I. Catalogue Description

Social Work Practice in Aging and Mental Health prepares front line social workers to address mental health needs of older adults and their family members. The course examines common mental health conditions, assessment, planning, evidence-based individual, family and group interventions, resources, cultural competence, ethical issues, and contexts for practice.

II. Course Overview

The rapid growth in the aged population expected during the next 20 years will require a significant increase in the number of social workers trained to work with elders. While all social workers should possess basic knowledge regarding the biological, psychological and social aspects of later life, effective gerontological social workers must also understand the unique challenges facing this diverse population, the mental health issues confronting them, and effective interventions to address their needs. They will need to enhance their interpersonal, counseling, and advocacy skills for assisting older adults, and their support systems. They must possess the ability to assess and intervene at multiple levels with attention to the socio-cultural-context, social justice and human rights. In addition, they must role model respect and compassion for older persons and guard against a paternalistic approach.

This course meets the Advanced Practice requirement for the Advanced Generalist Curriculum. The focus or context for this Advanced Practice course is Aging. For non-Aging focus area students, this course may be taken as an elective.

NOTE: This course may be of particular interest to students in the health and mental health focus areas.

It is assumed that students enter this course with basic knowledge regarding the physiological, psychological and social aspects of the later years of life. This course will focus on social work practice as it relates to mental health in later life. Various roles of the social worker are examined with particular attention given to the development of skills and techniques of one-to-one, family and group interventions in a variety of settings. The continuum of services and resources available to older adults, and the roles and functions of the social worker in these settings are examined. The unique needs and experiences of diverse populations with attention to age, gender, cultural variation and sexual orientation will be integrated throughout the course with attention to mental health care disparities, social justice and human rights. Students will be encouraged to think critically about an array of situations, ethical issues and cases frequently seen by social workers in practice.

III. Course Competency, Description and Dimensions Chart

Social Work Education is framed by a competency-based approach to curriculum design. At the conclusion of their education, social work students are expected to be competent in 9 core areas. Competency is achieved through mastery of course content as measure through course activities, readings and assignments and behaviors learned in field experiences, and which are derived from social work knowledge, values, skills and cognitive and affective processes. The competencies addressed in this course can be found in Appendix A.
IV. Course Content

Week 1: Thursday, September 7

Welcome and Introductions
Syllabus and Assignment Review
Overview of the Course

INTRODUCTION TO GERONTOLOGICAL SOCIAL WORK AND FACTS OF AGING
Demographic trends: Implications for Social Work
Diversity within the older population
Myths, Stereotypes, and Facts of Aging

Assignment: Future Self-Activity (Posted at Canvas: due week 2): The process of aging is inevitable. We're all aging every second of our lives. As evidence, we are older now than when this class began. "Aging" is not a disease; rather, it is a lifelong process. The only difference between younger persons and older persons is that older adults have been aging longer. Understanding this lifelong process of aging has importance for us as professionals in our interactions with older adults and in our personal lives. Some subjects, like statistics, can be learned on an intellectual basis. However, when we are preparing to work with elders, we benefit from considering aging as a fundamental human condition we all will experience (if we are lucky). This exercise will provide an opportunity to consider our personal expectations and hopes regarding our own aging.

Required Readings
- Chapter 2: Normal Processes of Aging (Skim)
- Chapter 1: The Context of Social Work Practice with Older Adults


Week 2: Thursday, September 14

CONTEXT OF PRACTICE AND FOUNDATIONS OF ASSESSMENT
Practice Interviewing skills for assessment of older adults
Common changes associated with aging and implications for communication
How does communication change between generations?

In Class Activities:
Establishing Rapport
Assessment Scenarios using research informed practice
Video: Coming of Age in Aging America- https://www.youtube.com/watch?v=ZOA1v4-2Fos

NOTE: Future Self Activity due today; Learning Contracts due to Canvas Dropbox by 5:00 PM

Required Readings
- Chapter 2: Biological Changes and the Physical Well-Being of Older Adults
- Chapter 3: Psychological Adjustment to Aging
- Chapter 4: Conducting a Biopsychosocial Assessment
- Chapter 6: The clinical interview

**Recommended Readings**


**Week 3: Thursday September 21**

**INTERDISCIPLINARY TEAMS, CARE MANAGEMENT & TRANSITIONS**

- Working with Interdisciplinary Teams (IDT)
  - What is the role of social work among the IDT
  - Care Management
- Effective communication strategies for social workers
  - How to use your voice to become an effective/valued members of the IDT
  - Effective techniques to improve social worker/physician relationship
  - How does gender, age, or race play a role in communication?
- Transitions
  - Role of social worker in the facilitation of transitions from one level of care to the other

**In-Class Activities:**

- Applying the Capacity Risk Model and Inclusive Model to case scenarios

**Week 4: Thursday September 28**

**DEMENTIA, PART 1: DIFFERENTIAL DIAGNOSIS, SCREENING & ASSESSMENT**

- Overview of Common Causes of Confusion (The 3 Ds, Depression, Delirium and Dementia)
- Screening & Assessment Tools: When to Refer for Formal Testing
- Ethical Issues Surrounding Capacity and Risk Assessments

**In-Class Activities:**

- **Video:** Biomarkers for Alzheimer’s Disease in Down Syndrome: Waisman Center 2016 [https://www.youtube.com/watch?v=aqhaC3R3tP4&feature=youtu.be](https://www.youtube.com/watch?v=aqhaC3R3tP4&feature=youtu.be) (28 minutes)

**Required Readings**

  - Chapter 3: Disorders of aging: Dementia, delirium, and other cognitive problems
  - Ch. 5: Differential Assessment and Diagnosis of Cognitive and Emotional Problems of Older Adults

**Week 5: Thursday October 5**

**NOTE:** Reading and Case Study Analysis Due to Canvas Dropbox by 10:00 AM

**DEMENTIA, PART 2: INTERVENTIONS, NON-PHARMACOLOGICAL TECHNIQUES**

- Redirection; Environmental Changes; Communication Techniques
Validation Therapy
Challenges faced by the LGBT community

**Guest Speaker:** Bonnie Nuttkinson, Alzheimer’s Association: Challenges faced by LGBT couples in providing care for their spouse/significant other (Panel: Rob Marks and Dick Hagen)

**In-class activities:**
Video: Music and Memory Project “Alive Inside” [https://www.youtube.com/watch?v=8HLer-zP3fc](https://www.youtube.com/watch?v=8HLer-zP3fc) (6 minutes)
Administration of evidence based screening tools
Case scenarios

**Required Readings**

**Recommended Readings**


**Week 6: Thursday October 12**

**DEPRESSION AND SUICIDE IN LATER LIFE**
Assessment and treatment of depression
Prevention of suicide
Risk Factors
Race & Gender

**In-class Activities:**
Case Studies and application of Columbia Suicide Risk Assessment tool
Geriatric Depression Scale assessment tool application to case studies

**Required Readings**
• Chapter 4: Mood and anxiety disorders
• Chapter 9: Treatment of depression

• Chapter 8: Suicide among Older Adults section only (pp. 220-227).


