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Student Satisfaction With an Innovative Internship

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Abstract

This article describes an internship program designed specifically to meet graduate students' training needs within the context of their work in a prevention program for children in foster care. An internship based on a strong model of intern recruitment and supervision, structured inclusion of interns in a supportive agency culture, a manualized orientation, and an ongoing didactic program, was hypothesized to result in a positive experience for interns. Results of anonymous surveys administered to 102 interns over a 9-year period assessing their internship experience are presented and discussed. Recommendations are made for development of internship training sites.

Field education has long been considered the optimal setting for social work students to integrate classroom learning into their burgeoning professional skill set. Field placements, also referred to as internships, are strengthened when what is taught in the classroom can be directly applied to practice. The Council on Social Work Education (CSWE) designation of field education as the “signature pedagogy” of the profession has highlighted the important role that field placements play in the overall education of social work students. This is evidenced by the amount of time spent in social work internships; Bachelor of Social Work (BSW) students are required to spend a minimum of 400 hours, and Master of Social Work (MSW) students are required to spend a minimum of 900 hours in their internships (as outlined in the 2008 Educational Policy and Accreditation Standards by the Council on Social Work Education; CSWE, 2008).

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Fortune and Abramson (1993) and Kanno and Koeske (2010) found that the quality of supervision was often the most powerful predictor of MSW students' satisfaction in their internships, while several other studies have documented effective supervision as one of the most important components of a successful internship (Alperin, 1998; Bogo & Vayda, 2000; Giddings, Vodde, & Cleveland, 2003; Knight, 1996, 2000; Raskin, 1982). In addition to effective supervision, several other elements are necessary for a successful internship, including a positive agency climate and a sense from interns that they are contributing to an organization that values them and their work (Grady, Powers, Despard & Naylor, 2011). Additionally, an opportunity to combine classroom learning with field experience results in a more beneficial and positive internship experience for students (Grady et al., 2011).

What is the optimal way to structure an internship that maximizes positive student experiences and minimizes challenges? What resources are needed? How satisfied are interns with such an experience? This paper describes a field placement within a program called Fostering Healthy Futures (FHF) that has a well-developed and manualized orientation, supervision, and ongoing didactic training for interns. The FHF program was specifically designed as a training site for social work interns and, from its inception, has drawn upon factors known to promote successful internships. This paper describes components of the FHF internship that were hypothesized to lead to a positive field experience for interns and reports the results of anonymous surveys that the interns completed throughout the internship year. An internship based on a strong model of supervision, a structured way to include interns in a positive agency culture, and an ongoing manualized didactic program, was hypothesized to result in a positive experience for interns.

Program Overview

The FHF clinical program includes 9 months of mentoring and skills groups for preadolescent children who have been maltreated and placed in out-of-home care. The program is designed to promote children's well-being by identifying and addressing mental health issues, preventing adolescent risk behaviors, and promoting competence. Please see Taussig, Culhane and Hettleman (2007), for a complete description of the program.

The mentoring component of the program is provided by graduate students, primarily in social work, who are each paired with two children for whom they provide weekly one-on-one mentoring. In addition to spending weekly individual time with children, the intern role involves interacting with the children's adult caregivers and advocating for children's needs with other involved professionals. The graduate students' "mentoring" satisfies their internship requirements, as they work 18–20 hours a week over a 9-month period. The children's weekly therapeutic skills groups are conducted by experienced clinicians and trainees, who do not serve as mentors in the program. There are 8 children in each skills group, balanced by gender. In addition to their weekly individual mentoring visits, interns transport their two "mentees" to and from the skills groups. When the children are participating in their one-hour skills group, the interns are participating (separately) in clinical group supervision. When the hour is finished, the interns and their supervisors join the children and their group leaders for dinner before the interns drive the children home. The skills group curriculum is manualized, and each week, intern/mentee pairs are given

activities to help the children generalize what they are learning in skills group to the real world. Children create “lifebooks” with the interns that include these weekly activities. The lifebooks also serve as a scrapbook and journal of children’s time in out-of-home care and enable them to chronicle their hopes and dreams for the future. At the end of the 9-month program, the children graduate from the program and both the skills group and mentoring components end.

Study Methods

This study will describe the components of the FHF internship and the rationale for the methodology employed. The paper will include quantitative and qualitative (i.e. open-ended responses) data gathered from anonymous surveys administered to interns after orientation and at program completion. The surveys were administered to 102 interns over a 9-year period.

