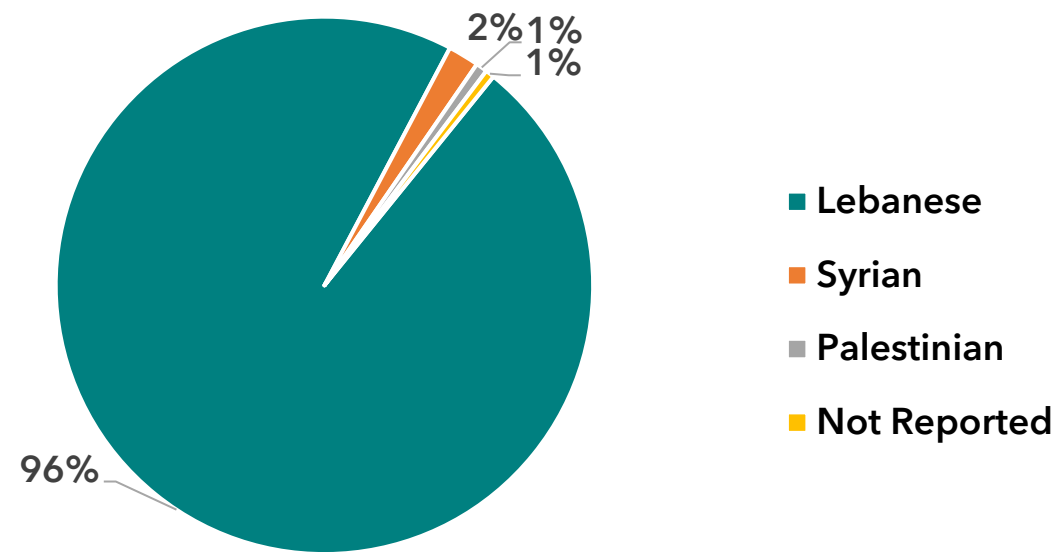
### B. SEX



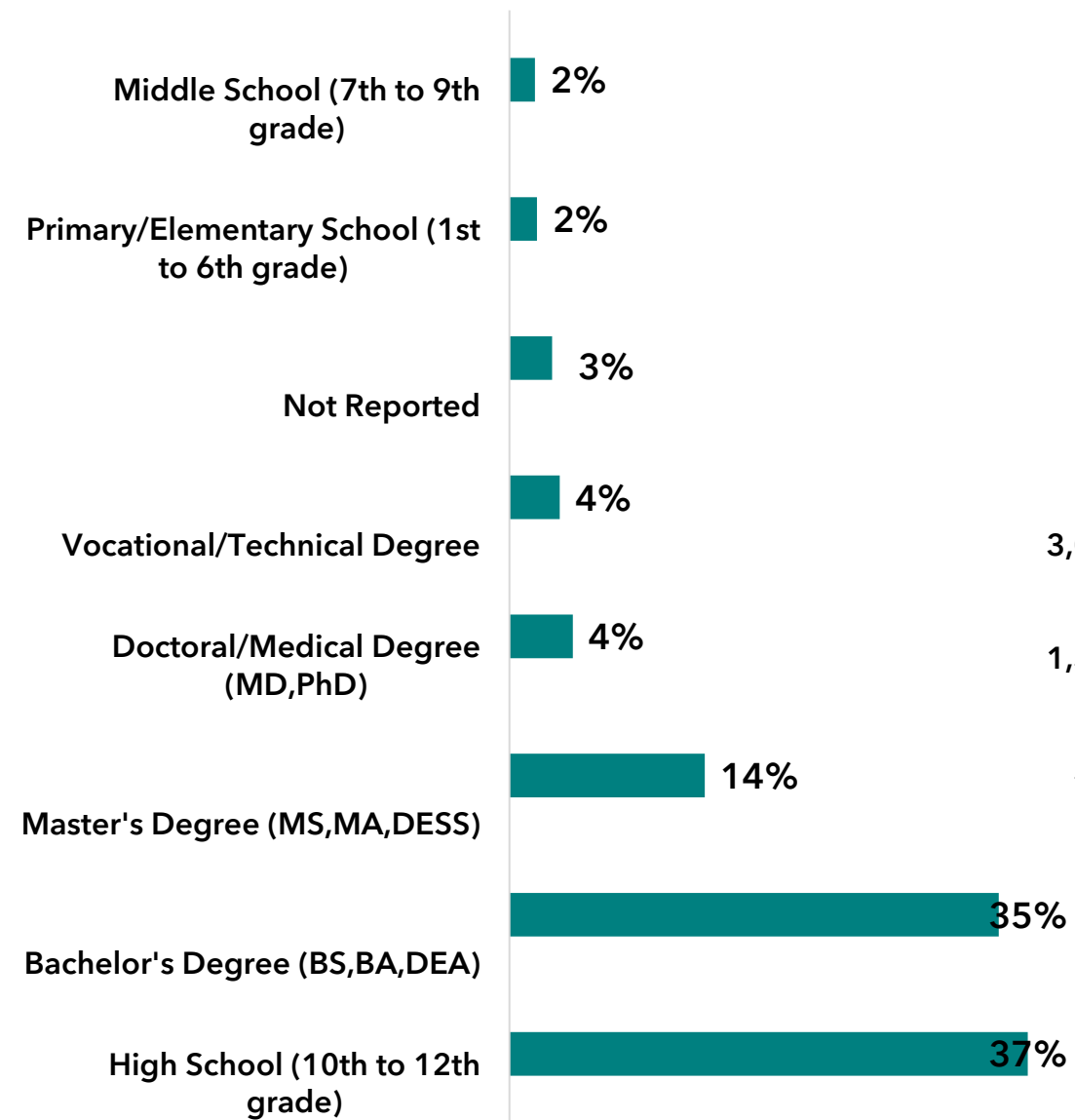


# V. DIRECT CLINICAL SERVICES

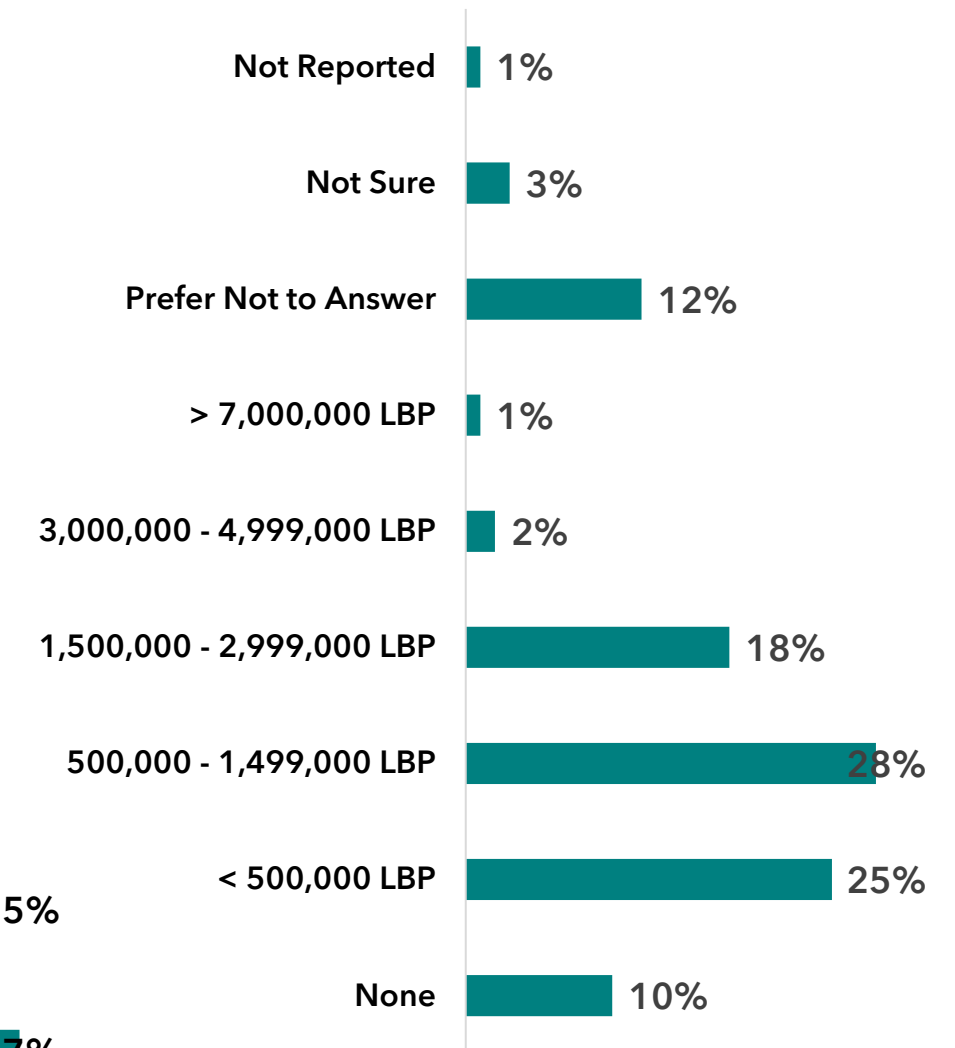
## C. NATIONALITY



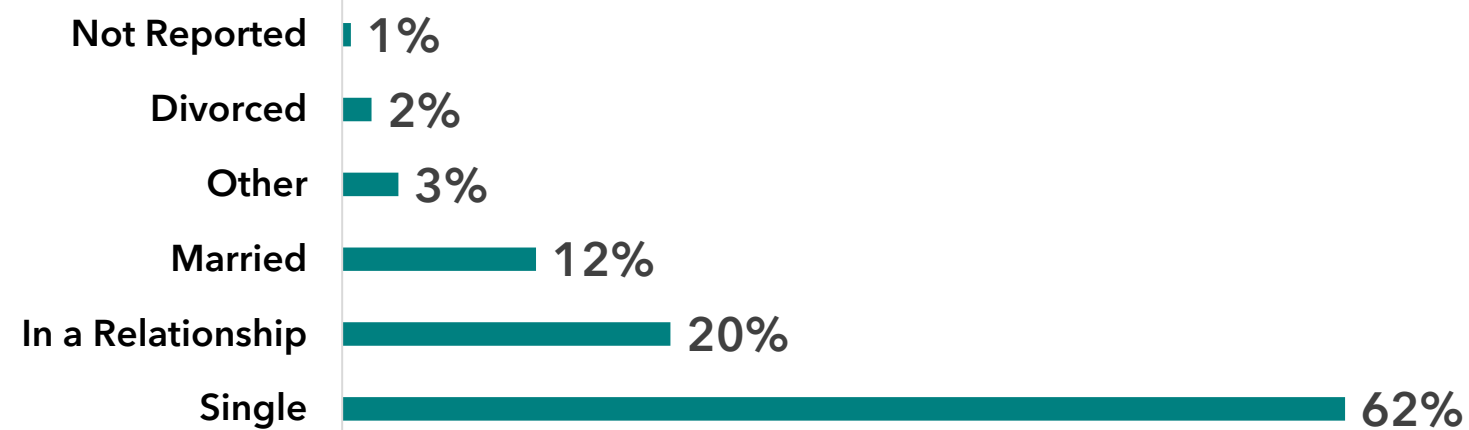
## E. HIGHEST LEVEL OF EDUCATION



## F. INCOME STATUS

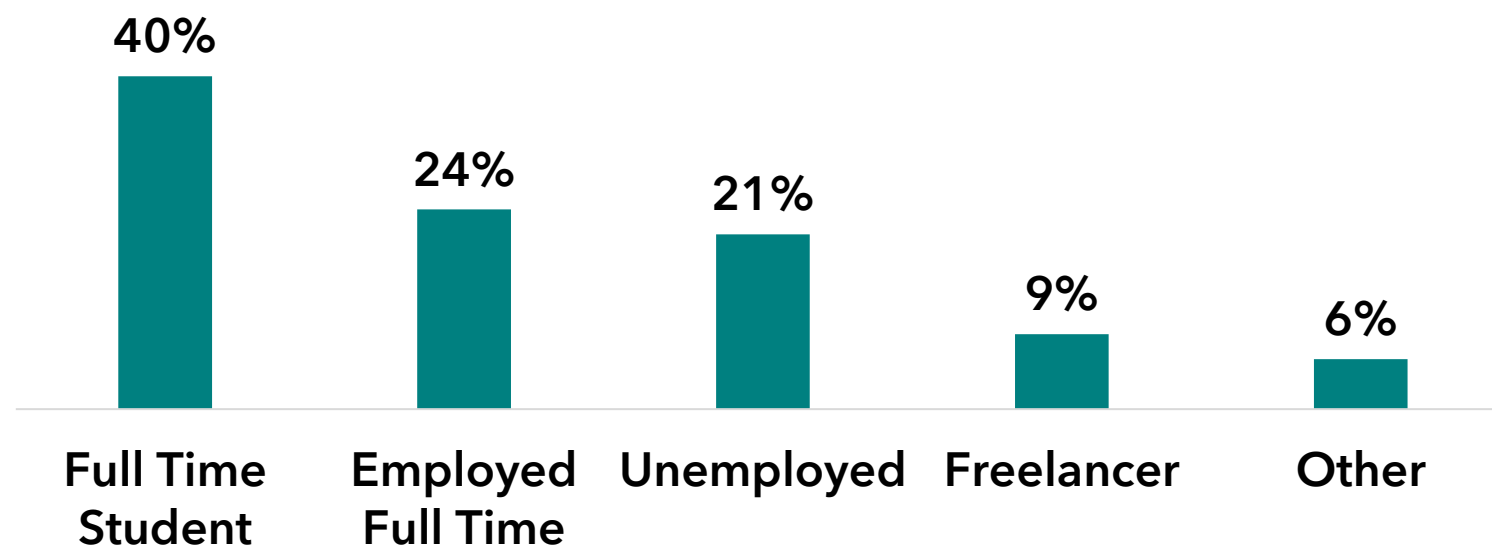


## D. MARITAL STATUS

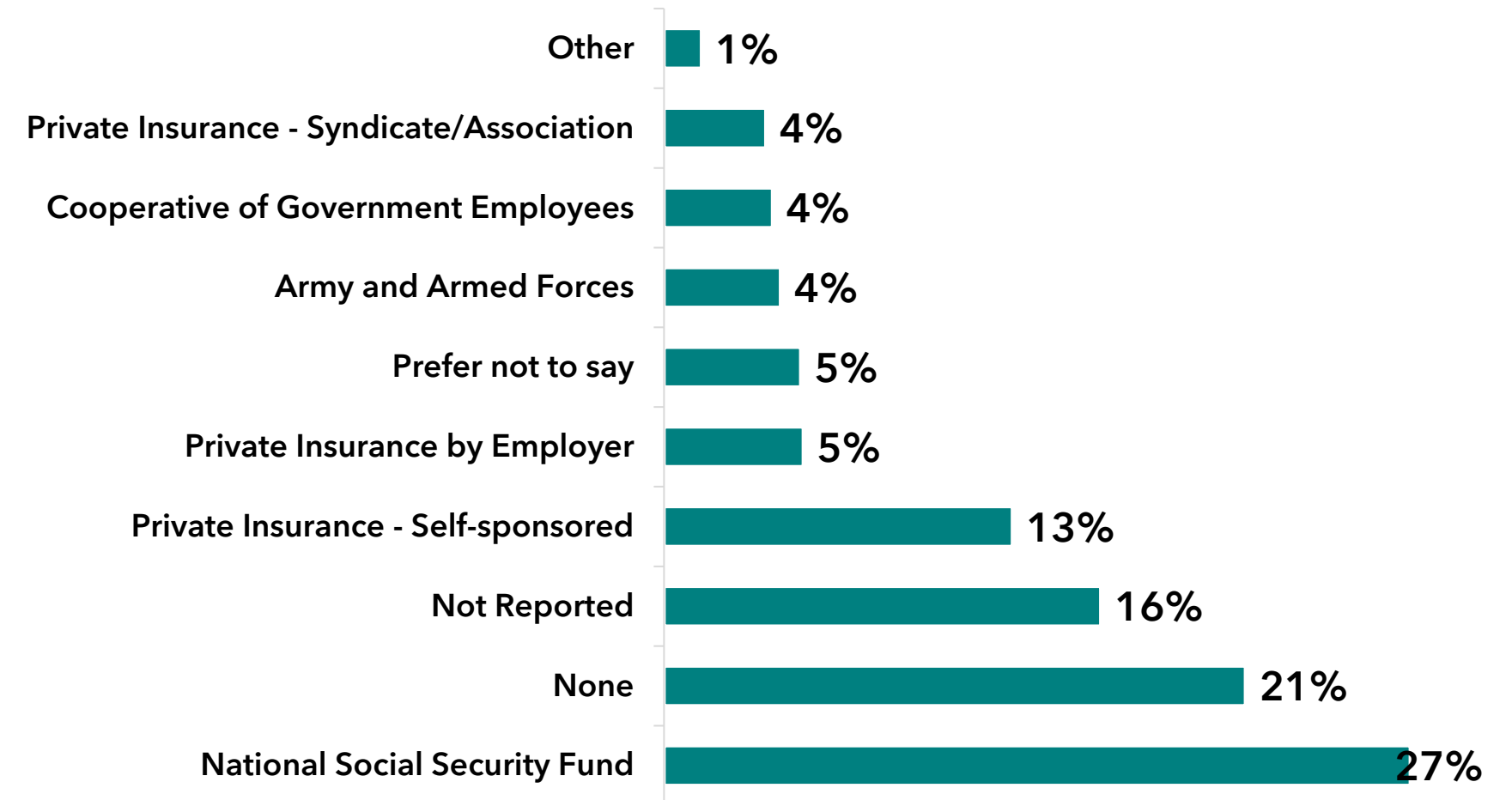


## V. DIRECT CLINICAL SERVICES

### G. EMPLOYMENT STATUS



### H. INSURANCE STATUS