**Recommended Readings**
Week 7: Thursday October 19

PARANOIA, SCHIZOPHRENIA AND OBSESSIVE-COMPULSIVE DISORDERS
Assessment and treatment
Cultural differences (age, gender, socioeconomic, ethnic) in understanding & treating hoarding
Pharmacological treatments

In-class Activities:
Pair and share Case studies- recognizing symptoms and social work interventions
Video: OCD - Obsessive Compulsive Disorder: https://youtu.be/KOami82xKec

Required Readings
• Chapter 5: Other common mental health problems in later life
• Chapter 11: Treatment of paranoid symptoms


Recommended Readings


Week 8: Thursday October 26

TRAUMA AND POST TRAUMATIC STRESS
Understanding risk factors
Principles in management and treatment with older adults
Treatment Interventions with Aging Veterans

In-Class Activities:
Case Study using research informed practice
Videos:
EMDR https://www.youtube.com/watch?v=GTLLfdeJE0Q
What PTSD Is Really Like: https://youtu.be/PFW4hYsYF-o

Required Readings


**Recommended Readings**


**Week 9: Thursday November 2**

**PSYCHOPHARMACOLOGY, SUBSTANCE MISUSE AND DEPENDENCE**

- The basics of psychopharmacology
- Polypharmacy
- Geripharmacology:
  - Four Age Related Changes: Drug absorption; Distribution; Metabolism; Elimination
- Alcohol problems in later life
  - Genetic and Racial/Cultural disparities
- Screening, Intervention, Referral, and Treatment

**In-class Activities:**

- AODA Case Studies
- Application of evidence based Screening Tools

**Required Readings**

  - Chapter 8: Substance abuse sections only (pp. 202 - 220).


**Recommended Readings**


**Week 10: Thursday, November 9**

**LIFE REVIEW THERAPY, REMINISCENCE AND DIGNITY THERAPY**

- Theoretical Assumptions
- When and How to Implement these Interventions
- Challenges faced by minorities, developmental disabled, and the LGBT communities

**In-Class Activities:**

- Applying interventions to groups and individuals
Week 11: Thursday, November 16

PERSON-CENTERED INTERVENTIONS
Counseling Older Adults: Context and Method
Mind-Body Interventions to Alleviate Psychological Distress: Relaxation training, Mindfulness
Cognitive Behavioral Approaches to Working with Elders
Challenges faced by LGBT older adults and adaptations to treatment

In-class Activities:
CBT application
Case Study

Required Readings

- Chapter 8: Foundations in treatment

- Chapter 6: (pp. 144-155; the intervention process, sections on CBT).


Recommended Readings


Week 12: Thursday November 23
Week 13: Thursday November 30

WORKING WITH THE FAMILY SYSTEM
Understanding the family caregiving context and consequences
Intervening with the family
Facilitating family conferences and family counseling: When, where and how?
Cultural Differences in decision making
Who is considered family?

In-class Activities:
Role play of family meeting
Case Study

Required Readings
- Ch. 12: Working with Older Adults’ Support Systems: Spouses, Partners, Families, and Caregivers

- Ch. 13: Family Caregiving


Week 14: Thursday December 7

END OF LIFE CONCERNS AND BEREAVEMENT
Palliative Care: From Diagnosis to Death
Advanced Care Planning
Therapeutic Interventions: Dignity Therapy
The role of culture in end-of-life, death and loss

In-class Activity:
Guest Speaker: Mike Bernhagen, Rainbow Hospice: Consider the Conversation

Required Readings
- Ch. 10 Spirituality and Social Work with Older Adults
- Ch. 11 End-of-Life Care for Older Adults

Recommended Readings

V. Texts and Reading Materials for the course (Can be found at the UW Bookstore or on Amazon)
VI. Evaluation: Assignments, Grading and Methods

With respect for adult student’s diverse learning needs, some choice is offered in assignments. Students will review the course assignments and turn in a learning contract indicating the choice of assignments and dates for completion by the second week of class. See “Learning Contract” and description of course assignments for further information.

Assignments Due Dates and Points:

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<th>Assignment</th>
<th>Due Date</th>
<th>Max Points</th>
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<tr>
<td>Reading and Case Study Analysis</td>
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<tr>
<td>Major Assignment of your Choice</td>
<td>By December 7, 2017</td>
<td>40</td>
</tr>
<tr>
<td>Two Minor Assignments of your choice</td>
<td>By December 7, 2017</td>
<td>40 (20 points each)</td>
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<tr>
<td>Participation and Activities</td>
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<td><strong>Total Points</strong></td>
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Assignment Descriptions, Instructions and Grading Criteria:

A. Participation in Class Discussion and Activities (10 Points)

Although class sessions will include a variety of learning methods, there will be an emphasis on active engagement. Students are expected to assume responsibility for their own learning and demonstrate mastery of the weekly readings by raising insightful questions.

Students should bring 1-2 “open-ended” discussion questions to class that stem from the reading (noting page numbers if relevant). Questions will be used to stimulate active engagement in learning.

Participation credit will additionally include:
- Adherence to Class Dialoging Guidelines (see Appendix B)
- Participation in class activities and completion of mini take home assignments - Degree of active participation (see Appendix C)

B. Reading and Case Study Analysis (10 Points)

See description of this assignment in the assignment options packet.