Participant characteristics are as follows. The sample of 102 interns was 90% female. Interns were primarily Caucasian (93%), 3% were African American, 4% were Hispanic, 3% were Asian, and 1% were Native American (non-exclusive categories). Interns came from 6 different graduate programs and a majority (78%) of the interns were enrolled in the first year of their graduate programs during their participation in the FHF project. The majority (86%) of the interns were never married. A little more than half of the interns were employed during the academic year, with a range from 3 to 32 hours/week worked.

The following measures were used. Project-designed surveys asked interns to rate aspects of the FHF training experience. These questions were rated on Likert scales and frequencies were used to describe the interns’ responses. The questions varied from year to year and therefore the number of interns responding to each question varied as well. The number of respondents for each question is given in the tables. Interns were also asked to respond to open-ended questions; quotes are used throughout the paper to illustrate their perceptions, based on their responses to these open-ended questions.

The Internship Experience

Each summer, the FHF program recruits, interviews, and accepts up to 16 graduate student interns who will mentor children in out-of-home care. The internship is designed as a comprehensive field placement which involves extensive hands-on education, intensive clinical supervision, and didactic training, focused on working with this high-risk population.

In their work on the FHF program, interns are each paired with two children (and their families). Spending 2–4 hours a week of individual time with each child (and working with collateral adults in the children’s lives) enables interns to observe the child’s experiences through a variety of lenses. Interns work with professionals from all systems in which the children are involved including child welfare, mental health, legal, school, and extracurricular. When children begin the program, they are all in out-of-home care. Throughout the year, however, children change placements, return home to their biological parents or families, are adopted, or are maintained in the same home. If children change

placements or reunify with their parents during the 9-month program, their participation in FHF continues with appropriate consent. This provides interns with the opportunity to assist children in transitions to new homes, schools, and communities.

The FHF intern's role includes meeting with adult caregivers to offer them support and to learn their perspectives of their child's strengths and needs. While there is no formal program for caregivers, interns interface weekly with caregivers during pick-up and drop-off for mentoring visits and group. They report on children's progress in the FHF program and work with caregivers to advocate on behalf of their children in academic and other domains. Depending on the family's needs and interests, some interns have the opportunity to interact in greater depth with the adult caregivers. Assessing this potential need and designing strategies for supporting caregivers is regularly discussed in both individual and group supervision.

Interns are expected to set up meetings with caseworkers, teachers, and other involved professionals to learn more about each child and how best to support them collaboratively. Supervisors in the FHF program provide interns with a list of questions to help guide their initial meetings with these professionals. By meeting with relevant adults, interns gain experience interacting with other professionals and build relationships that can be used for advocacy as needed. Advocacy might include helping children voice their hopes to a caseworker regarding an upcoming placement decision or asking a teacher what steps the school can take to best support a child's learning style.

The mentoring and advocacy activities in which interns engage are designed to:

1. Create empowering relationships with children, serving as positive examples for future relationships.
2. Ensure that children receive appropriate services in all domains and support children as they face challenges within various systems while building on their strengths and interests.
3. Help children apply skills (such as anger management, perspective taking, and problem solving) learned in weekly skills groups to the "real world" by integrating topics into individual mentoring activities. The goal is that these skills will transfer to other settings such as school and home.
4. Engage children in a range of extracurricular, educational, social, cultural, and recreational activities.
5. Promote attitudes that foster a positive future outlook.

The intern "match" process takes several months. The FHF program has strong working relationships with several universities, and is able to recruit the highest quality graduate students from schools of social work as well as psychology. The children's safety and well-being is paramount, and for this reason, graduate students who apply to the FHF program undergo a series of intensive interviews beginning with an initial phone screening to determine if the student's interests and goals are a good fit with the opportunities and responsibilities of the FHF internship. Prior to being invited for an interview, students are

provided literature about all aspects of the program as well as a written explanation of the internship requirements and responsibilities. In-person interviews are scheduled with a minimum of two FHF staff members who ask questions regarding the applicant's background, interests, strengths, goals, experience with supervision, goals for clinical supervision, and areas of needed growth. Applicants are also given scenarios that consist of situations that may arise in their work with children and families, and they are asked to brainstorm how they might respond to such challenges. Experience has shown that successful applicants are open to learning, have an interest in working with preadolescent children, show initiative and motivation, have strong interpersonal skills, and demonstrate clinical insight.

