

Advanced Master's Degree Clinical Child and Adolescent Psychology and Family Therapy



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- » Modality: online
- » Duration: 2 years
- » Certificate: TECH Global University
- » Credits: 120 ECTS
- » Schedule: at your own pace
- » Exams: online

Website: www.techtitude.com/us/psychology/advanced-master-degree/advanced-master-degree-clinical-child-adolescent-psychology-family-therapy

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01

Introduction

This program has been designed with the objective of introducing psychology professionals to the study of mental health in childhood and adolescence, an area that has scarcely been covered until recently and in which oversimplified translations of adult psychopathology are easily made. The studies that make up the program are also complemented with exhaustive information on family therapy, an indispensable element for gaining in-depth knowledge of the psychic pathologies of young people.



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Understanding the behavior of young people is a complex task that must focus on family patterns as its point of departure. This Advanced Master's Degree offers you a comprehensive overview of these areas, so that you may be more effective in your daily practice"

As an educational institution, TECH considers it essential for psychologists who study this Advanced Master's Degree to understand the different components involved in psychological treatment for children and adolescents, and, likewise, brain logic and processing at these ages, including particular behavior and interaction strategies in psychosocial relationships, as all this knowledge is crucial for successful psychological intervention with children and adolescents.

Present-day clinical psychology should not only be able to provide students with a theoretical-scientific framework, but also with the skills they require in order to address mental illness in an effective way and, from there, become successful evaluators and generators of change in patients, both in terms of behavior as well as being able to help them overcome traumatic memories that lead to suffering cycles and emotional isolation.

It has also become essential to know how families influence the behavior of young people. It is gradually being understood not only that family dynamics can help protect its members against certain adversities or are sometimes affected by personal disorders among the members, but that certain aspects of family functioning can contribute strongly to maladapted behaviour (especially among children and adolescents) in the family environment, as well as in other settings, and give rise to further imbalances, as is the case with emotional or psychosomatic disorders.

Throughout this specialization, students will go through all the current approaches in the work of psychologists, with the different challenges that the profession brings. A high-level step that will become a process of improvement on both professional and personal levels.

We will not only take you through the theoretical knowledge we offer, but we will introduce you to another way of studying and learning, one which is simpler, more organic, and efficient. We will work to keep you motivated and to develop your passion for learning, helping you to think and develop critical thinking skills. And we will push you to think and develop critical thinking.

This Advanced Master's Degree is designed to give you access to the specific knowledge of this discipline in an intensive and practical way. A great value for any professional.

This **Advanced Master's Degree in Clinical Child and Adolescent Psychology and Family Therapy** contains the most complete and up-to-date academic program in the university landscape. The most important features of the program include:

- ♦ The latest technology in online teaching software
- ♦ A highly visual teaching system, supported by graphic and schematic contents that are easy to assimilate and understand
- ♦ Practical cases presented by practising experts
- ♦ State-of-the-art interactive video systems
- ♦ Teaching supported by remote training
- ♦ Continuous updating and retraining systems
- ♦ Autonomous learning: full compatibility with other occupations
- ♦ Practical exercises for self-evaluation and learning verification
- ♦ Support groups and educational synergies: Questions to the expert, discussion forums and knowledge
- ♦ Communication with the teacher and individual reflection work
- ♦ Content that is accessible from any, fixed or portable device with an Internet connection
- ♦ Supplementary documentation databases that are permanently available, even after the program



A high-level scientific program, supported by advanced technological development and the teaching experience of the best professionals"

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A training program created for professionals who aspire to excellence that will allow you to acquire new skills and strategies in a smooth and effective way"

Our teaching staff is made up of working professionals. In this way we ensure that we deliver the educational update we are aiming for. A multidisciplinary team of doctors trained and experienced in different environments, who will develop the theoretical knowledge in an efficient way, but above all, they will bring their practical knowledge from their own experience to the course.

This command of the subject is complemented by the effectiveness of the methodological design of this Grand Master. Developed by a multidisciplinary team of *e-learning* experts, it integrates the latest advances in educational technology. In this way, you will be able to study with a range of easy-to-use and versatile multimedia tools that will give you the necessary skills you need for your specialization.

The design of this program is based on Problem-Based Learning, an approach that views learning as a highly practical process. To achieve this remotely, we will use telepractice learning. With the help of an innovative interactive video system and *bylearning from an expert*, you will learn the skills you need to deal with real situations through their simulation. A concept that will allow you to integrate and fix learning in a more realistic and permanent way.

We offer an in-depth and comprehensive immersion plan in strategies and approaches developed for this Advanced Master's Degree.

The sensory systems of the human being studied from the neuropsychologist's point of view, with a view to intervention and improvement.



02 Objectives

Our goal is to prepare highly qualified professionals for work experience. An objective that is complemented, moreover, in a global manner, by promoting human development that lays the foundations for a better society. This objective is focused on helping professionals reach a much higher level of expertise and control. A goal that you will be able to achieve thanks to a highly intensive and detailed course.



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If your goal is to improve in your profession, to acquire a qualification that will enable you to compete among the best, then look no further: Welcome to TECH”



General Objectives

- ♦ Describe the therapeutic alliance between the psychotherapist and the child or the adolescent
- ♦ Analyze the changes in behavior during the life cycle
- ♦ Identify healthy aspects and ill aspects of the child and adolescent
- ♦ Differentiate between the evolutionary adaptation and adaptability of human beings
- ♦ Describe the family system framework in single-therapist, single-patient psychotherapy
- ♦ Master psychodiagnosis and evaluation in the child and adolescent framework
- ♦ Master the technique for interviewing a child or adolescent
- ♦ Master the personality evaluation of these age groups
- ♦ Identify the role of the family in child and adolescent diagnosis
- ♦ Describe the intervention of clinical psychology in these age groups
- ♦ Develop sufficient skills to manage a child and adolescent clinic



We are the largest Spanish-speaking online university in the world. We look to achieve success and to help you do the same"





