

**School of Social Work
University of Wisconsin-Madison
1350 University Avenue
Madison, WI 53706**

**SW835 Advanced Social Work Practice in Mental Health
Fall 2018**

Instructor: Amy Kucin, LCSW SUDS Associate Lecturer
Class Time: Saturdays 11:30-1:30PM
Location: SMI 133
Office hours: By appointment **Phone:** 608-575-1898 (text and voice)
E-mail: avkucin@wisc.edu **Credits:** 2
Instructional Mode: Face-to-face
Canvas Course : <https://canvas.wisc.edu/courses/119825>

I. Course Description

Focuses on the core practice theories, conceptual frameworks and intervention skills necessary for social work practice in mental health.

Attributes and Designations: This course counts toward the 50% graduate coursework requirement

Requisites: Graduate or professional standing

How Credit Hour is Met: This class meets for one 115-minute class period each week over the spring semester and carries the expectation that students will work on course learning activities (reading, writing, studying) for about 4 hours out of classroom each week. The syllabus includes additional information about meeting times and expectations for student work.

II. Course Overview

The purpose of this course is to prepare students to understand how the interpersonal approach provides a foundation for clinical social work. Building on knowledge and skills identified in SW441: Generalist Practice with Individuals, Families & Groups and SW612: Generalist Psychopathology, this course moves to intervention planning, focusing on strategies that are effective and culturally appropriate, collaborative with the person seeking services, and based in the clinician's understanding of how change will be facilitated and evaluated across various treatment models. Engagement skills will be expanded to help students understand and observe interpersonal processes that contribute to positive therapeutic alliance and positive intervention outcomes. The course will discuss challenges based on multiple dimensions of diversity and the

process of developing and maintaining an effective cross-cultural treatment alliance. Emphasis will also be placed on the development of self-knowledge and skills in self-reflective processes necessary to understand and address interpersonal process dynamics. This course meets the Advanced Practice requirement for the Advanced Generalist Curriculum. The focus or context for this Advanced Practice course is mental health. For non-mental health focus area students, this course may be taken as a free elective.

III. Learning Outcomes: Competency Descriptions and Dimensions

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 measured through course activities, readings, assignments, and behaviors learned in field experiences, and which are derived from social work knowledge, values, skills, and cognitive and affective processes. The objective of this course is to help students to demonstrate understanding and mastery of the knowledge, values, skills and cognitive and affective processes relevant to the competencies described in Appendix A.

IV. Course Content

Week 1 (9/8/18)

Introductions; Framework for Clinical Social Work & Interpersonal Processes and Recovery Orientation

Discussion: Overview of course content/syllabus
The art and science of clinical social work.
What does recovery or “getting better” mean?
How do dimensions of diversity impact recovery or “getting better”?

Required Reading:

Please read the entire syllabus prior to the start of class and come prepared with questions.

Cozolino, L. (2004). Part I. “Getting through Your First Sessions.” In the Making of a Therapist: A Practical Guide for the Inner Journey. New York, NY: Norton & Company, Intl.

Hazzard & Picot (2015). The Color of Hope: People of Color Mental Health Narratives, pp. Forward to pg. 14.

Martinez-Brawley, E. E., & Mendez-Bonito Zorita, P. (1998). At the edge of the frame: Beyond science and art in social work. *British Journal of Social Work*, 28, 197-212.

National Association of Social Workers (2005). NASW Standards for Clinical Social Work in Social Work Practice. Retrieved from:
<https://www.socialworkers.org/LinkClick.aspx?fileticket=Y0g4qdefLBE%3d&portalid=0>

Required Viewing:

What is Mental Health Recovery [2.18]. Retrieved at <https://youtu.be/pK0RBWixPNE> 3

Recommended Reading/Viewing:

Ackerman, S. & Hilsenroth M. J. (2003). A review of therapist characteristics and techniques positively impacting the therapeutic alliance. *Clinical Psychology Review*, 23, 1-33.

Gold, S.H. & Hilsenroth, M.J. (2009). Effects of graduate clinicians' personal therapy on therapeutic alliance. *Clinical Psychology and Psychotherapy*, 16(3), 159-171.

Hill, C., Sullivan, C., Knox, S., & Schlosser, L.Z. (2007). Becoming psychotherapists: Experiences of novice trainees in a beginning graduate class. *Psychotherapy Theory, Research, Practice, Training*, Volume 44, 4, 434-449.

Paniagua, F.A. & Yamada, A. (2013). Handbook of Multicultural Mental Health: Assessment and Treatment of Diverse Populations, 2nd edition. Chapter 1: The Study of Culture and Psychopathology: Fundamental Concepts and Historic Forces. pp. 3-18.

Week 2 (9/15/18)

Therapeutic Alliance: Similar & Dissimilar Client-Therapist Dyads

Discussion: Working alliance & treatment outcomes in similar and dissimilar client-therapist dyads?
What characteristics and techniques positively impact engagement and the therapeutic alliance?
Assessing the therapeutic alliance in cultural context.
When do you address cultural differences in relational context?

Required Reading:

Bhati, K. (2014). Effect of client-therapist gender match on the therapeutic relationship: An exploratory analysis. *Psychological Reports: Relationships & Communications*, 115 2, 565-583.

Cabral R., & Smith, T. (2011). Racial/Ethnic matching of clients and therapists in mental health services: A meta-analytic review of preferences, perceptions, and outcomes. *Journal of Counseling Psychology*, 58(4), 537-554.

Zhang, N. & Burkard, A. (2008). Client and counselor discussions of racial and ethnic differences in counseling: An exploratory investigation. *Journal of Multicultural Counseling & Development*, 36, 77-87.