After the selection process, interns participate in a 3-day orientation at the beginning of their internship and they continue with intensive training and supervision throughout the academic year. Interns are trained in their role responsibilities as well as methods for limit setting, establishing and maintaining appropriate boundaries, working with families from different cultures, mandated reporting and protecting confidentiality.

Interns complete anonymous surveys (described above) to provide feedback on the supervision and didactic training they receive. Interns also provide feedback in individual and group supervision and in informal discussions and meetings with program staff. All of this feedback is given careful consideration by the FHF team and programmatic changes are made based on the interns' feedback, as appropriate.

Orientation

Orientation lays the foundation for the entire intern learning experience. How well initiated, supported, and prepared students feel at the conclusion of the orientation (and subsequent start of their internship year) will dramatically impact their attitude as they embark on their new learning experience. Knight (2001) found that students typically perceived great benefit from early learning activities that taught about the agency and their role expectations.

At the beginning of orientation, a welcome breakfast is provided to the interns and is attended by all agency personnel. FHF's 30-hour manualized orientation is primarily comprised of intensive in-person training, incorporating discussions, lectures, handouts, videos, and interactive activities. Orientation topics covered are provided in Table 1. Interns are provided materials in a binder to use during both their orientation and work throughout the year.

The binder includes FHF policies and agency information, materials regarding recognizing and responding to child maltreatment, glossary of child welfare terms, goals and structure of the internship, journal articles, skills group materials, the NASW Code of Ethics and "tips" for a good internship experience.

The intensive three-day FHF orientation strives to build trust among students as a group as well as between students and supervisors. Responses to three quantitative questions about orientation are shown in Table 2. The majority of students reported that they "strongly agreed" that they felt prepared for their role as a mentor, that orientation was productive, and

that it met their expectations. When asked on the open-ended questions what was liked most about orientation, one student reported, “The thought and preparation made prior to meeting really made me feel confident about working with this group and that I’ll be learning what I really need to.” Another shared that their favorite part of orientation was, “Getting to know the other mentors and the staff that will be supporting us and being encouraged to always ask questions.”

Didactic

Once field placement begins, interns participate in a weekly didactic, or seminar session. These sessions are designed to continue the education begun during orientation and to supplement individual and group supervision that occurs throughout the internship. The weekly didactic session is typically a 1–2 hour meeting for the 30 weeks of the internship. The goals of the didactic program are threefold: (1) To share instrumental/pragmatic information with the interns, (2) To convey information and generate discussion on topics relevant to their immediate internship work, and (3) To ground their work in the broader community context, including local and national policies. Half of the presenters are research and clinical staff with the FHF program, while the other half consist of outside speakers who are experts on the topic on which they are presenting.

Examples of pragmatic didactic sessions include a detailed session on completing paperwork, taking the HIPAA course, and training in how to complete forms for reimbursement. The more traditional didactic or “learning” sessions comprise the bulk of the 30 weeks, and consist of topics relevant to the interns’ daily work in the field, such as principles of behavior change, the impact of maltreatment on attachment, suicide assessment, secondary trauma, impact of substance use, family violence, navigating the educational system, and how to interpret psychological evaluations. Topics that demonstrate the broader context of the interns’ work include: (1) a day in the life of a caseworker, (2) the Dependency and Neglect court process, and (3) child welfare policies regarding permanency. There are also “special” didactic sessions that include case conference presentations by interns, a visit to the courthouse to watch Dependency and Neglect hearings, and observing a multidisciplinary hospital-based child protection team meeting. The didactic sequence culminates in an “intern reunion” where interns from the prior year return to talk with the current interns about their experiences in ending the relationships with their clients and looking for subsequent internships and jobs.

Although the didactic portion of the interns’ training is institutionalized into the program, there is some flexibility as to the content incorporated each year. Out of the 30 didactic sessions, 14 are consistent year-to-year, leaving room for variation in the schedule. This allows the FHF program to bring in speakers on topics that are salient for the current years’ interns such as the impact of methamphetamines on parental functioning, child welfare policy and the culture of poverty.