Specific Objectives

- ♦ Understand psychological illness in children and adolescents
- ♦ Evaluate symptoms as an expression of the disease
- ♦ Understand the etiology of mental disorders in the child and adolescent population
- ♦ Analyze different concepts that psychologists need to take into account when dealing with children's families
- ♦ Learn the tools required to manage child pathologies by focusing on family as a point of departure
- ♦ Understand family composition to provide patients with full therapeutic accompaniment
- ♦ Identify different types of families and their implication in psychopathology in children and adolescents
- ♦ Use the interview as an evaluation method. For this, students must develop a therapeutic frame and reference framework for conducting the interview
- ♦ Perform an intelligence assessment to estimate the patient's intellectual level and create a diagnostic process
- ♦ Use the appropriate protocol to evaluate patient communication and motor activity
- ♦ Learn about new perspectives on the diagnosis of mental illness
- ♦ Analyze different neurodevelopmental disorders such as autism spectrum, intellectual disability, among others
- ♦ Identify different psychotic disorders of possible neurological origin
- ♦ Understand anxiety disorders that develop in childhood, such as phobias, social anxiety or affective mutism
- ♦ Understand the manifestation of obsessive-compulsive disorders and those related to traumas
- ♦ Identify and analyze impulse control and behavioral problems
- ♦ Differentiate a substance abuse disorder from one of neurological origin
- ♦ Introduce students to concepts used for diagnosis of personality disorder
- ♦ Understand the clinical framework of personality disorders in the child and adolescent population
- ♦ Understand, identify and analyze different personality disorders, such as antisocial, narcissist and evasive personality among others
- ♦ Introduce the student to behavior modification techniques such as reasoning or "The Broken Record" technique
- ♦ Effectively carry out strategic and constructive therapy
- ♦ Identify the phases of encounter, unframing and restructuring
- ♦ Establish different intervention tools in order to treat children and adolescents
- ♦ Know the main theories of play, metaphors and stories as intervention techniques
- ♦ Apply certain intervention tools taking into account the social and emotional situation of the child and adolescent

03 Skills

Once all the contents have been studied and the objectives of the Advanced Master's Degree in Clinical Child and Adolescent Psychology and Family Therapy have been attained, the professional will possess superior skills and performance capabilities in this area. A very complete approach, in a high-level Advanced Master's Degree, which makes the difference.



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Achieving excellence in any profession requires effort and perseverance. But, above all, the support of professionals, who will give you the boost you need, with the necessary means and assistance. At TECH, we offer you everything you need”



General Skills

- ♦ Study different family types, as well as psychopathology in children and adolescents
- ♦ Psychodiagnosis, through interviews and modern psychological methodology, of the different psychopathologies in childhood and adolescence
- ♦ In-depth study of the most common and infrequent personality disorders in childhood and adolescence, from a modern scientific perspective
- ♦ Develop the most effective intervention techniques in therapeutic practice
- ♦ Manage the most clinically successful intervention tools with precision and excellence
- ♦ Performing and adapting intervention protocols within an interdisciplinary framework
- ♦ Implement silence into family intervention
- ♦ Identify and use information from social and family agents
- ♦ Develop an intervention according to the mental logic of the different age groups
- ♦ Consolidate relationships to become a reference for the family as a whole, without entering into competition with adults



Our objective is very simple: to offer you quality training, with the best teaching system available today, so that you can achieve excellence in your profession"





Specific Skills

- ♦ Develop strategies for dealing with minors and review the legal repercussions of not complying with the code of ethics and the patient's statute
- ♦ Differentiate the psychological disorders in the natural evolutionary changes
- ♦ Perform a differential diagnosis taking into account the evolutionary stage of the patient
- ♦ Identify, differentiate and diagnose the new and different forms of psychological illnesses in childhood and adolescence in the current day
- ♦ Deal with the diagnosis and the setting in these ages in a conducive way
- ♦ Develop techniques to achieve the motivation and active participation of a child or adolescent patient in the diagnosis and intervention process
- ♦ Carry out patient intervention with assurance, without disregard to the involvement of family, school or peer groups
- ♦ Expand knowledge of different mental disorders and behavioural or emotional abnormalities
- ♦ Make a realistic prognosis of the child's or adolescent's situation as part of the differential diagnosis
- ♦ Manage the current clinic in its biopsychosocial variables
- ♦ Develop protocols and tools that allow for intervention with safeguards
- ♦ Understand the different masks used and atypical ways the illness can present itself in children and adolescents
- ♦ Describe the use of decision trees based on DSM-5 and CIE-10
- ♦ Develop sufficient tools for the patient to identify the therapist as an individual in a position of authority
- ♦ Perform intervention protocols tailored to the patient
- ♦ Control the intervention by adapting it to the patient's profile
- ♦ Define the labyrinths specific to each disorder with their unknowns and difficulties
- ♦ Design an intervention from creativity and experience as a clinician, adapting to what is happening at each moment
- ♦ Master interaction within a family therapy framework
- ♦ Manage the dynamics of therapeutic time
- ♦ Mastering assessment and intervention tools using all senses
- ♦ Master the management of differential characteristics with which family psychological pathologies can present
- ♦ Developing and understanding mutations and new forms of disease
- ♦ Develop knowledge that discriminates an important problem of natural evolution within the process of family coexistence

04

Course Management

As part of TECH's intention to bring superior quality in education, we are proud to work with a teaching staff of the highest level, chosen for their proven track record in this field. Professionals from different areas and fields of expertise that make up a complete, multidisciplinary team. A unique opportunity to learn from the best.



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Our professors bring their vast experience and their teaching skills to offer you a stimulating and creative specialized training program”

International Guest Director

Dr. Amy Elizabeth West is a renowned clinical psychologist with an outstanding international career in the field of **Child and Adolescent Mental Health**. She has held a leadership position at **Children's Hospital Los Angeles (CHLA)**, where she has directed the **Clinical Child and Adolescent Psychology Internship**. Here, her work has focused on providing **evidence-based psychosocial treatments**, with a special focus on **vulnerable and underserved populations**, such as **ethnic minorities** and **socioeconomically disadvantaged families**.

Likewise, throughout her career, she has led innovative research on **Mood and Anxiety Disorders** in children, the prevention of **Suicidal Behavior** and **Perinatal Mental Health**, obtaining funding from prestigious institutions, such as the **National Institute of Mental Health (NIMH)**, the **Patient-Centered Outcomes Research Institute (PCORI)** and the **Substance Abuse and Mental Health Services Administration (SAMHSA)**.

Likewise, her integrative approach has been instrumental in developing treatments such as **Child and Family Focused Cognitive Behavioral Therapy (CFF-CBT)**, known as **RAINBOW therapy**, which has been widely validated as an effective treatment for **Pediatric Bipolar Disorder**, with manuals published by **Oxford University Press** in the "**Treatments that Work**" series. She has also been involved in research on **Substance and Opioid Use Prevention** in **Native American** and **Alaska Native communities**.

In addition to her work and research, Dr. Amy Elizabeth West has been an active personality in several professional organizations, holding leadership roles in the **Association for Cognitive and Behavioral Therapy**, the **Society for Prevention Research**, and the **Anxiety and Depression Association of America**. In doing so, she aims to improve access to **mental health** care for **vulnerable populations**, establishing herself as an expert in her field.