C. Major and Minor Assignments (80 Total Points)

With respect for adult student’s diverse advanced practice learning needs, a variety of assignments are provided from which students may choose their area of foci. Students will be required to review the course assignments and turn in a learning contract indicating the choice of assignments and dates for completion by the second week of class. See “Learning Contract” and description of course assignments for further information. Students will select from the following assignments for a total of 80 points.
**Major Assignments (40 points each; Must select one from the list below)**

- Compare and Contrast 2 Treatment Approaches
- Service Learning – Applied Intervention
- Research Paper

**Minor Assignments (20 points each; Must select two from the list below)**

- Interview Older Adult
- Book Review & presentation
- Group Process Observation & Analysis

**Grades Points:** Grades will be assigned using the following conversion table.

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<th>100 Point Scale</th>
<th>Final Grade</th>
<th>Criteria of Work Quality</th>
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<td>94-100</td>
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<td>Outstanding; surpasses expectations in all areas</td>
</tr>
<tr>
<td>88-93</td>
<td>AB</td>
<td>Very good; surpasses expectations in many areas</td>
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<tr>
<td>82-87</td>
<td>B</td>
<td>Good; meets expectations in all areas</td>
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<tr>
<td>76-81</td>
<td>BC</td>
<td>Fair; meets expectations in some areas; below in others</td>
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<tr>
<td>70-75</td>
<td>C</td>
<td>Poor; below expectations in most areas; not acceptable graduate work</td>
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<tr>
<td>64-69</td>
<td>D</td>
<td>Below expectations in all areas</td>
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<tr>
<td>&lt; 64</td>
<td>F</td>
<td>Fails to meet minimal expectations in all areas; not acceptable work</td>
</tr>
</tbody>
</table>

**Assignment Descriptions**

**READING & CASE STUDY ANALYSIS**

The purpose of this initial assignment is to demonstrate your understanding of the readings and your ability to apply course content to the mental health challenges faced by an elder and their family.

**Instructions:**

1. Review lecture notes from Weeks 1-4 and all required readings for Weeks 1-4
2. Read the attached case study.
3. Given what you have learned from classroom discussion and the readings in a 4-5 page double-spaced (12 pt. font; 1” margins) written report, **use the following headings** to concisely answer these questions:
   a. **Preliminary Assessment (Suspicion):** Given what Vanessa shares with you, what might you initially suspect is causing her mother’s symptoms and why? Be specific and provide and cite evidence from the reading to support your preliminary assessment.
   b. **Engagement & the Clinical Interview:** You will need to do a home visit to initiate the assessment. What will you do in advance to prepare for the interview? How will you approach Mrs. Johnson? What will you want to accomplish during this home visit? What cultural considerations need to be considered?
   c. **Assessment:** Given the little bit of information Vanessa has given you, what else will you want to know and how will you obtain that information?
      i. Please list the various domains that you believe will be important to investigate as part of the assessment to determine the cause of Mrs. Johnson’s symptoms and the most appropriate care plan. Be sure to list the mental status tests and medical tests that you feel should be completed (see Ch. 5 McKinnis, 2014; Ch. 6 in Zarit & Zarit, 2007). [Note: it is acceptable to provide bulleted list of points in response to these particular questions]
      ii. Describe how that data will be collected (and by whom)?
      iii. Provide a brief rationale for the assessment domains that will be included.
   d. **Possible Recommendations:** Assuming your preliminary assessment turns out to be correct, name 2-3 primary recommendations that you might make to Mrs. Johnson and her family?
4. Submit paper to Canvas dropbox by 8:00 a.m. before week 5 of class.

**Daughter Requests Case Manager Consultation for her mother: Mrs. Johnson**

Mrs. Johnson (Mrs. J.) is a 78-year-old, African American woman who lives in a small Midwestern city. About a year ago, her husband died suddenly of a stroke, leaving Mrs. J. to live alone in her home of 52 years. It was the home where she had raised her three children, all of whom graduated from college, have professional careers, and now live in other parts of the state. Her family is a source of pride, and her home has numerous pictures of her children and grandchildren.
About 3 months ago, Mrs. J.’s oldest daughter, Vanessa, got a call from one of the neighbors. Vanessa lives a 4-hour drive from her mother—a drive that can often be longer in bad weather. The neighbor stated that Mrs. J. had walked to the neighborhood store in her pajamas and slippers. Because Mrs. J. has lived in the community for several years, people have been watching out for her since her husband died, and someone gave her a ride back home. Mrs. J. doesn’t drive, and the temperature was fairly chilly that day.

As a result of the call, Vanessa went to Mrs. J.’s home for a visit. Although she and her siblings had been calling Mrs. J. regularly, no one had been to the family home in about 7 months. Vanessa was shocked at what she saw.

Mrs. J. had been a cook in a school cafeteria earlier in life and always kept her own kitchen spotless. But now the house was in disarray with several dirty pots and pans scattered throughout different rooms. In addition, odd things were in the refrigerator such as a light bulb and several pieces of mail. Many of the food products were out of date, and there was a foul smell in the kitchen. Trash covered the counters and floor.

Vanessa contacted her siblings to ask them if their mother had told any of them that she wasn’t feeling well. Her brother, Anthony, remarked that their mother would often talk about Mr. J. in the present tense—but he thought that it was just her grief about his death. The younger brother, Darius, reported that his wife was typically the one who called their mother—about once a month. He didn’t know if there had been any problems—his wife never said anything about it to him.

Vanessa also contacted the pastor of her church, Rev. M. He stated that Mrs. J. had been walking to church on Sundays, as usual, but he did notice that she left early a few times and other times seemed to come to service late. But like the brother, Anthony, he thought that this behavior was probably a grief reaction to the loss of her husband.

A final shock to Vanessa was when she went through her mother’s mail. There were several overdue bills and one urgent notice that the electricity was going to be cut off if the balance wasn’t paid. She owed several hundred dollars in past due heating, electric, and telephone bills.

Vanessa contacted her mother’s primary care physician (Dr. P.) who said that he had last seen Mrs. J. for her regular checkup 6 months earlier and that she had missed her last appointment a week ago. Dr. P. said that her staff had called to make another appointment but that her mother hadn’t called them back yet. Mrs. J. is being treated with medication for arthritis, hypertension, and gastroesophageal reflux (GERD). Her weight was stable, and her only complaint was some difficulty staying asleep at night. Dr. P. reported that her mother’s mood was sad but had improved some in the month before the last visit. The doctor asked about memory and concentration, but her mother denied having any problems with memory.