While the didactic component of the FHF program adds additional hours to the interns’ already time-intensive internship, it is a strength of the program for multiple reasons. As previously discussed, internships are strengthened when what is taught in the classroom can be directly applied to practice. Didactic sessions are designed as participatory to increase

intern engagement. Didactic sessions do not include homework, although supplementary optional readings are given by some of the speakers that are designed to be resources for additional information.

The inclusion of speakers from the community enables interns to learn about opportunities outside of the agency and to network with experts in their areas of interest. Didactic speakers represent a range of training backgrounds (e.g., social work, counseling, clinical psychology, social psychology, medicine, legal) and these individuals are often conducting clinical work in unique settings that open up new possibilities for interns to consider for their future work. Outside speakers also provide a broader perspective of what is happening in many diverse areas of the community. This allows the interns to map their fieldwork onto what is happening throughout the human service community.

Studies of social work students have demonstrated that feelings of self-efficacy increase students' satisfaction with field placement (Kanno & Koeske, 2010). In addition, a study of students in an aging-focused practicum found that those who received coursework in aging demonstrated better knowledge than students who did not receive a didactic component (Birkenmaier, Rowan, Dmaron-Rodriguez, Lawrence, & Volland, 2009). It is the FHF program's philosophy that the training provided through both orientation and didactic sessions, coupled with outstanding group and individual supervision, serve to bolster students' feelings of competence and knowledge regarding their clinical work, thereby improving their interactions with children and families.

Studies have also found that students report greater satisfaction with their internship experiences if they are able to synthesize and integrate their classroom experiences with their clinical work (Fortune, McCarthy, & Abramson, 2001; Knight, 2001), which is the goal of the didactic program. The CSWE's Policy and Accreditation Standards (2008), <http://www.cswe.org/Accreditation/2008EPASDescription.aspx>, state that the social work curriculum should lead to critical thinking, valuing diversity and promoting human rights and social justice. While these core competencies are being introduced in the students' respective social work programs, they are being strengthened through their fieldwork in the FHF program, and the didactic component is critical to this development (Grise-Owens, Cambron, & Valade, 2010). Through their didactic experience, students are able to: (1) take a step back from their individual clinical work and reflect on what they are doing in a broader context, (2) integrate the theories they are learning in the classroom with the work that they and others are doing in the field, and (3) stay up-to-date on current practices in human service settings.

Interns' ratings of some of the consistent didactic topics are shown in Table 3. As shown, interns found almost all of the presentations to be "good" or "excellent" and found them very relevant to their work on the project. In addition, the majority (76%) of interns felt that the amount of time spent in didactic training was "just right," with 20% indicating it was "too much," and 4% indicating it was "too little." Overall, the interns seemed to greatly value didactic sessions, despite the fact that it took additional time. Although most internships do not have a weekly, structured didactic component, this seemed to be a strength of the FHF field placement, according to the interns.

Supervision

In addition to weekly didactic sessions, each intern in the FHF program receives scheduled and structured individual and group supervision. Good supervision is a core element of internships that are effective in both training future clinicians and providing high quality services. Defining good supervision involves identifying its multiple components, which may include reflective listening, reference to ethical and legal guidelines, teaching how to conduct thorough assessments, goal setting and intervention skills, linking theory to practice, as well as guiding the supervisee in their development of a strong professional self. The supervisory relationship must have qualities that enable trust, self-reflection and growth, and promote feedback. It has been demonstrated that quality supervision enables students to "... feel empowered and have a higher level of confidence and efficacy, resulting in better work performance and a sense of satisfaction in the field" (Kanno & Koeske, 2010, p.31).

In the FHF program, each intern is provided two hours/week of structured supervision; one hour is individual and one is group-based. To ensure consistency, supervision meetings are scheduled at a protected time and occur in a comfortable, confidential space that ensures few distractions. Group supervision, facilitated by the interns' individual supervisor, is provided for a group of four interns and occurs during the time when their mentees are in their skills group in an adjacent room. After an hour of group supervision, interns and their supervisor join the mentees and group leaders to share dinner. In the FHF model, supervisors are afforded the unique opportunity to interact directly with their supervisees' mentees and observe their supervisees interacting with the children. This provides further opportunities for the supervisor to assess the mentees' interactions with those around them as well as assess the intern's interactions with their mentees.