Dr. Bolton, West, Amy Elizabeth

- Director of Clinical Child and Pediatric Psychology, Children's Hospital Los Angeles, United States
- Co-investigator and Director of the Implementation of Cognitive-Behavioral Techniques
- Psychologist and Researcher of the Community Mental Health Program at Children's Hospital of Los Angeles
- Member of the Study on Prevention and Treatment of Opioid and Substance Use in Urban and Rural AIAN Tribal Communities in California at the University of Southern California
- Associate Editor of the Journal of Clinical Child and Adolescent Psychology
- Adolescent Medicine Fellow at Harvard Medical School and Boston Children's Hospital
- Clinical and Pediatric Child Psychology Fellow, Harvard Medical School and Boston Children's Hospital
- Ph.D. in Clinical Psychology from the University of Virginia
- B.A. in Psychology from Stanford University
- Clinical Research Loan Repayment Program Award from the National Institutes of Health (NIH)
- Career Development Award from the National Institute of Mental Health (NIMH)
- Member of:
 - University of Southern California Interdisciplinary Center for Family Change

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Thanks to TECH, you will be able to learn with the best professionals in the world”

Codirectors



Dr. Fernández Sánchez, Angel

- ♦ European specialist psychologist in Psychotherapy from the EFPA
- ♦ Health Psychologist
- ♦ Master's Degree in Clinical and Health Psychology
- ♦ Director of the Evaluation and Psychotherapy Center of Madrid
- ♦ Tutor in charge of the Psychodiagnosis and Psychological Intervention area of the CEP
- ♦ Author of the TEN technique
- ♦ Head of studies on the Professional Master's Degree in Time-Limited Psychotherapy and Health Psychology
- ♦ Specialist in Clinical Hypnosis and Relaxation
- ♦ Specialist in Child and Adolescent Intervention



Aguado Romo, Roberto

- ♦ Psychologist specialized in clinical psychology
- ♦ European specialist psychologist in psychotherapy
- ♦ Master's Degree in Clinical and Health Psychology by the Spanish Society of Psychosomatic Medicine and Health Psychology
- ♦ Managing Director of evaluation and psychotherapy centers in Madrid, Bilbao, and Talavera de la Reina
- ♦ Author of Time-Limited Psychotherapy
- ♦ Researcher at CerNet, Emotional Network, and European Institute for Time-Limited Psychotherapies
- ♦ Director of the scientific journal Psinapsis
- ♦ Tutor of the Basic Psychology course at the UNED

Professors

Ms. Arriero, Esther

- ♦ European specialist psychologist in Psychotherapy for the EFPA in the CEP Health Center of Talavera de la Reina
- ♦ Health Psychologist
- ♦ Master in Time-Limited Psychotherapy and Health Psychology
- ♦ Specialist in Adult Therapy. Specialist in interventions with chronic patients

Dr. Benito de Benito, Luis. M.D.

- ♦ Medical Specialist of the digestive system
- ♦ Physician Hospital San Chinarro and specialist in Endoscopy
- ♦ Master in Time-Limited Psychotherapy and Health Psychology
- ♦ Lecturer at Navarra University

D. Cuesta, José María

- ♦ European specialist psychologist in Psychotherapy for the EFPA in the CEP Health Center in Talavera de la Reina
- ♦ Expert in psychological intervention of chronic illnesses
- ♦ Psychologist of the Alzheimer's Association
- ♦ Master in Time-Limited Psychotherapy and Health Psychology

Dr. Martínez Lorca, Alberto

- ♦ Specialist in nuclear medicine. Rey Juan Carlos University Hospital - Madrid. Madrid. Spain

Gandarias, Gorka

- ♦ Health Psychologist
- ♦ European specialist psychologist in Psychotherapy by the EFPA in Vitoria, Spain
- ♦ Master in Time-Limited Psychotherapy and Health Psychology

Ms. Gascón, Laura

- ♦ European specialist psychologist in Psychotherapy for the EFPA in the CEP Health Center in Talavera de la Reina
- ♦ Specialist in Forensic and Legal Psychology
- ♦ Court Psychologist. Master's Degree in Time-Limited Psychotherapy and Health Psychology

Ms. González, Mónica

- ♦ Psychologist in charge of the Department of Child and Adolescent Psychology in the Quirón Hospital and Avatar Psychologists in Marbella
- ♦ Master's degree in Time-Limited Psychotherapy and Health Psychology by the European Institute of Time-Limited Psychotherapy

D. De Dios González, Antonio

- ♦ Director of Avatar Psychologists
- ♦ Director of the Psychology Department of Quirón Hospital of Marbella
- ♦ Master's degree in Time-Limited Psychotherapy and Health Psychology by the European Institute of Time-Limited Psychotherapies

Dr. Martínez-Lorca, Manuela

- ♦ Doctorate in Psychology from the University of Castilla-La Mancha
- ♦ Health Psychologist. Lecturer at the Department of Psychology at the UCLM
- ♦ Master's degree in Time-Limited Psychotherapy and Health Psychology by the European Institute of Time-Limited Psychotherapies

Ms. Roldán, Lucía

- ♦ Health Psychologist
- ♦ Cognitive-behavioral intervention specialist
- ♦ Master's Degree in Time-Limited Psychotherapy and Health Psychology

05

Structure and Content

The contents of this specialization have been developed by different professors with a clear purpose: to ensure that our students acquire each and every one of the necessary skills to become true experts in this field. The program of this Advanced Master's Degree enables you to learn all aspects of the different disciplines involved in the field. A complete and well-structured program that will take you to the highest standards of quality and success.



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Through a well-organized program, you will be able to access the most advanced knowledge that will allow you to provide more specific treatments”

Module 1. Framework of Clinical Psychology for Children and Adolescents

- 1.1. Child and Adolescent Psychological Disorders
- 1.2. Communication Paths Between the Normal and the Pathological
 - 1.2.1. Symptoms as a Means of Expression
 - 1.2.2. Differences Between Major and Minor Psychological Problems
- 1.3. Etiology of Mental Disorders in the Child and Adolescent Population
- 1.4. Characteristics of Psychiatric Illness in Childhood and Adolescence

Module 2. Children, Adolescents and Family

- 2.1. Aspects to Consider
 - 2.1.1. Communication and Family
 - 2.1.2. Language in the Home?
- 2.2. Characteristics of the Pathological Family
 - 2.2.1. Pathological Management of Children from the Family
 - 2.2.2. Childhood Rejection
 - 2.2.3. Abandonment of and Aggression Towards a Minor
- 2.3. Modern Family Structures
 - 2.3.1. Identical and Non-Identical Twins
 - 2.3.2. The Sibling of a Sick Child
 - 2.3.3. The Importance of the Place of Birth
- 2.4. Grandparents, Aunties and Uncles
- 2.5. Family Types and their Implication on Child and Adolescent Psychopathy
- 2.6. Parent-Child Bonds
- 2.7. Stress, Family Workings and Psychopathology in Children and Adolescents
 - 2.7.1. Family Stress Factors with Dysfunctional Behavior Patterns
- 2.8. Death of a Parent in Childhood and Adolescence