Imagine that you a case manager at the local Senior Coalition. Vanessa is calling you to seek advice about what to do. She would like you to do an assessment to help her determine what is wrong and how she can best help her mother.

### Possible Grading Criteria

<table>
<thead>
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<td>I. Provides reasonable preliminary assessment</td>
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<tr>
<td>II. Draws upon course content to prepare for engagement</td>
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<td>III. Demonstrates understanding of course content relevant to assessment domains with sound rationale</td>
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</tr>
<tr>
<td>IV. Recommendations appropriate to case example</td>
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<td>V. Quality of Writing and organizational structure of paper grammar, sentence structure, spelling</td>
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COMPARE AND CONTRAST TWO TREATMENT APPROACHES

Generalist social work practitioners must be able to select from a wide range of theories and interventions as appropriate to specific situations. The purpose of this assignment is to allow you the opportunity to a) thoroughly investigate two differing treatment and theoretical approaches to clinical work with older clients experiencing mental health concerns; and b) learn how to apply them to your casework practice.

The Task: Select an older client from your field placement to use for this assignment (Note: if there is not an appropriate case available, locate a case study in the gerontological social work literature). Decide upon two different theoretical approaches and their treatment methods and investigate them thoroughly. Examples may include: cognitive-behavioral, experiential, existential, task-centered, behavioral, client-centered, systems, role, psychodynamic, or nontraditional counseling/therapeutic approaches.

In a 15 page, typed APA style and double-spaced paper:

1) Write a brief summary of the salient issues relevant to the assessment of this older client. Include the primary concerns to be addressed and the goals desired.

2) Propose two detailed treatment plans using the two different theoretical perspectives. Compare and contrast each theoretical approach as it relates to the case presented. Expose the strengths and weaknesses of both theories in their application to your case study.

3) In addition to the already diverse application to older adults, what other cultural considerations need to be considered?

4) Conclude by selecting the approach which you believe is most appropriate for the case cited and defend that choice. Include an APA style reference list.

Grading Criteria

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<td>Appropriateness of selected approach</td>
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TOTAL Score 40
SERVICE LEARNING: Applied Intervention

Many students report that service learning projects provide them with real life, rewarding learning opportunities that go beyond academic concepts to the application of these concepts, and the development of helping skills and therapeutic techniques. This assignment will provide the opportunity to learn more about one of the interventions or approaches explored in class and then carry out the intervention with a willing participant (i.e. one who understands that you want the opportunity to practice and evaluate the intervention). Only select this assignment if you believe it will be feasible to identify an appropriate willing elder, family or group of elders (i.e. if doing a group based intervention).

**The task:**

1. Select an intervention examined in the course that you feel would be feasible to practice, and that you would like the opportunity to further investigate. Options might include reminiscence, life review, dignity therapy, group work, mindfulness approaches, cognitive behavioral approaches, validation, family conferencing).
2. Complete course readings and identify additional resources to help you gain sufficient understanding to practice the intervention with integrity and develop a plan for how you will carry out the intervention.
3. Identify an older client and/or family/group from your field setting or from another social worker (e.g., at a community agency or nursing home), explain the intervention process and secure their permission to participate.
4. Carry out the intervention employing what you have learned from the course and your additional resources.
5. After you carry out the intervention, seek feedback from the elder (family or group) to gain their insights regarding the strengths and limitations, potential benefits, and how it might be improved in the future.
6. Turn in your 10-15 page written report with the following headings:

   a. **Selected Intervention:** What is the intervention you selected to practice and what was your rationale?
   b. **Planning Process:** How did you identify resources to better understand this intervention? What did you learn from your literature search that helped you to develop your plan for carrying out the intervention. Were there cultural diversity related aspects you had to consider?
   c. **Client Selection:** Provide a brief description of the client/family/group that was involved in the intervention (use pseudonyms to protect confidentiality) and how they were identified.
   d. **Implementation Description:** Describe what transpired during the intervention.
   e. **Skills Employed:** What skills did you employ?
   f. **Evaluation of the Intervention:** How would you evaluate the intervention. How did it go? What were the outcomes? What feedback did you receive. What would you do differently in the future. What did you learn from carrying out this intervention.
   g. **Reference list:** Provide a typed APA style reference list including all resources you drew upon (lecture and course readings should be included as appropriate).

**CRITERIA FOR GRADING DISCUSSION ASSIGNMENT**

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<tr>
<th>Grading Criteria</th>
<th>Possible Score</th>
<th>Your Score</th>
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<td>Clarity and support of main points</td>
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TOTAL Score 40

14
The purpose of this assignment is to increase your expertise and knowledge regarding a particular mental health issue in later life and the interventions that are most useful for addressing the problem. You will use the literature to develop a better understanding of the prevalence of the problem and the physical, emotional, and social effects impacts on elders and their families. Some examples of mental health problems in later life and topics appropriate for this paper might include mental illness and homelessness, poverty, AIDS, alcoholism, dementia, chronic mental illness, and elder abuse or victimization. Students should also integrate how the role of gender, race, religious beliefs, and culture influence the chosen mental health issue.

The task: Select a particular mental health or related social problem of interest to you. Critically review the empirical literature on the topic.

In a 12-15 page typed and double-spaced paper in APA style write a paper that attends to the following:

1) A description of the prevalence of a particular mental health issue and related social problem you selected including your rationale for its study. In other words, why is this mental health issue a problem and who (how many) is impacted by it?

2) Discuss important situational or contextual factors associated with the problem. What are the cultural, physical, emotional, or social effects related to this problem?

3) Thoroughly and critically review the relevant treatment, intervention, or service literature in journals of social work and related applied disciplines. What do we know and not know regarding the utility of the various interventions? What are the limitations of prior research on various interventions? What seem to be the most valuable and appropriate interventions for ameliorating this social problem at macro and micro levels?

4) Include an APA style reference list and an Appendix, which lists the specific questions that you developed to guide your investigation.
INTERVIEW WITH AN OLDER ADULT

The purpose of this assignment is to: a) provide an opportunity to practice evidence based communication skills for communicating with older adults; and b) enrich understanding of course content via a face-to-face interview with a selected elder.