While supervisors are encouraged to infuse their own experience and style of facilitating supervision, there are certain tenets underlying the purpose and approach to supervision that are uniform within the program. These shared beliefs among supervisors are developed, revised, and maintained via the weekly supervisors' Clinical Meeting. This meeting, which includes supervisors and group facilitators, provides the participants support, accountability, peer consultation and a larger pool of ideas on how to respond to supervisory impasses. The primary goals of the Clinical Meeting include consultation regarding client and intern issues, child welfare calls or psychiatric emergencies, developing plans for system-level interventions, and identifying administrative topics to be addressed with all interns. FHF supervisors and group leaders jointly facilitate this meeting as peers, and collaboratively construct its weekly agenda. The importance of this peer consultation regarding supervisory issues is not to be overlooked. In their study of a training program for supervisors, Kaiser and Kuechler (2008) note that post-training responses from participants emphasized "...the value of talking with other supervisors and having the opportunity to consult on their own situation" (p. 92). Other studies have detailed the benefits of peer group supervision by finding that participants "...gained in both the understanding and practice of supervision. They also experienced professional and personal gain with increased confidence and decreased isolation being two important examples" (Getz & Agnew, 1999, p. 59).

The FHF approach to supervision includes a belief that interns learn best with a mixture of support, instruction, and encouragement to develop their own ability to reflect on their

practice. The relationship aspect of the supervision process is believed to be critical. As Pack (2009) notes, quality supervision requires the development of a relationship characterized by mutual trust and safety so that students can experience and express the full range of their feelings and thoughts regarding their clinical work. Trust in the supervisory relationship promotes reflective exploration of their experience and increased openness to feedback (p. 659–660). Throughout the intervention, FHF supervisors focus on building trust and encouraging self-reflection among their interns. FHF supervisors spend time during the start of the supervisory relationship articulating this expectation.

Part of what enables feedback and self-reflection in FHF supervision sessions is the establishment of clear expectations of the supervisory relationship from the start. As each supervisory relationship commences, FHF supervisors work with the intern to establish their own personal learning goals, referring back to these goals throughout the internship. Supervisors discuss expectations held by both themselves and the intern and work to establish a verbal contract for supervision.

Because interns deliver the FHF intervention in the community during a range of hours, supervisors are available on-call for emergencies and critical decision-making (e.g., calling the abuse hotline) whenever interns are in the field. Since supervisors also can serve as group leaders, a team approach is presented to interns with their supervisor as the primary resource and the clinical team as backup in case the primary supervisor is temporarily unavailable. Another aspect of the supervisor-intern relationship discussed early on is how differences between the supervisee and supervisor will be negotiated. Supervisors invite interns to consider and discuss if they anticipate any barriers to working with their supervisor based on the lens from which they may be viewing clinical material. This establishes an expectation that different perspectives, based on culture or other identity attributes, are valued and open to discussion within the supervisory relationship. When it is time for intern evaluations to be completed, FHF supervisors ask interns to provide feedback on ways the supervisor can help improve the supervisory experience for the intern.

In addition to reflective practice, supervisors emphasize teaching specific skills for intervening with children and caregivers and provide regular and systematic feedback. The FHF model of supervision resonates with Davy and Beddoe's (2009) Reflective Learning Model in finding "a middle ground between didactic teaching and instruction in supervision on one hand and boundary-less reflection on the other" (p. 932). FHF supervisors focus on providing both support and specific feedback that may challenge interns' thinking regarding their clinical work and the interns' own reactions to the process. The effectiveness of constructive feedback as an aid to learning has been demonstrated in numerous studies (Westberg & Jason, 1993). Because a relationship of trust is established and supervisors strive to ensure that feedback is specific, regularly given, and delivered with empathy, many interns experience feedback as useful and growth promoting.

In addition to individual supervision, each FHF intern attends weekly group supervision with their supervisor and 3 other interns. The supervisor facilitates the group supervision with input from the interns. Each supervision group tailors its own structure but all include a check-in, the development of agenda items, and facilitated group discussion of members'

agenda items. Members are encouraged to formulate a question or the type of feedback they are requesting before outlining the clinical situation they wish to discuss. Group members are encouraged to give constructive feedback and to make connections to their own clinical practice in ways that may be helpful to the member who raises an issue. Group supervision affords interns the opportunity to practice giving feedback to colleagues which contributes to building their confidence and skills related to their developing professional self. Another benefit of group supervision is vicarious learning. Since students in the FHF program work with two mentees for an academic year, hearing about the challenges and successes with other mentees as well as the interventions tried by peers allows a greater breadth of learning than could be achieved by individual supervision alone.