Module 3. Evaluation Process and Psychodiagnosis in Childhood and Adolescence

- 3.1. Introduction
- 3.2. The Interview
 - 3.2.1. Definition and General Aspects
 - 3.2.2. Framework of Psychological Evaluation
 - 3.2.3. Interviewing Tactics
- 3.3. The Structured Clinical Interview
 - 3.3.1. Differences and Similarities Between Evaluation and Intervention
 - 3.3.2. Diagnostic Process
 - 3.3.3. Diagnostic Objectives
- 3.4. Evaluation of Intelligence
 - 3.4.1. Intellectual Level for the Intelligence Test
 - 3.4.2. Multiple Intelligences
 - 3.4.3. Emotional Intelligence
- 3.5. Evaluation of Motor Activity
 - 3.5.1. Acquisition of Motor Skills
 - 3.5.2. Laterality and Fine Motor Skills
- 3.6. Language Evaluation
 - 3.6.1. Vocabulary
 - 3.6.2. Written and Spoken Language
 - 3.6.3. Expression and Communication
- 3.7. Family Evaluation
 - 3.7.1. Closed Family Systems
 - 3.7.2. Open Family Systems
 - 3.7.3. Family Rules
 - 3.7.4. Family Rituals
 - 3.7.5. Types of Family Homeostasis
- 3.8. New Perspectives on the Diagnosis of Mental Illnesses



Module 4. Psychopathology in Childhood and Adolescence

- 4.1. Child and Adolescent Psychic Structure - Part 1
- 4.2. Child and Adolescent Psychic Structure - Part 2
- 4.3. Neurodevelopment Disorders
 - 4.3.1. Intellectual Disability
 - 4.3.2. Autism Spectrum Disorder
 - 4.3.3. Attention Deficit and Hyperactivity Disorder
 - 4.3.4. Specific Learning Disorder
 - 4.3.5. Language Disorders
 - 4.3.6. Motor Disorders
 - 4.3.7. Tic Disorders
- 4.4. Psychotic Disorders
 - 4.4.1. Delirious Disorders
 - 4.4.2. Brief Psychotic Disorder
 - 4.4.3. Schizophrenia
 - 4.4.4. Schizoaffective Disorder
- 4.5. Cyclothymic and Bipolar Disorder
- 4.6. Depressive Disorder
 - 4.6.1. Severe Depression
 - 4.6.2. Dysthymia
 - 4.6.3. Premenstrual Dysphoric Disorder
- 4.7. Anxiety Disorders
 - 4.7.1. Separation Anxiety Disorder
 - 4.7.2. Mutism
 - 4.7.3. Specific Phobia
 - 4.7.4. Social Anxiety Disorder
 - 4.7.5. Panic Disorder
 - 4.7.6. Agoraphobia
 - 4.7.7. Generalized Anxiety Disorder
 - 4.7.8. Substance-Induced Anxiety Disorders

Module 5. Psychopathology in Childhood and Adolescence II

- 5.1. Obsessive Compulsive Disorder
- 5.2. Trauma and Stress-Related Disorders
- 5.3. Dissociative Disorders
- 5.4. Somatic Symptom Disorders
- 5.5. Eating and Food Intake Disorders
- 5.6. Excretory Disorders
- 5.7. Sleep-Wake Disorders
- 5.8. Gender Dysphoria
- 5.9. Impulse-Control and Behavior Disorders
- 5.10. Substance Abuse and Addictive Disorders

Module 6. Personality Disorders in Childhood and Adolescence

- 6.1. Introduction
- 6.2. Approach to the Concept of Personality Disorders in the Child and Adolescent Population
- 6.3. Clinical Framework of Personality Disorders in the Child and Adolescent Population
- 6.4. Clinical Aspects
- 6.5. Paranoia Spectrum Disorders
 - 6.5.1. Untrusting Individuals
 - 6.5.2. Worried Individuals
- 6.6. Schizophrenic Spectrum Disorders
 - 6.6.1. Solitary Individuals
 - 6.6.2. Individuals Who Don't Feel Pleasure
- 6.7. Schizotypal Spectrum Disorders
 - 6.7.1. Socially Excluded Individuals
 - 6.7.2. Disconcerted Individuals
- 6.8. Antisocial Spectrum Disorders
 - 6.8.1. Violent Individual
 - 6.8.2. Aggressive Individuals
 - 6.8.3. Unscrupulous Individuals
- 6.9. Borderline Personality Disorders
 - 6.9.1. Self-harming Individuals
 - 6.9.2. Challenging Individuals

- 6.10. Histrionic Personality Disorders
 - 6.10.1. Theatrical Individuals
 - 6.10.2. Unstable Individuals
- 6.11. Narcissistic Spectrum Disorders
 - 6.11.1. Selfish Individuals
 - 6.11.2. Egocentric Individuals
- 6.12. Avoidant Personality Disorders
 - 6.12.1. Phobics
 - 6.12.2. Disabled Individuals
- 6.13. Dependant Personality Disorders
 - 6.13.1. Submissive Individuals
- 6.14. Obsessive-Compulsive Spectrum Disorders
 - 6.14.1. Ritualists
 - 6.14.2. Perfectionism
- 6.15. Time-Limited Psychotherapy. Therapeutic Suggestions for Personality Disorders

Module 7. Intervention from The Perspective of Clinical Psychology in Childhood and Adolescence Disorders

- 7.1. Behavior Modification Techniques
 - 7.1.1. Use of Praise
 - 7.1.2. Use of Ignoring Certain Behaviors
 - 7.1.3. The Broken Record Technique
- 7.2. Praise Appropriate Behavior
- 7.3. Token Economy
- 7.4. Functional Analysis
- 7.5. Systemic Therapy
 - 7.5.1. Managing Resistance
 - 7.5.2. Clarify and Recap
 - 7.5.3. Circular Questions
- 7.6. Family Sculpting
- 7.7. Narrating Metaphoric Stories
- 7.8. Prescriptions: Healing Processes
- 7.9. Original Prescriptions

- 7.10. Strategic Therapy and Constructivism
 - 7.10.1. "I Don't Have To"
 - 7.10.2. Worst-Case Scenarios
 - 7.10.3. Losing Opportunities
- 7.11. Restructuring
- 7.12. Use of Resistance
- 7.13. Paradox
- 7.14. Time-Limited Psychotherapy
- 7.15. Meeting and Marking Phase
- 7.16. Unframing and Displacement Phase
- 7.17. Restoration and Resolution Phase