The Task:
1. Select a topic relevant to the course objectives. Examples include:
   * Experience of growing older and living with chronic physical or psychological challenges
   * Cultural aspects of gender/race that have influenced them today
   * Effect of mental health issues on family caregivers, how they cope and what do they need
   * Experience with seeking and receiving mental health treatment
   * Factors contributing to psychological well-being in later life
   * Experience with loss and bereavement in later life

2. Review course readings on the topic as relevant
3. Review Learn at UW documents relevant to communication including
   * Handout on “Communication Skills” (by Instructor)
   * Recommended reading “GSA-Evidence based Review of What Works for Communicating with Older Adults.”

4. Develop a list of “open-ended” questions that would allow you to carefully explore the selected topic.
5. Identify a person who is at least 60 years of age and willing to be interviewed.
6. Before beginning the interview, make a copy of the attached consent form. Review the form with the elder carefully explaining the purpose of the interview. One copy of the consent form is for your informant; keep the other copy and attach it to the back of your paper.
7. Conduct the interview, giving special attention to the course materials on communication skills.

In a 5 to 7 page typed and double-spaced paper using APA format to cite your references, use the following headings:

a. **Topic Chosen**: Include: the course topic you chose to explore along with your rationale.

b. **Brief Description of Elder**: Include: concise background info on elder including any demographic info you have (e.g., 89 year old white female), including how you know him/her.

c. **Concise Summary & Synthesis**: Include: Brief summary regarding what you learned during this interview, how it relates to course content or related literature, the implications for assessment or intervention, and how it expanded your understanding of this topic. This synthesis should include references to the academic literature and/or course content.

d. **Communication Skills Reflection**: Include: Brief description and critique of your use of the specific communication skills and approaches you employed referencing the course materials on communicating with older adults.

e. Attach to your report the following: **References** (citing relevant literature and course materials), **Consent form**, & **Appendix** (listing the open-ended questions you explored in your interview):

### Grading Criteria

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<thead>
<tr>
<th>Grading Criteria</th>
<th>Possible Score</th>
<th>Your Score</th>
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<tbody>
<tr>
<td>I. Organization of paper; insightful topic and concise description of elder</td>
<td>5</td>
<td>______</td>
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<tr>
<td>II. Concise summary &amp; synthesis Thoughtful integration and application of course content Cites sources</td>
<td>10</td>
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<tr>
<td>III. Communication skills reflection Insightful description and critique of skills; cites sources Makes good use of communication skills sources</td>
<td>3</td>
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<td>IV. Technical detail Spelling, grammar, syntax References and APA style</td>
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<td>TOTAL Score</td>
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Faculty Sponsor: Jacob Dunn, LCSW

Student's Name___________________________________

I am a social work student at the University of Wisconsin. I am taking a class in which we are learning about older adults. Students in our class are interested in finding out how older adults have adjusted to various changes as they age, how their personal life experiences have shaped their life, and how they view various topics related to our course objectives.

Procedures: I am particularly interested in and would like to talk with you about ____________________________________________________ (fill in depending upon your topic). The interview will last approximately 45 minutes. I will take notes on what you tell me while we are talking because I am required to write a brief summary of the interview for my class.

Your participation in this interview is completely voluntary and you may end the interview at any time if you do not wish to continue. You are not required to answer any questions you do not want to answer. If you find any topic unpleasant or otherwise not to your liking, please tell me and we will go on to another one.

This interview is for educational purposes only. Although I am required to attach this consent form to my paper to ensure that you have consented to be interviewed, I will not share your responses with anyone else, nor will I tell anyone that I interviewed you. The notes I take will be kept locked in my possession until I have finished my written report and will then be destroyed. The class instructor (named above) will read the contents of the written summaries to see what each student learned, but nobody else will see them.

Do you have any questions you would like to ask me before we begin?

___________________________________________                      ___________________
Signature of Student Date

The purpose of the interview has been described to me. I have had a chance to ask the student questions about the interview. I understand that I may end the interview at any time and that I may decline to answer any of the questions asked. I voluntarily consent to participate in this interview.

___________________________________________                      ___________________
Signature of Interviewee Date

One copy for Interviewee
One copy to be attached to paper
BOOK REVIEW and BRIEF PRESENTATION

Objective: The purpose of this assignment is to provide you with an opportunity to explore in greater depth a published book that examines issues of aging that are somehow related to the course objectives (see Appendix A of syllabus).

The task:
1. Choose a book (not used in another course) to enhance your understanding of mental health and aging relevant to the one or more of the course competencies and practice behaviors (first person accounts are acceptable; e.g., a book written by a person with dementia or a family caregiver). Students will choose a book that addresses aspects of race, culture, and gender.

2. In a 5-7 page, double-spaced written report using the following headings, concisely address all of the following content areas:
   a. Author, title, date, publisher, and subject
   b. Rationale for choosing the book
   c. Concise Summary
      Include: purpose of the book; the organization of the book (e.g., number of chapters, topics covered); concise description of what the book was about
   d. Personal reaction
      Include: how the book enhanced your learning, how it helped further your development related to the course competency and practice behavior, and how it impacted you personally and/or professionally
   e. Critical analysis
      Include: overall assessment of strengths and weaknesses with support for your conclusions, and the specific situational and professional contexts in which you would recommend this book

3. On the day you turn in your report, you will do a 5 minute report to the class to highlight what you learned from reading this book.

Sample book titles other students have enjoyed:

Grading Criteria

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<tr>
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<td>II. Personal Reaction</td>
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<td>IV. Clarity in written &amp; Oral Report</td>
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<td>IV. Writing style and Technical detail</td>
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<td>Writing style and Technical detail</td>
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<td>Spelling, grammar, syntax</td>
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<td>TOTAL Score</td>
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</table>

18
BOOK REVIEW/PRESENTATION- Sample titles others have enjoyed:


- *36-Hour Day: A Family Guide to Caring for Persons with Alzheimer Disease, Related Dementias and Memory Loss.* Rabins, P. & Mace, N.


BRIEF GROUP PROCESS OBSERVATION AND ANALYSIS

The purpose of this assignment is to allow you the opportunity to: a) explore empirical research related to group work; b) observe and assess a group in process; and c) exercise your ability to analyze group dynamics, functions, tasks, and process.

The task:

1) Identify a short-term group in your practicum setting or in the community that is provided for older adults. Secure permission from the group facilitator and group members to observe the group for 1-2 sessions. You might consider community service centers or residential settings.

