Teaching Statement

My approach to undergraduate education is to challenge students to become more scientifically-minded and critical consumers of information as it relates to the behavioral and social sciences. I spend considerable time on "psych as a science" issues and concepts as they relate to our everyday understanding of human behavior (defined broadly to include emotion, thought, social interactions, etc.) I see the various topics covered in the textbook chapters (language, cognition, motivation & emotion, biological bases, social psych, intelligence, personality, etc.) as a way to provide broad coverage of how to think about these things critically and scientifically more so than teaching facts or concepts. In the service of modeling what I teach, I stay abreast of new research regarding evidence-based instructional techniques and to incorporate instructional techniques that have proven to be effective at promoting students' learning. I organize my courses around a small amount of learning objectives and simplify complex topics by emphasizing higher-order concepts and principles. Even in classes with large enrollment, I strategically offer opportunities for student involvement through demonstrations, small class experiments, between-class challenges, and brief experiential exercises. I tend to spend a great deal of time talking about research methods and critical thinking before we divulge into specific topics. By the end of the course, I hope that the students will think critically about how we understand psychological phenomenon and have the skills to critically evaluate the multitude of claims that bombard us on a daily basis- both in the media and in our everyday experiences. I particularly emphasize the importance of understanding that behavior is complex, difficult to predict (but can be predicted), and is multiply determined and influenced though complex interactions between biology and experience. Rather than emphasizing the learning of facts and concepts, I try to get the students to learn to think about these complex and dynamic interactions between these various influences to challenge their assumptions and to think in a more complex and scientific way about the world around them.

I also very much enjoy graduate-level teaching, mentoring, and supervision. For the past several years I have taught the clinical area's introduction to clinical science course, which is an in-depth exploration of theories of psychotherapy, evidence-based practice (EBP), the empirically supported treatment movement, clinical research methods, and the importance of considering and incorporating diversity (in all forms) in EBP. Importantly, this course involves in-depth discussions of the importance of adopting an scientific mindset across all of their professional activities (e.g., clinical work with individual clients), not just in their research. I have also routinely taught the CCF "core course," which is required of all CCF-focused students in their 1st-3rd years in the program. The topic of this course has ranged from an in-depth review of evidenced based protocols for working with children, a crash course in behavior analytic theory and applied behavior analysis, and most recently a dive into the "nuts and bolts" of case conceptualization when working with children. This later iteration of the CCF course (Spring 2020) has been particularly fun to develop because of its experiential elements. At the start of the course, each student created a mock child-focused client. Through an abundance of role-plays, students are gaining experience conceptualizing cases and practicing evidence-based techniques for a wide-range of problematic presentations/behaviors, as well as to critique and provide feedback on their classmates' conceptualizations and applications (basics of supervision).

One consistent theme that I try to maintain across the graduate courses that I teach is to challenge students to develop a strong theoretical "identity" (for example by writing and revising a personal manifesto) because I strongly believe that to be a good clinician, students must develop an empirically-informed theoretical orientation from which to conceptualize cases rather than simply learning to apply a broad range of specific techniques. Consistent with this, my supervisory style

is a balance of supporting the students to have the confidence to make independent decisions (and mistakes) with instruction/direction and modeling. My goal is not to teach the students how to conceptualize a case, apply conceptually appropriate techniques, to monitor a client's progress, and to help their clients by flexibly applying empirically supported techniques. Although I am a proponent of empirically supported treatments, I strive to help students understand that evidence-based practice involves the application of empirically-supported therapeutic techniques within a broader clinical context that highly influential in determining clinical outcomes. As such, I spend considerable time working with students to understand and incorporate both client and therapist variable into their case formulation. These include, among others, factors that affect the client-therapist relationship and working alliance, factors related to diversity and cultural identity, SES, social supports, and both client and therapist life experiences (including shared non-shared experiences) that might be clinically relevant.

Finally, over the past several years, I have thoroughly enjoyed advising and mentoring both undergraduate and graduate students in my Utah Tic Lab. The Utah Tic Lab is a clinical research lab that aims to use research to improve clinical care for individuals with Tic Disorders and related conditions, including as anxiety, obsessive-compulsive behaviors/disorder, aggression, non-compliance, and other internalizing and externalizing problems that commonly co-occur with tics. The stated mission of the Utah Tic Lab is "Using research to understand what makes kids tic." In addition to research, the lab emphasizes providing expert evidence-based care, education and training, and outreach and advocacy. At any given time, I supervise 6-10 undergraduate students who either volunteer or are enrolled for academic credit as research assistants, and 2-4 clinical psychology graduate students. I have mentored several independent research projects ranging from undergraduate senior honors theses and University Research Opportunity Projects to master's theses and dissertations at the graduate level. Both undergraduate and graduate students in my lab have the opportunity to be involved in the entire research process from conceptualization to data collection to data analysis to interpretation to reporting and presenting the results at conferences and/or in professional publications. I believe that involving students at all levels of the research process teaches responsibility and ownership over their work and also fosters generativity and excitement in the research. Most graduate students in my lab have the opportunity to assist with and/or present posters at national conferences based on their work (for the past several years, I have had multiple undergraduates attend the national meeting of the Association for Behavioral and Cognitive Therapies where they have presented posters). My graduate students have each submitted or published a first-authored paper, they each have multiple publications (range 2-8), and they are putting together impressive CVs that will make them competitive in the academic job market. During my time at Utah, I have mentored 3 graduate students through the program, and they have all successfully matched at highly competitive internships (Children's Hospital of Philadelphia, Oregon Health Sciences University, and the University of Utah Neuropsychiatric Institute) and postdoctoral positions (Drexel School of Medicine, OHSU, and Primary Children's Medical Center). One of my former students is currently on the academic job market and has received several interviews (ongoing), one is a postdoctoral fellow at OHSU, and one chose to stay local and go into private practice with a local pediatrics group. I am currently mentoring 3 students in our program, and all of them are well on their way to productive academic and/or clinical careers.

Although our program is research heavy, I also have unwavering expectations that my students leave our program as highly competent clinicians and supervisors. In addition to the clinical coursework and practical experiences required by our program, graduate students in my lab have ample opportunities to conduct assessments and therapy in the Utah Tic Lab under my direct supervision, and to supervise more junior students learning to conduct assessments and therapy.

Finally, although I strongly encourage all students to get involved in- and learn about- the research process, I have come to appreciate that some undergraduate students are more interested in community engagement and advocacy. To encourage them to engage with the local community, I have created opportunities for undergraduates to develop and carry out a community-based outreach projects related to clinical psychology. Some of the activities they have been involved with include organizing our annual Tourette Disorder education event (including a recent geocaching event that was funded by the Tourette Association of America) and distributing informational “toolkits” to local educators and care providers to help them better understand OCD and Tourette Disorder.