Module 8. Tools for intervention

- 8.1. Play
- 8.2. Drawing
- 8.3. Metaphors and Stories
- 8.4. Psychodrama
- 8.5. IT Resources
- 8.6. Fantasy, Relaxation and Hypnosis
- 8.7. *Biofeedback* Techniques
- 8.8. Relationship Problems
 - 8.8.1. With Parents
 - 8.8.2. With Siblings
- 8.9. Education Far Away From Parents
- 8.10. Children Affected by Conflictive Parent Relationships
 - 8.10.1. Conflictive Relationships with the Spouse or Partner
- 8.11. Family Breakdown Due to Separation or Divorce
 - 8.11.1. Heightened Level of Emotion Expressed in the Family
- 8.12. Grief
- 8.13. Abuse
- 8.14. Abuse
- 8.15. Educational Problems
- 8.16. Work Problems
- 8.17. Home or Economic Problems
- 8.18. Problems from Living Alone
- 8.19. Exposure to Catastrophic Events

Module 9. Psychodiagnosis and Assessment of the Family System

- 9.1. Anthropological, Historical, Sociological and Psychological Perspective of the Family
- 9.2. Diagnosis as a Catalyst for the Therapeutic Bond
- 9.3. Assessor Skills
 - 9.3.1. Be Useful in the Process
 - 9.3.2. Understand What is Happening
 - 9.3.3. Be Open and Understanding
 - 9.3.4. Become a Figure of Authority
- 9.4. Psychodiagnosis and Assessment of the Family System
 - 9.4.1. Language
 - 9.4.2. Pathological and Healthy Bonds
 - 9.4.3. Use of Others
 - 9.4.4. Rejection and Abandonment
 - 9.4.5. Stress, Distress and Eustress
 - 9.4.6. Conflicts and Tensions
 - 9.4.7. Family Psychopathology
- 9.5. Place in the Fraternity and Social Desirability
 - 9.5.1. Family Composition
 - 9.5.2. The Right to Have Siblings
 - 9.5.3. Twins
 - 9.5.4. The Sick Sibling
 - 9.5.5. Grandparents, Uncles and Aunties
 - 9.5.6. Other Components
- 9.6. Psychodiagnostics Objectives
 - 9.6.1. Evaluator and Evaluatee Link
 - 9.6.2. Discover What Truly Exists
 - 9.6.3. Clarify the Facts
 - 9.6.4. Explain the Scientific Facts of the State of the Subject
 - 9.6.5. Understand the Relationship Between the Individual in the Study and the Situation Experienced

- 9.7. Millon Clinical Multiaxial Inventory (MCMI-III)
 - 9.7.1. Modifying Scales: Desirability and Alteration Index
 - 9.7.2. Basic Personality Scales: Schizoid, Avoidant, Depressive, Depressive, Dependent, Histrionic, Narcissistic, Antisocial, Aggressive-Sadistic, Compulsive, Passive-Aggressive, Self-Destructive
 - 9.7.3. Severe Personality Scales: Schizotypal, Borderline and Paranoid
 - 9.7.4. Moderate Clinical Syndromes: Anxiety, Hysteriform, Hypomania, Depressive Neurosis, Alcohol Abuse, Drug Abuse, P-Trauma Stress D
 - 9.7.5. Severe Clinical Syndromes: Psychotic Thinking, Major Depression and Psychotic Delirium
- 9.8. Cattell 16 PF-5
 - 9.8.1. Agreeableness, Reasonableness, Stability, Dominance, Encouragement, Attention to Standards, Boldness, Sensitivity, Vigilance, Abstraction, Privacy, Apprehension, Openness to Change, Self-sufficiency, Perfectionism and Tension. Incorporate a "Social "Desirability" (SI), an "Infrequency" (IN) and an "Acquiescence" (AQ) Scale to Control Response Bias
- 9.9. Child and Adolescent Assessment System BASC
 - 9.9.1. Internalized problems: Depression, Anxiety, Social Anxiety, Somatic Complaints, Obsessive-Compulsion and Post-Traumatic Symptomatology
 - 9.9.2. Externalized Problems: Hyperactivity and Impulsivity, Attention Problems, Aggressiveness, Defiant Behavior, Anger Control Problems, Antisocial Behavior
 - 9.9.3. Specific Problems: Developmental Delay, Eating Behavior Problems, Learning Disabilities, Schizotypy, Substance Abuse
- 9.10. Questionnaire for the Evaluation of Adopters, Caregivers, Guardians and CUIDA
- 9.11. Personality Assessment Inventory (PAI)
 - 9.11.1. 4 Validity Scales (Inconsistency, Infrequency, Negative Impression, Positive Impression)
 - 9.11.2. 11 Clinical Scales (Somatic Complaints, Anxiety, Anxiety-related disorders, Depression, Mania, Paranoia, Schizophrenia, Borderline traits, Antisocial traits, Alcohol problems, and Drug problems)

- 9.11.3. 5 Scales of Consideration for Treatment (Aggression, Suicidal Thoughts, Stress, Lack of Social Support, and Refusal of Treatment)
- 9.11.4. 2 Scales of Interpersonal Relationships (Dominance and Agreeableness)
- 9.11.5. 30 Subscales Providing More Detailed Information
- 9.12. Study of the Story's Credibility
 - 9.12.1. CBCA System (Criteria-Based Content Analysis)
 - 9.12.2. The *Statement Validity Assessment* (SVA) Udo Undeutsch
 - 9.12.3. SVA = Interview + CBCA + Validity Checklist

Module 10. The Family Interview

- 10.1. The Interview in a Clinical and Expertise Setting
 - 10.1.1. Information Theory
 - 10.1.2. Communication Channels
 - 10.1.3. Communication System
- 10.2. Axioms of the Interview
 - 10.2.1. It is Impossible Not To Communicate
 - 10.2.2. Content and Relationship
 - 10.2.3. Affective Value
 - 10.2.4. Digital and Analog Communication
 - 10.2.5. Symmetry and Asymmetry
- 10.3. Exploring Communication
 - 10.3.1. Verbal Communication
 - 10.3.2. Non-Verbal Communication
 - 10.3.3. Double Bond
 - 10.3.4. Psychopathology of Communication
 - 10.3.5. A Gesture is Worth a Thousand Words
- 10.4. Medical History
 - 10.4.1. Personal
 - 10.4.2. Family
 - 10.4.3. Generational
- 10.5. Anamnesis from Limited-Time Psychotherapy
 - 10.5.1. Psychopathological Biography