2) Identify and review at least five empirical articles that describe research related to the type of group that you will be observing (e.g., if you will be observing a support group, you might look for articles that describe support group goals, methods, and outcomes or that evaluate the efficacy of support groups of family members with dementia).

3) Interview the group facilitator to learn about the purpose of the group, their approach to facilitating the group, their leadership style, their perspectives about the advantages of the group and any other questions that you think will help you understand the group you will be observing.

4) Observe the sessions and write a 5 to 7 page analysis based on your observation. Describe the setting, the group members, and the group's purpose.

5) Review your notes from our class lecture and discussion and from your readings on group work. Then discuss the type of group that is being observed (e.g., support group, educational group), the role of the group facilitator, the stage of the group development, how needs for inclusion in regards to race and gender are addressed, control and affection were met, and provide your analysis regarding the group process and progress. Assess whether the goals of the group appear to be met.

6) Drawing upon your literature review and what you have learned in class about group process theory, knowledge and skills, assess the strengths and weaknesses of the group process. Include a reference list.

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<tr>
<th>Grading Criteria</th>
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<th>Your Score</th>
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<tbody>
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<td>I. Organization of paper</td>
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<tr>
<td>Clarity and support of main points</td>
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<td>II. References to literature</td>
<td>6</td>
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<tr>
<td>Appropriateness</td>
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<td>Integration and application</td>
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<td>III. Instructor's overall impression of effort</td>
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<td>IV. Technical detail</td>
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<td>References and APA style</td>
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TOTAL Score 20 _____
VII. Course Policies

Non-Discrimination Policy
All students will be treated in accordance with federal and state laws prohibiting discrimination on the basis of sex, race, national origin, disability, sexual preference, age and religion. No assignments will be due on major religious holidays. Students who are registered with the Disability Resource Center must give the instructor a copy of their VISA within the first two weeks of the semester so that accommodations can be made. The instructor will assure that there is accommodation made for the student.

Disability Accommodation
The University of Wisconsin-Madison supports the right of all enrolled students to a full and equal educational opportunity. The Americans with Disabilities Act (ADA), Wisconsin State Statute (36.12), and UW-Madison policy (Faculty Document 1071) require that students with disabilities be reasonably accommodated in instruction and campus life. Reasonable accommodations for students with disabilities is a shared faculty and student responsibility. Students requiring accommodation, as approved by the McBurney Center, are expected to provide the instructor with a copy of their Verified Individualized Services and Accommodation (VISA) by the second week of the semester, or as soon as possible after a disability has been incurred or recognized. For more information, please contact the McBurney Center at mcburney@odos.wisc.edu; Phone at 608-263-2741; Text messaging at 608-225-7956; or by FAX at 608-265-2998, 711 (Via relay); Address is 702 W. Johnson Street, Suite 2104 Madison, WI 53715

Faculty will work either directly with the student or in coordination with the McBurney Center to identify and provide reasonable instructional accommodations. Disability information, including instructional accommodations as part of a student's educational record, is confidential and protected under FERPA.

Code of Ethics, Student Rights and Responsibilities & Plagiarism
BSW and incoming MSW students read and signed electronic forms of the NASW Code of Ethics, the School of Social Work Plagiarism Policy and the Student Rights and Responsibilities. In doing so, they agreed that while in the BSW or MSW Program they would honor the NASW Code of Ethics and Student’s Rights and Responsibilities, as well as adhere to the Plagiarism Policy and that should they not do so, sanctions would be imposed. BSW and MSW students are expected to adhere to these policies in the classroom, in the field and in the preparation of course assignments.

Attendance & Class Participation Policy
In order for you and your fellow classmates to benefit from this course, attendance and active participation are expected. Attendance will be taken at the beginning of class and I will note your level of participation. If you are unable to attend class, please email me prior to class so you can receive an excused absence; you may receive no more than two excused absences per semester. Two points will be deducted from your grade for each unexcused absence incurred.

Policy on Late Assignments
Assignments are due at the Canvas Dropbox by the start of the class on the designated date. Sometimes unforeseen circumstances arise and it may be necessary for students to submit work later than the due date. If a student a) communicates with me prior to the due date, b) provides a reasonable explanation as to why the work is late, AND c) we come to an agreement about a different deadline, a late submission may be permitted. D) If there is not a reasonable explanation, or contact about a late submission, a deduction of five points for each day the assignment is late will be taken off the final grade of the assignment.

Student-Instructor Communications
Course materials are posted at the course website, which uses UW Canvas platform. Required and recommended readings, power point slides and handouts will be posted there. Students are expected to visit the website regularly to check for announcements, submit assignments and check grades. In addition, I will use email to send out course announcements and to alert students if there are handouts that they will need to print in advance of class. Be sure to check your WISC EMAIL account by 4:00 on the day before class to check for materials.
Final Comment: I’m very much looking forward to getting to know you and exploring the course content together. I sincerely hope you will find the course interesting and relevant. I know that most of you have extensive life and work experience and it will be wonderful to learn from your experiences. Please let me know if you have any questions. Best wishes.
## Appendix A