The combination of individual and group supervision enables a wide range of learning experiences and sources for feedback. Walter and Young (1999) completed a study of combining the two modalities of supervision and corroborated previous research findings that the strengths of group supervision included "...providing multiple sources of feedback" and enhancing "students' abilities to apply more theoretical classroom learning to practice with their clients in a way that was not experienced in individual supervision" (p. 86). According to their findings, students in group supervision "...were more free of their own counter transference reactions, and they could consider alternative theoretical perspectives" (Walter & Young, 1999, p. 86). This dovetails nicely with individual supervision where they found "students are more comfortable 'being vulnerable' and discussing work that has been difficult and/or problematic for them" (Walter & Young, 1999, p. 86). Others have noted that students in group supervision may find it harder to reveal weaknesses and negative feelings and thoughts in the context of group supervision compared to individual supervision (Kadushin, 1992). By combining the two forms of supervision, FHF interns are able to benefit from the strengths of each.

One of the ways that FHF supervision may differ from other field internships' supervision is that its field instructors are hired to primarily or exclusively provide supervision. As opposed to managing a caseload and taking on a graduate intern in addition to existing responsibilities, the FHF supervisors' job focus is on training interns and making sure high quality services are being provided to program participants via supervisory activities. Additionally, having a weekly meeting for supervisors to discuss supervisory issues and concerns enables FHF supervisors to reflect on their practice as field instructors, experience burnout-preventing support from peers, and do the same depth of growth-promoting work that is expected from the interns.

As shown in Table 4, the majority of respondents found individual (68.1%) and group (58.0%) supervision "Very Helpful" and less than 5% rated either type of supervision as "Not at All Helpful." In addition, 80% felt the amount of time in group supervision was "Just Right." Almost 90% of the interns indicated that their relationship with their supervisor was "Positive," and 95% indicated that they felt "Supported" or "Very Supported" at the field placement. In terms of qualitative responses to the open-ended questions, interns were similarly positive about their experiences, stating they were, "supported yet challenged," "guided" and "respected." They described FHF as a "growth experience," and one intern stated, "I could make mistakes and feel okay acknowledging

that and learning what to do different next time.” When asked what they most appreciated about their supervision experience at FHF, student responses were characterized by comments such as, “Everything—a time to process, help with difficult situations, making connections;” “Receiving feedback, getting another viewpoint, critical analysis, very intelligent supervisors;” and “Being able and encouraged to honestly share my thoughts or biases and challenges”.

Conclusions

FHF designed an internship program based on factors that have been determined to contribute to internship success and satisfaction. The results from the interns’ surveys demonstrate that, on the whole, the training program was successful in meeting the perceived needs and supporting graduate student interns, most of who were first-year students. This is reflected particularly in the ratings on the final questions (Table 5) of the end-of-year survey, in which two-thirds of the students said the internship was relevant to their graduate work and two-thirds reported that the internship exceeded their expectations.

Interestingly, interns rated the internship high despite 40% of them indicating that they spent “too many hours” on field placement. As a result of this feedback, the FHF program worked with the university to increase the number of academic credits that interns could receive for the FHF internship. This was instituted in the 7th year of the program. Subsequently, when students were interviewing for the internship position, program staff told prospective interns that the internship required more hours than most. In the years following the credit increase, none of the students rated the number of hours spent on field placement as “too many”.¹ Despite some interns’ dissatisfaction with the workload, the other ratings suggest that a demanding, rigorous internship that challenges students can be perceived as beneficial.

In another study of FHF alumni interns’ perceptions of the FHF internship several years after they completed the program (Taussig, Culhane, Raviv, Schnoll Fitzpatrick, & Wertheimer, 2010), former interns compared FHF to their other graduate internship sites. FHF was rated “above average” on every index. Specifically, the alumni reported FHF as above average on the amount of supervision (78% reported above average), the quality of individual supervision (82%), the quality of group supervision (76%), and the quality of training through orientation and didactic (90%). Although we cannot compare the FHF interns’ ratings to the ratings of interns from other internships, the fact that FHF interns felt that the FHF internship was above average on every index suggests that the FHF internship was perceived as a stronger training experience than their other internship experiences.