- 10.5.2. Biography of Medical Diseases
- 10.5.3. Biography Social Problems
- 10.6. General Structure of the Mental Examination
 - 10.6.1. Non-Verbal Communication and Emotions
 - 10.6.2. Communication Around The Table
- 10.7. Semiology, Signs and Symptoms
 - 10.7.1. Signs
 - 10.7.2. Symptoms
- 10.8. Epistemology of Diagnosis
 - 10.8.1. Descriptive Syndromic Diagnosis Versus Disease
 - 10.8.2. Nosology Categorical Versus Dimensional Diagnosis
- 10.9. Multiple Diagnoses and Comorbidity
- 10.10. Clinical vs. Research Criteria
- 10.11. Expert Interview

Module 11. Family Stress

- 11.1. New Ways to Define Stress
- 11.2. Common Stressors in the Family
 - 11.2.1. Relationship
 - 11.2.2. Living Conditions / Environment
 - 11.2.3. Economic
 - 11.2.4. Emotional
 - 11.2.5. Pathologies of Family Members
 - 11.2.6. Abuse and Violence
 - 11.2.7. Separation and/ or Abandonment
- 11.3. Interpersonal Stress
- 11.4. Toxicity and Family
 - 11.4.1. With Substances
 - 11.4.2. Without Substances
 - 11.4.3. Dependency
- 11.5. The Information Retrieval Process: The Transfer of Learning
- 11.6. Occupational Stress
- 11.7. Learning and Family Events
- 11.8. Family Crises

Module 12. Family Bonds and Systemic Organization

- 12.1. Family Functions
- 12.2. Family Institution
 - 12.2.1. Life Cycle of the Family
 - 12.2.2. Family Law
 - 12.2.3. Legal Nature
 - 12.2.4. Family Characteristics
- 12.3. Types of Family
 - 12.3.1. Conjugal Family
 - 12.3.2. Matriarchal Family
 - 12.3.3. Patriarchal Family
 - 12.3.4. Gang Family
 - 12.3.5. Inverted Family
 - 12.3.6. Extended Family
- 12.4. Family Characteristics to Promote or Hinder Learning
- 12.5. Family Structure Variables
- 12.6. Dysfunctional Family
- 12.7. Family Reactions to Illness
- 12.8. Pathological Management of Children from the Family
- 12.9. Consequences of Family Composition
- 12.10. Morphology of Family and the Implication on Psychopathy
- 12.11. Family and the Socialization Process
- 12.12. Intervention in a Dysfunctional Family
- 12.13. Conflict Inheritance
- 12.14. Concept of Accompaniment, Containment and Escort

Module 13. Family Models and Parenting Roles

- 13.1. Separation, Divorce and Nulled Marriage
- 13.2. Disability from the Expert's Point of View
 - 13.2.1. Deficiency, Disability and Handicap
 - 13.2.2. Civil Incapacity and Labor Incapacity
 - 13.2.3. Degrees of Permanent Disability
 - 13.2.4. Major Disability
- 13.3. Gender-Based Violence
 - 13.3.1. Psychological Violence
 - 13.3.2. Psychological Consequences of Violence
- 13.4. Abuse
 - 13.4.1. Confirmation
 - 13.4.2. Psychological Consequences
 - 13.4.3. Causal Nexus
- 13.5. Secondary Victimization
 - 13.5.1. Credibility of Testimony
 - 13.5.2. Difficulty of the Psychological Opinion
- 13.6. Psychopedagogical Drug Addiction Expertise
- 13.7. Elderly Expert
- 13.8. Profile of the Basic Emotion "Guilt" in Current Research

Module 14. Modes of Intervention in Family Therapy

- 14.1. Notion of Conflict
 - 14.1.1. Changing the Attitude Towards Team Cooperation
 - 14.1.2. Improve Attitude
 - 14.1.3. Emphasizing Performance
- 14.2. Types of Conflict
 - 14.2.1. Attraction-Attraction
 - 14.2.2. Evasion-Evasion
 - 14.2.3. Attraction-Evasion

- 14.3. Family Mediation
 - 14.3.1. Mediator is Present, Does Not Have an Influence
 - 14.3.2. Arbitration Makes Decisions by Listening to the Parties
 - 14.3.3. Neutral Evaluation Draw Consequences From the Data Obtained
- 14.4. Family Coaching
 - 14.4.1. Equalities
 - 14.4.2. Differences
 - 14.4.3. Contradictions
 - 14.4.4. Impersonation
- 14.5. Learning in Coaching
 - 14.5.1. Declaring Bankruptcy
 - 14.5.2. Stripping Off the Masks
 - 14.5.3. Re-Engineering Ourselves
 - 14.5.4. Focusing on the Task
- 14.6. Habits to Improve in Coaching
- 14.7. Focused on the Activity
 - 14.7.1. Focusing Techniques
 - 14.7.2. Thought Control techniques
- 14.8. Clear Goals
 - 14.8.1. Definition of Where We Are
 - 14.8.2. Definition of Where We Want to Be
- 14.9. Taking the Reins in Your Life Being Proactive
- 14.10. Positive Psychology
- 14.11. Conflict Management with the Conscious Emotional Bonding (CEB) Model
 - 14.11.1. Identifying Emotions
 - 14.11.2. Identifying Suitable Emotions
 - 14.11.3. Changing Emotions for Others
- 14.12. Training to Deal with Conflicts in the Family

Module 15. Family Problems Which Need Interventions

- 15.1. Behavior Modification Techniques
- 15.2. Cognitive-Behavioral Therapy
- 15.3. Treatment Oriented Towards the Family
- 15.4. Other Focus of Systemic Family Treatment
- 15.5. Strategic Therapy and Constructivism

Module 16. Types of Expertise and Contexts that Surround Psychological Expertise

- 16.1. Definitions Regarding Appraisal
- 16.2. Adoptions
- 16.3. Care and Custody
- 16.4. Simulation



A comprehensive specialized program that will take you through the necessary training to compete with the best in your profession"

06

Methodology

This academic program offers students a different way of learning. Our methodology uses a cyclical learning approach: **Relearning**.

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.