## VI. CLINICAL TRAINING PROGRAM TESTIMONIALS

“ My experience at the Embrace Clinic Training Program has been indeed a **fruitful** one. The hands on experience I have acquired has been overwhelmingly beneficial. The clinic has a **multidisciplinary team** who we learn from with every single interaction. Having several mental health professionals from different backgrounds allows us to think in various ways and learn from different point of views. The Individual Supervisors on the other hand are **brilliant, sensible and experts** at what they do.

“ As psychologists-in-training, the professional support we receive from every staff member at Embrace is **beyond what one can imagine**. The opportunity to engage in diverse learning activities **had completed the cycle of efficient and effective learning**. It is from this place that good psychologists will arise and being part of it, is a blessing that I am always thankful for.

“ The training experience at Embrace **exceeded my expectations, ....** [The] EMHC was able to establish a multidisciplinary site that **offered different types of trainings, tools, and observation settings** that could sharpen our experience in the field mental health intervention. In addition, professionals who conduct our trainings and didactic sessions have a remarkable background in the research and academic field, and come from different schools and approaches.

“ The experience in the Embrace MHC so far has been **insurmountable**. I believe that we are being exposed to the best of the best in terms of professionals in the field. I appreciate the approachability of the staff, and wish to have more sessions in terms of workshops, one on one sessions with the team in addition to our supervisions. The learning experience has **set the bar very high**, and I can confidently say that I am applying what I am learning in my masters degree and what I learnt in my BA.