<table>
<thead>
<tr>
<th>Competencies and Description</th>
<th>Course Content relevant to Dimensions that Comprise the Competency*</th>
<th>Location in Syllabus</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2.1.2 Engage Diversity and Difference in Practice</strong></td>
<td>Lecture, reading and discussion related to dimensions of diversity and the delivery of services:</td>
<td></td>
</tr>
<tr>
<td>Advanced practice social workers demonstrate in a focus area an advanced understanding of</td>
<td>Diversity within the older population (K, V)</td>
<td></td>
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<tr>
<td>how diversity and difference characterize and shape the human experience and are critical to</td>
<td>Guest Speakers: Caring for LGBT with dementia</td>
<td>Week 1</td>
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<tr>
<td>the formation of identity.</td>
<td>Suicide Risk Factors and health disparities (K, V, S)</td>
<td>Week 5</td>
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<tr>
<td>They demonstrate comprehension that dimensions of diversity are understood as the</td>
<td>Cultural differences in understanding &amp; treating hoarding (K, V, C &amp; AP)</td>
<td>Week 6</td>
</tr>
<tr>
<td>intersectionality of multiple factors including but not limited to age, class, color,</td>
<td>Cultural differences in decision making (K, V, S, C &amp;AP)</td>
<td>Week 7</td>
</tr>
<tr>
<td>culture, disability and ability, ethnicity, gender, gender identity and expression,</td>
<td>The role of culture in end-of-life, death and loss (K, V, S, C &amp; AP)</td>
<td>Week 13</td>
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<td>immigration status, marital status, political ideology, race, religion/spirituality, sex,</td>
<td>Readings (K, V, S, C &amp; AP)</td>
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<tr>
<td>sexual orientation, and tribal sovereign status.</td>
<td>Assignments: Compare and Contrast Two Treatment Approaches; Research Paper, Book Review (K, V, C &amp; AP)</td>
<td>Syllabus pages: 11, 14, 17</td>
</tr>
<tr>
<td>Advanced practice social workers recognize that, as a consequence of difference, a person’s</td>
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<td>life experiences may include oppression, poverty, marginalization, and alienation, as well</td>
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<td>as privilege, power, and acclaim, and apply this recognition in their practice.</td>
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<td>They also demonstrate in practice their understanding of the forms and mechanisms of</td>
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<td>oppression and discrimination, and a recognition of the extent to which a culture’s</td>
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<tr>
<td>structures and values, including social, economic, political, and cultural exclusions, may</td>
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<tr>
<td>oppress, marginalize, alienate, or create privilege and power.</td>
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<tr>
<td>Lecture, videos, in-class activities, reading and discussion related to practice-informed</td>
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<tr>
<td>research, and research-informed practice:</td>
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<tr>
<td>Common changes associated with aging (K)</td>
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<td>Week 2</td>
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<tr>
<td>What DSM-5 Means for Diagnosing Mental Health Patients (K, V, S, C/A)</td>
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<td>Week 3</td>
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<td>Common Causes of Confusion (K, V)</td>
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<td>Validation Therapy (K.S)</td>
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<td>Week 5</td>
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<td>Alive Inside (K,V,S,C/A)</td>
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<td>Role Play- GDS (K,S)</td>
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<td>Week 6</td>
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<td>CBT Application (K, S)</td>
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<td>Week 11</td>
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<tr>
<td>Dignity Therapy (K,V,S)</td>
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<td>Week 14</td>
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<tr>
<td>Readings (K, V, S, C &amp; AP)</td>
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<tr>
<th>Competencies and Description</th>
<th>Course Content relevant to Dimensions that Comprise the Competency*</th>
<th>Location in Syllabus</th>
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</thead>
<tbody>
<tr>
<td>Assignment: Compare and Contrast Two Treatment Approaches; Applied Intervention; Research Paper (K, S, C &amp; AP)</td>
<td>Lectures, readings, videos and small/large group discussions related to skills and knowledge in facilitating engagement with individuals, families, and groups: Obsessive Compulsive Disorder video (K, V) What is PTSD really like? (K, V) Facilitating family conferences &amp; counseling (K, V, S, C/A) Guest Speaker: Consider the Conversation (K, V, S, C &amp; AP)</td>
<td>Syllabus pages: 11; 13; 14</td>
</tr>
<tr>
<td><strong>2.1.6 Engage with Individuals, Families, Groups</strong></td>
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<tr>
<td>Advanced Generalist social workers understand and demonstrate that engagement is an ongoing component of the dynamic and interactive process of social work practice in the focus area with, and on behalf of, diverse individuals, families, groups, organizations, and communities. They value the importance of human relationships. Advanced Generalist social workers understand and apply theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the focus area to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. They understand and demonstrate an array of strategies to engage diverse clients and constituencies to advance practice effectiveness in the focus area. Advanced Generalist social workers demonstrate advanced understanding of how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies in the focus area. They value and employ principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals in the focus area.</td>
<td>Lectures, readings, videos and small/large group discussions covering assessment knowledge and skills: Biopsychosocial Assessment (K, V, S, C &amp; AP) Assessment tools role-play and application (K, V, S, C &amp; AP) Assignments: Compare and Contrast Two Treatment Approaches; Applied Intervention; Interview with an older Adult; Group Process Analysis (K, S, C &amp; AP)</td>
<td>Weeks 2, 4, 5, 6, 7, 8, 9, 10, 11, 13, 14 Syllabus pages: 12; 13; 15; 19</td>
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<tr>
<td><strong>2.1.7 Assess Individuals, Families, Groups</strong></td>
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<tr>
<td>Advanced Generalist social workers independently engage and apply their understanding of theories of human behavior and the social environment in the ongoing assessment of diverse individuals, families, groups, organizations and communities in the focus area. They engage in inter-professional collaboration and utilize methods of assessment appropriate to their focus area to advance practice effectiveness. Advanced Generalist social workers demonstrate an understanding of how their personal experiences and affective reactions may affect their assessment and decision-making.</td>
<td>Lecture, reading, videos and small/large group discussions covering assessment knowledge and skills: Biopsychosocial Assessment (K, V, S, C &amp; AP) Assessment tools role-play and application (K, V, S, C &amp; AP)</td>
<td>Week 2 Weeks 2, 3, 5, 6, 9, 10, 11, 13 2, 4, 6, 7, 11, 13</td>
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<tr>
<td><strong>2.1.8 Intervene with Individuals, Families, Groups,</strong></td>
<td>Lecture, reading, videos and small/large group discussions, and case studies focused on evidence-informed interventions and assessments: Establishing rapport (V, S) MMSE &amp; Clock Draw role-play (K, S) Suicide prevention (K, V, S) Treatment of OCD (K, V, S) Recognizing symptoms of psychosis and developing social work interventions (K, S) Helping older adults understand and complete advanced directives (K, V, S) Intervening with the family (K, S) Family Conferencing (K, S) Dignity Therapy (K, V, S) Pharmacological interventions (K, C/A)</td>
<td>Week 2 Week 5 Week 6 Week 7 Week 13 Week 13 Week 14 Weeks 6, 7</td>
</tr>
<tr>
<td><strong>Advanced Generalist social workers recognize and understand intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities.</strong></td>
<td>Assignment: Compare and Contrast Two treatment Approaches; Applied Intervention; Group Process Analysis (K, S, C &amp; AP)</td>
<td>Syllabus pages 12; 13; 19</td>
</tr>
<tr>
<td>They independently identify, analyze and implement evidence-informed interventions to achieve the goals of clients and constituencies in a focus area.</td>
<td>Assignment: Compare and Contrast Two treatment Approaches; Applied Intervention, Interview with an Older Adult; Group Process Analysis (K, S, V, C &amp; AP)</td>
<td>Syllabus pages 12; 13; 15; 19</td>
</tr>
<tr>
<td><strong>Advanced Generalist social workers incorporate their knowledge of theories of human behavior and the social environment when selecting and implementing interventions in a focus area.</strong></td>
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<tr>
<td>They also engage in interdisciplinary, inter- professional, and inter-organizational collaboration as appropriate, in evaluating and implementing interventions.</td>
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<tr>
<td><strong>2.1.9 Evaluate Practice with Individuals, Families, Groups</strong></td>
<td>Lecture, readings, and class discussions relevant to evaluating work with: ▪ Individuals (K,S, V, C &amp; AP) ▪ families, groups (K,S, C &amp; AP) Evaluating Screening tool scoring and outcomes (K, C/A) Interventions and their effectiveness with the older adult population (K, V, C/A) Future of social work with older adults (V, S)</td>
<td>Weeks 2, 3, 5, 6, 9, 10, 11, 13 Weeks 2, 4, 5, 6, 9 Week 1</td>
</tr>
<tr>
<td><strong>Advanced Generalist social workers recognize the importance of ongoing evaluation in the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities.</strong></td>
<td>Assignment: Compare and Contrast Two treatment Approaches; Applied Intervention, Interview with an Older Adult; Group Process Analysis (K, S, V, C &amp; AP)</td>
<td>Syllabus pages 12; 13; 15; 19</td>
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<tr>
<td>They are knowledgeable about various methods of evaluating outcomes and practice effectiveness in a focus area and incorporate their knowledge of theories of human behavior and the social environment when</td>
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<tr>
<td>Competencies and Description</td>
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<tr>
<td>evaluating outcomes.</td>
<td>Assignment: Compare and Contrast Two treatment Approaches; Applied Intervention; Interview with an Older Adult; Group Process Analysis; (K, S, AP)</td>
<td>Syllabus pages: 12; 13; 15; 19</td>
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<tr>
<td>Advanced Generalist social workers employ qualitative and quantitative methods as appropriate for evaluating outcomes and practice effectiveness in a focus area.</td>
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*K=Knowledge; V=Values; S=Skills; C & AP=Cognitive and Affective Processes
Successful class discussion depends upon people being “good citizens” by taking joint responsibility for moving the discussion forward. That means following guidelines and helping to enforce them. Listening well, making productive contributions and facilitating discussion are all important social work skills.