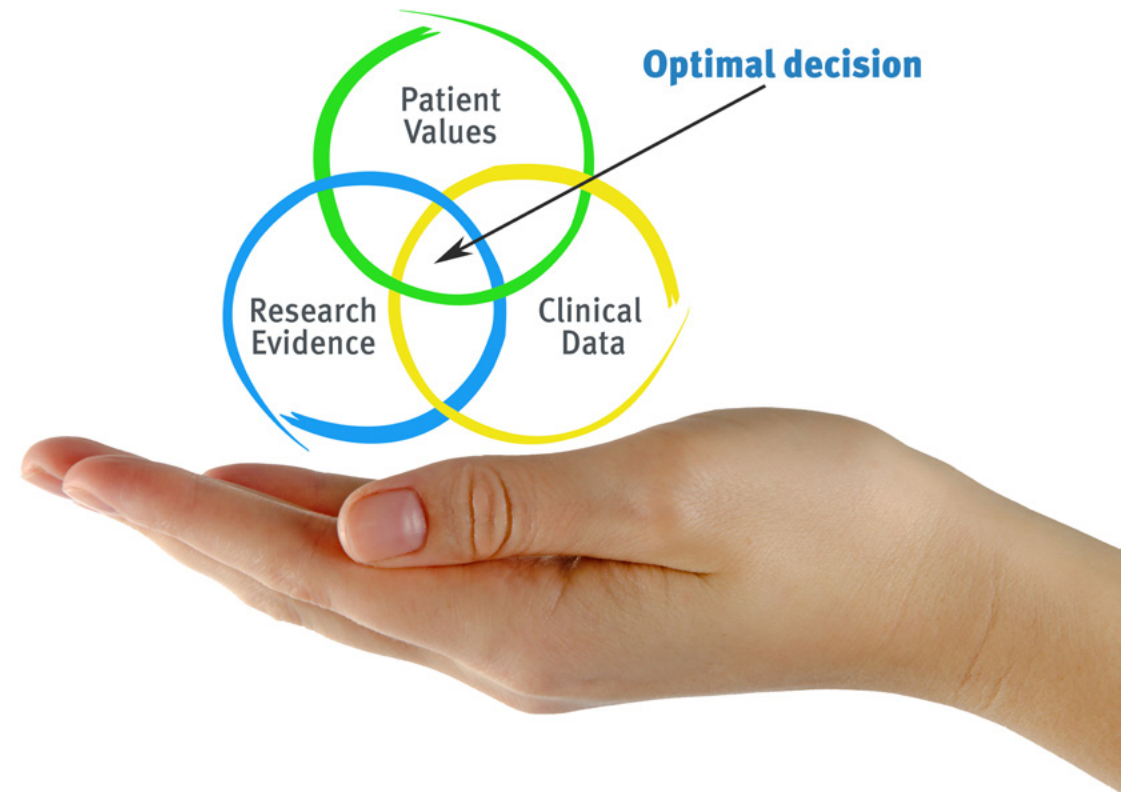
“

Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"

At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

With TECH the psychologist experiences a way of learning that is shaking the foundations of traditional universities around the world.



According to Dr. Gérvás, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the psychologist's professional practice.

“

Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method”

The effectiveness of the method is justified by four fundamental achievements:

1. Psychologists who follow this method not only master the assimilation of concepts, but also develop their mental capacity by means of exercises to evaluate real situations and apply their knowledge.
2. Learning is solidly translated into practical skills that allow the psychologist to better integrate knowledge into clinical practice.
3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

Our university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, which is a real revolution compared to the simple study and analysis of cases.

The psychologist will learn through real cases and by solving complex situations in simulated learning environments.

These simulations are developed using state-of-the-art software to facilitate immersive learning.



At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

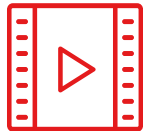
This methodology has trained more than 150,000 psychologists with unprecedented success in all clinical specialties. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

*Relearning will allow you to learn with less effort
and better performance, involving you more
in your training, developing a critical mindset,
defending arguments, and contrasting opinions: a
direct equation for success.*

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by our learning system is 8.01, according to the highest international standards.

This program offers the best educational material, prepared with professionals in mind:



Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is highly specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



Latest Techniques and Procedures on Video

TECH introduces students to the latest techniques, to the latest educational advances, to the forefront of current psychology. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



Interactive Summaries

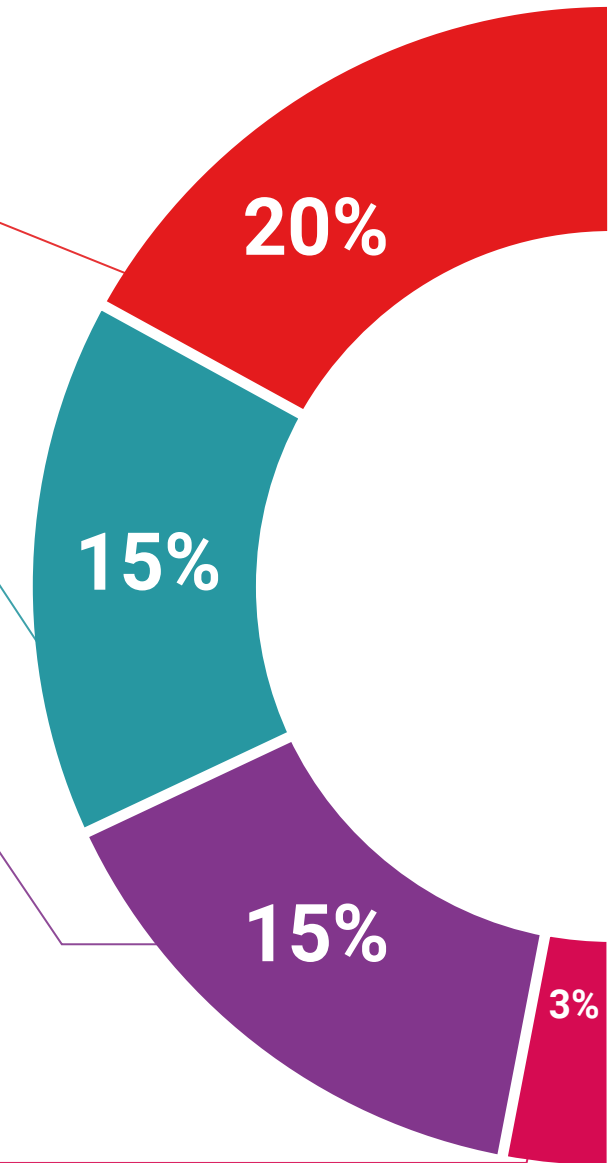
The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