Although it might be argued that this type of internship experience only meets the needs of interns interested in pursuing a career working with high-risk youth, the diversity of interns’ interests for their second-year internship and eventual career (as shown in Table 6) demonstrate otherwise. The FHF interns secured second-year internships in diverse settings and were interested in pursuing similarly diverse careers, including administration, public

¹It should be mentioned that the survey changed from a 3 point to a 5 point scale at the same time that the credit increase occurred. After the scale change, no student checked the “too many” hours rating that had been checked with some frequency in the past.

policy work, and school-based work. While the majority of interns were interested in direct clinical work, nearly a quarter were not interested in pursuing this work long term. Again, this suggests that an internship such as FHF can meet the needs of a diverse graduate student body, when there is solid training and supervision.

The FHF internship differs from more traditional internships in several important ways. First, it is not often the case that internship supervisors can devote all of their time to student supervision and training. In the FHF program the supervisors are hired to work exclusively with students and they also participate in consistent peer supervision groups for the supervisors. Another unique design element of the FHF program is that the interns play an integral part of service delivery. The program was designed around the internship role. While other organizations may host a group of interns from a variety of universities, it is unusual for all of the interns to be fulfilling the same role with clients, as is the case in the FHF program. Typically when there are several interns in one agency the interns are placed in different divisions and departments or they fulfill different roles within their internship. By having all of the students interning at FHF in the same role with client systems within one project, supervisors and other program staff are able to provide supervision, structure weekly didactic training and other opportunities that are geared to the needs of all students. The internship design also allows for supervisors to be able to have weekly observations of their interns' interactions with the mentees.

Based on intern feedback and program experience, many priorities and resources were identified that are needed to provide the components necessary for a quality internship. These recommendations for developing quality internship sites include the following:

1. Prioritize an internship within an institution, both from a financial and programmatic viewpoint.
2. Ensure that there are financial resources to provide quality supervision (e.g., through grant funding or institutional support).
3. Create a rich learning environment.
4. Guarantee that staff is available for recruiting, screening, training and supervising students. This may require additional financial support to hire supervisors and/or assignment redistribution to allow staff to adequately supervise interns.
5. Ensure that students feel welcome by having many people from the organization (in addition to their supervisors) welcome and support the interns.
6. Recognize that the interns are students and not employees.
7. Provide a thorough orientation to the agency and program.
8. Provide adequate space and the necessary tools to complete their tasks.
9. Provide additional training opportunities both within and outside of the organization.

The planning and resources needed for this type of comprehensive internship program are considerable, yet the benefits are clear, not only for the interns, but also for the clients with

whom they work. Benefits identified by interns included time management and advocacy skills, learning to recognize good supervision, learning about child development and how to work effectively with children and their families and other involved professionals, learning to work as part of a team and within multiple systems, becoming more aware of how their own issues affected their practice and finally, learning patience. These benefits were described by the interns when they were asked on anonymous surveys to report what they had learned most from the internship. As one intern stated, “FHF is a structured internship, with a lot of built in support (didactic, individual supervision, group supervision, etc.). It is a good place to learn about yourself and grow as a social worker/counselor/etc., while also better understanding the systems (school, child welfare) in which we may work in the future.” Another intern reported, “I’ve learned that every ‘case’ has a face and a heart”.

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Table 1**FHF Orientation Topics**

1	Overview of the foster care system, including statistics, placement options and legislation
2	Mandatory abuse reporting, including requirements and post-report system responses
3	Cultural awareness and culturally competent practice
4	Goals of the interns' position
5	Structure of the field placement
6	Effective and non- effective interventions
7	Overview of the therapeutic skills group curriculum and goals
8	Clinical policies such as clinical documentation or out-of-program contact between child participants
9	Interpersonal communication styles
10	Safety; being aware of one's surroundings and how to effectively get help
11	Review of programmatic policies such as driving children and drop-off policies
12	NASW Code of Ethics' sections boundaries, focusing on the importance of a professional's awareness, perspective and attitude when working with children and families.
13	Secondary/vicarious trauma
14	HIPAA compliance

Table 2

Orientation Survey Responses

Survey Question	Disagree	Agree	Strongly Agree
I feel prepared to start in my role as mentor with the FHF program (n=48)	0%	37.5%	60.5%
I feel like the time spent in orientation was worthwhile and productive (n=48)	2.1%	27.1%	70.8%
I feel that orientation met my expectations (n=48)	0%	38.8%	61.2%