1. **Do the reading and come to class prepared to talk.**

2. **Listen as well as talk.**

3. **Raise questions.** Asking questions, asking for clarification from faculty or from other members of the class, is as important - and often more valuable- than making points

4. **Build on each other’s points.** Refer to each other and let people know how your point is related to the discussion.

5. **If you want to change the direction of the discussion, make it explicit.** By doing so, you allow the class to decide whether or not they want to change direction. You allow the class to finish one discussion before starting another. This also allows the class to know where you are coming from. You may know what you are talking about, but the class may not – they may still be thinking about the previous discussion, and not realize that you are changing the topic.

6. **Make your point and support your position, then allow the discussion to move on.** Do not persist in defending points. It is frustrating to others when a participant keeps bringing the conversation back to the same point and re-states it over and over again.

7. **Bring in your background.** Let others know where you are coming from. Tell the class if you are using information from personal experience or from knowledge gained outside of class. If you don’t some people may wonder where the information is from – was that in the readings?

8. **Respect diversity of opinions as well as perspective:**
   a. **Do not stereotype and never dismiss.** For example, if someone takes a feminist position one day, that does not mean that every time that person speaks everyone should roll their eyes and think, “here we go with the feminist position again!”
   b. **Do not assume.** We come from a variety of backgrounds and have a diversity of lives that you may or may not be aware of. Don’t assume that we are all the same. There are gay people in the room. There are Jewish people in the room. There are white people who have known hunger and people of color who went to prep school and grew up in the suburbs. There are people in this room who were teen parents and people who were or are consumers of many of the social services we are discussing. All of this means that you should never assume that “we”’ are talking about “them” – whether “them” refers to clients or certain groups of people.

9. **Make the classroom a safe place.** Things that people say in the classroom should not be repeated outside of class. Discussion and learning happen when people feel that they can experiment, openly discuss ideas, try on different concepts, be challenged and grow without being judged. No one wants to be standing in the coffee line and hear someone say, “Can you believe that she said that…!”
Outstanding Contributor:

Contributions in class reflect exceptional preparation. Ideas offered are always substantive and provide one or more major insights as well as direction for the class. Challenges are well substantiated and persuasively presented. The student responds to colleagues’ ideas, and assists in further development and clarification of these ideas. If this person were not a member of the class, the quality of discussion would be diminished markedly.

Good Contributor:

Contributions in class reflect thorough preparation. Ideas offered are usually substantive, provide good insights, and sometimes direction for the class. Challenges are well substantiated and often persuasive. Responses to colleagues’ ideas are often useful. If this person were not a member of the class, the quality of the class would be diminished.

Adequate Contributor:

Contributions in class reflect satisfactory preparation. Ideas offered are sometimes substantive, provide generally useful insights, but seldom offer a new direction for the discussion. Challenges are sometimes presented, fairly well substantiated, and are sometimes persuasive. Occasionally responds to colleagues’ comments in ways that are useful. If this person were not a member of the class, the quality of the class would be diminished somewhat.

Non-Participant:

This person says little or nothing in class, nor does s/he clearly encourage others through active listening. Hence, there is not an adequate basis for evaluation. If this person were not a member of the class, the quality of the discussion would not be changed.

Unsatisfactory Contributor

Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive, provide few if any insights, and never a constructive direction for the class. Integrative comments and effective challenges are absent. Comments do not acknowledge colleagues’ contributions, or worse, are disrespectful of them. If this person were not a member of the class, valuable airtime would be saved.

*NOTE: Prof. John Tyler of Brown University obtained these guidelines from Prof. Richard J. Murnane at the Harvard Graduate School of Education. Prof. Murnane, in turn, learned them from someone else. Although the original attribution for the guidelines has been lost, they continue to be useful to so many.*