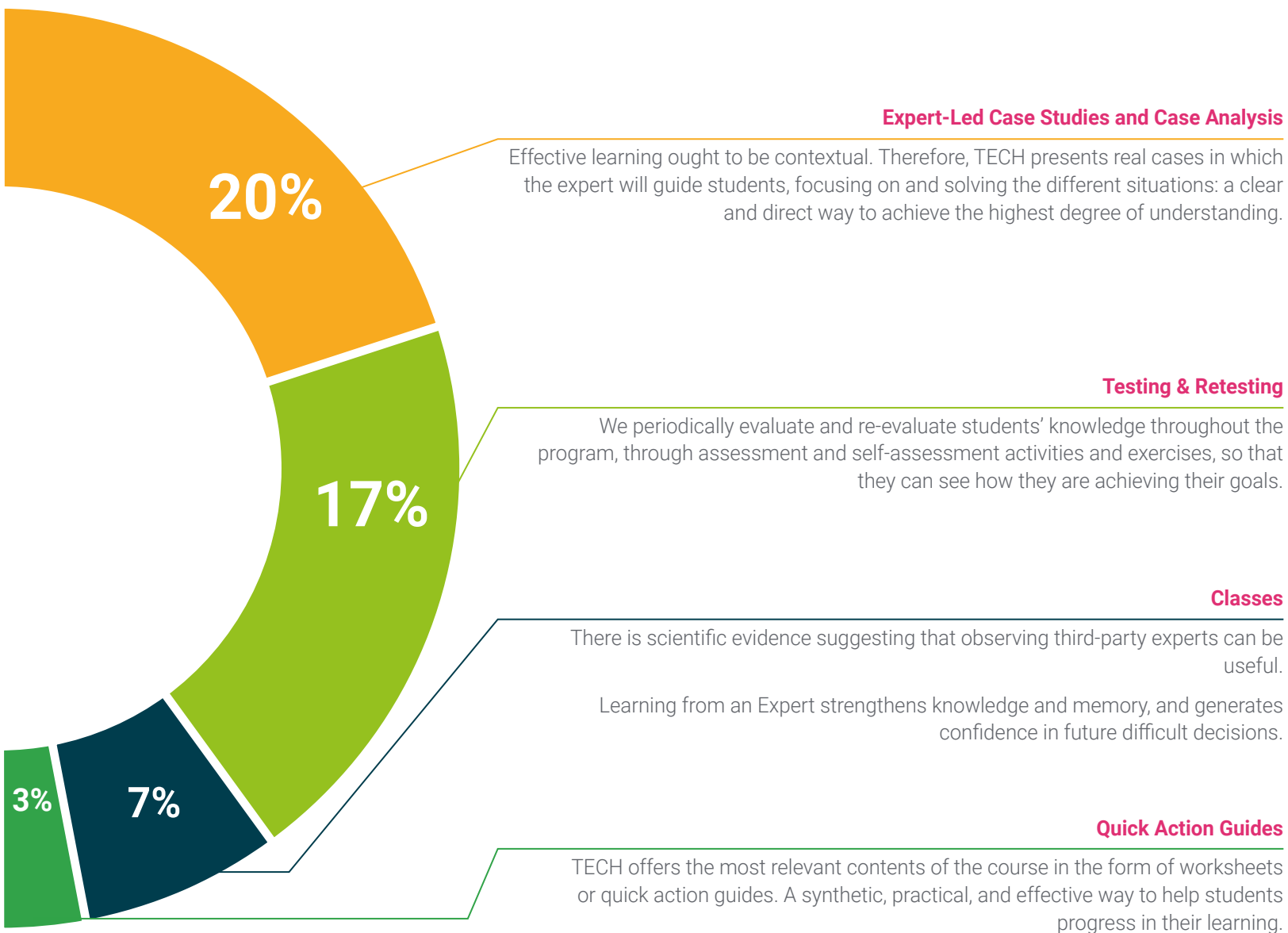
This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.





07

Certificate

The Advanced Master's Degree in Clinical Child and Adolescent Psychology and Family Therapy guarantees students, in addition to the most rigorous and up-to-date education, access to a qualification issued by TECH Global University.



“

This Advanced Master's Clinical Child and Adolescent Psychology and Family Therapy is the greatest compendium of knowledge in the field: a high-value added qualification for all professionals in this area”

This private qualification will allow you to obtain a This program will allow you to obtain your **Advanced Master's Degree diploma in Clinical Child and Adolescent Psychology and Family Therapy** endorsed by **TECH Global University**, the world's largest online university.

TECH Global University is an official European University publicly recognized by the Government of Andorra ([official bulletin](#)). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

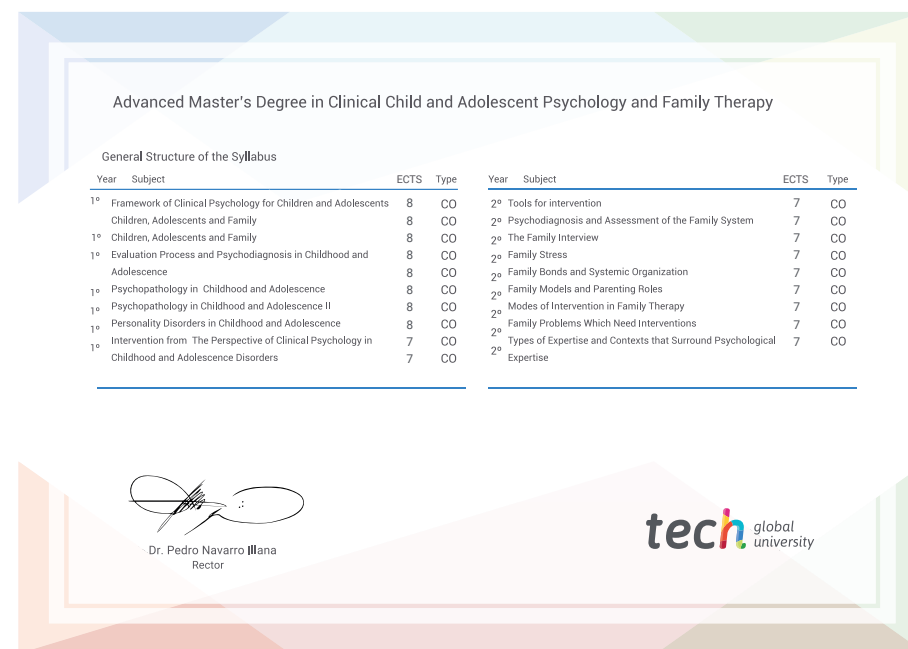
This **TECH Global University** private qualification is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: **Advanced Master's Degree in Clinical Child and Adolescent Psychology and Family Therapy**

Modality: **online**

Duration: **2 years**

Accreditation: **120 ECTS**





Advanced Master's Degree
Clinical Child and Adolescent
Psychology and Family Therapy

- » Modality: online
- » Duration: 2 years
- » Certificate: TECH Global University
- » Credits: 120 ECTS
- » Schedule: at your own pace
- » Exams: online

Advanced Master's Degree Clinical Child and Adolescent Psychology and Family Therapy