Table 3**Didactic Survey Responses**

Didactic Topic	Poor	Fair	Good	Excellent
Principles of Behavior Change (n=75)				
Overall Opinion of Presentation		1.33%	40.00%	58.67%
Usefulness of Information to Your Work		1.33%	26.67%	72.00%
Sexual Issues in Preadolescent Youth (n=59)				
Overall Opinion of Presentation		1.69%	22.03%	76.27%
Usefulness of Information to Your Work		1.69%	20.34%	77.97%
Prevention of Deviance Training (n=79)				
Overall Opinion of Presentation		3.80%	40.51%	55.70%
Usefulness of Information to Your Work		1.28%	1.28%	70.51%
Impact of Family Violence (n=39)				
Overall Opinion of Presentation		3.13%	43.75%	53.13%
Usefulness of Information to Your Work		0.00	18.75%	81.25%
Court Process in Child Welfare (n=77)				
Overall Opinion of Presentation		3.90%	54.55%	41.56%
Usefulness of Information to Your Work		3.95%	32.89%	64.47%
Use of Psychological Evaluations (n=51)				
Overall Opinion of Presentation		0.00	27.45%	72.55%
Usefulness of Information to Your Work		1.96%	21.57%	76.47%
Suicide Assessment (n=52)				
Overall Opinion of Presentation		0.00	26.92%	73.08%
Usefulness of Information to Your Work		1.92%	19.23%	78.85%
Attachment in Maltreated Youth (n=82)				
Overall Opinion of Presentation		3.66%	23.17%	73.17%
Usefulness of Information to Your Work		2.74%	16.44%	80.82%
Impact of Substance Use on Families (n=58)				
Overall Opinion of Presentation		0.00	3.45%	96.55%
Usefulness of Information to Your Work		1.75%	10.53%	87.72%
Secondary Trauma (n=77)				
Overall Opinion of Presentation		6.49%	15.58%	77.92%
Usefulness of Information to Your Work		2.60%	15.58%	81.82%
Visit Courthouse/View Proceedings (n=22)				
Overall Opinion of Presentation		4.55%	22.73%	72.73%
Usefulness of Information to Your Work		4.55%	22.73%	72.73%
Termination with Clients (n=56)				
Overall Opinion of Presentation		0.00	10.71%	89.29%
Usefulness of Information to Your Work		0.00	1.79%	98.21%

Table 4

Survey Responses to Questions about Supervision

Survey Question	Not at All Helpful	Helpful	Very Helpful
Individual Supervision (n=47)	2.1%	29.8%	68.1%
Group Supervision (n=93)	3.8%	38.2%	58.0%
	Too Little	Just Right	Too Much
Time Spent in Group Supervision (n=93)	2.1%	80.1%	17.8%
	Very Negative	Neutral	Positive
Relationship with My Supervisor (n=47)	2.1%	9.6%	88.3%
	Not at All Supported	Supported	Very Supported
Level of Support at this Field Placement (n=94)	4.2%	35.9%	59.9%

Table 5

Survey Responses to General Questions about the Internship

	Too Few	Just Right	Too Many
Number of Hours Spent on Field Placement (n=92)	0%	59.8%	40.2%
	Not Relevant	Relevant	Very Relevant
Relevance of Field Placement to Graduate Work (n=93)	2.2%	35.9%	64.1%
	Did Not Meet My Expectations	Met My Expectations	Exceeded My Expectations
This Field Placement (n=92)	4.3%	29.3%	66.4%

Table 6

Survey Responses Regarding Subsequent Field Placement and Eventual Work (n=96)

Likely to Include:	Second Year Field Placement	Eventual Social Work Practice
Direct Clinical Work	72.1%	78.4%
Case Management	46.5%	49.0%
Administration	14.0%	32.4%
Legislative/Public Policy	4.7%	28.4%
Department of Human Services	17.4%	15.7%
In a Community Agency	23.3%	46.1%
In a Mental Health Center	22.1%	51.0%
In a School	23.3%	39.2%
In a Hospital – Medical Side	9.3%	30.4%
In a Hospital – Psychiatric Side	20.2%	32.4%
With Children	67.4%	84.3%
With High-Risk Youth	55.8%	60.8%
With Adults	50.0%	43.1%
With Families	69.8%	80.4%