The Elyn Saks Institute has a student scholar program that provides some financial support ($2000) and some involvement with the institute regarding mental illness, legal issues, policy and ethics. In addition, the scholar is required to meet on a regular basis (monthly?) and write a paper that can result in a publication. For a list of the current student scholars and the institute go to:

http://weblaw.usc.edu/centers/saks/scholars.cfm

If you are interested in applying to be a Sax Student Scholar please send to Steven Lopez (lopezs@usc.edu) the following:

1. a one-page single spaced statement indicating why you want to participate in this program.
2. your cv.

The deadline for receipt of these materials is April 20.

Guest Lecture

All are welcome to attend the following guest lecture in PSC 201. Please let Darby Saxbe know if you plan to sit in.

Introduction to Acceptance and Commitment Therapy
Speaker: Emmanuel Espejo, Ph.D (Associate Training Director of the Anxiety Disorders Clinic, San Diego VA)
Tuesday, April 22nd, 1-4 pm

Leibovitz Conference

Thursday, May 8, 2014: 4:30-6:30 pm. Please RSVP to Erika Quinly (quinly@usc.edu) by April 24th.

Presenters:
- Claire Burgess
- Justin Hummer
- Christine Juang
- Rubin Khoddam
- Bruna Martins
- Kelly Miller
Gerald C. Davison, PhD
Professor of Psychology and Gerontology
University of Southern California

Case Conferences and the Dialectics of Science and Practice

Forty years ago Paul Meehl published a classic article entitled “Why I Do Not Attend Case Conferences.” During our recent ADCT interview process, we were fortunate to participate in case conference-like presentations that I believe Meehl would have found a good deal more interesting and useful than what he wrote about two generations ago. In my presentation I will discuss an outline for what I believe can help clinicians hold forth in a case conference setting in ways that can be useful for the presenter, the audience, and ultimately the patient or client. Special attention will be paid to the view that clinical assessment is constructive in an epistemological sense and that it should be inextricably tied to the decisions to be made for and with the patient, most especially the treatment options that are available. I will also argue that ongoing assessment is fundamental to creating and making adjustments in evidence-based interventions, the advantages and limitations of which will also be discussed. Along the way I will integrate what I’ve called the “dialectics of science and practice,” which is a somewhat ponderous way to describe the scientist-practitioner (Boulder) model of clinical psychology, the foundation of most high-quality clinical programs including our own.