Hazzard & Picot (2015). The Color of Hope: People of Color Mental Health Narratives, pp. 15-38.

Recommended Reading/Viewing:

Behn, A., Davanzo, A., & Errázuriz, P. (2018). Client and therapist match on gender, age, and income: Does match within the therapeutic dyad predict early growth in the therapeutic alliance? *Journal of Clinical Psychology*, 1-9. <https://doi.org/10.1002/jclp.22616>

Wintersteen, M. Mesinger, J., & Diamond, G. (2005). Do gender and racial differences between patient and therapist affect therapeutic alliance and treatment retention in adolescents? *Professional Psychology: Research and Practice*, 36(4), 400-408.

Presley, S. & Day, S.X. (2018). Counseling dropout, retention, and ethnic/language match for Asian Americans. *Psychological Services*, 1-7. <http://dx.doi.org/10.1037/ser0000223>

Week 3 (9/22/18)

Therapeutic Alliance and Use of Self in Therapy; Working with LGBTQ and Transgender Issues

Discussion: Affirmative practice working with lesbian, gay, bisexual, & Transgender persons
Begin to discuss the use of self in therapy
Issues around therapists' self-disclosure in engagement with clients

Required Reading:

Dee Watts-Jones, T. (2010). Location of self: Opening the door to dialogue on intersectionality in the therapy process. *Family Process*, 49(3), 405-420.

Gibson, M. (2012). Opening up: Therapist self-disclosure in theory, research, and practice. *Clinical Social Work Journal*, 40, 287-296.

Hazzard & Picot (2015). The Color of Hope: People of Color Mental Health Narratives, pp. 39-68.

Lee, E. (2014). A therapist's self-disclosure and its impact on the therapy process in cross-cultural encounters: Disclosure of personal self, professional self, and/or cultural self? *Families in Society: The Journal of Contemporary Social Services*, 95(1), 15-23.

Shipherd, J.C., Green, K.E., & Abramovitz, S. (2010). Transgender clients: Identifying and 5 minimizing barriers to mental health treatment. *Journal of Gay and Lesbian Mental Health*, 14, 94-108.

Recommended Reading:

Diamond, G.M. & Shpigel, M.S. (2014). Attachment-based family therapy for lesbian and gay young adults and their persistently nonaccepting parents. *Professional Psychology: Research and Practice*, 45(4), 258-268.

Hunter, S. & Hickerson, J.C. (2003). *Affirmative Practice. Understanding and working with lesbian, gay, bisexual, and transgender persons*. Washington, DC: NASW Press.

Chapter 4~ Individuals: Coming out and identity development (pp. 91-112)
Chapter 5~ Individuals: Disclosures (pp. 113-140).

Kronner, H. (2013). Use of self-disclosure for the gay male therapist: The impact on gay males in therapy. *Journal of Social Service Research*, 39(1), 78-94.

Week 4 (9/29/18)

Establishing, Maintaining and Evaluating the Working Alliance & (continue) Therapist Self-Disclosure

Discussion: Core concepts of interpersonal process dimension interventions

Understanding and evaluating engagement and the therapeutic alliance from client and therapist perspectives.

Understanding and evaluating engagement and the therapeutic alliance from multicultural perspectives.

How is change conceptualized when considering various dimensions of diversity (and how a person's dimensions intersect)?

Sense of self & self-disclosure (what is it and how to use it).

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). *Interpersonal process in therapy: An integrative model*. (7th Edition), Boston, MA: Cengage Learning. Chapters 1-3. * Read Chapter 1; Skim Chapter 2; Read Chapter 3 pp. 69-84 and 102-109 (skim pp. 85-101 if time)

Vasquez, M. (2007). Cultural difference and the therapeutic alliance: An evidence-based analysis. *American Psychologist*, 62(8), 878-885.

Wosket, V. (2017). *The Therapeutic Use of Self: Counselling practice, research and supervision*. Classic edition. New York, NY: Routledge. Chapters 2 (The counsellors edge of awareness) & 5 (the impaired therapist and the value of therapist failure). 6

Required Viewing:

Bruce Wampold: What Makes Psychotherapy Work? The Humanistic Elements. [3.43] Obtained from <https://youtu.be/r47bvI4LxSk>

Recommended Readings/Viewings:

Establishing and Maintaining the Therapeutic Alliance [1.52]. Obtained from <https://youtu.be/N65OWrTbQNg>

Flückiger, C., Del Re, A.C., Wampold, B., & Horvath, A. (2018, May 24). The alliance in adult psychotherapy: A meta-analytic synthesis. *Psychotherapy*. Advance online publication. <http://dx.doi.org/10.1037/pst0000172>

Treating Trauma: Minimizing Re-traumatization in Interviewing and Assessment: Webinar by Dr. Patricia Shannon [1.00.46] obtained from <https://vimeo.com/158973693>

Week 5 (10/6/18)

Change Strategies: Working through Resistance, Stages of Change & Internal Focus for Change (Begin).

Discussion: Review stages of change
Assessing a client's stage of change and appropriate intervention application
How is change conceptualized when considering various dimensions of diversity (and how a person's dimensions intersect)?
Engaging clients in constructing "solvable" problems and use of benchmarks

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). Interpersonal process in therapy: An integrative model. (7th Edition), Boston, MA: Cengage Learning. Chapter 4: An Internal Focus for Change (pp. 110-142).

Moyers, T. & Rollnick, S. (2002). A motivational interviewing perspective on resistance in psychotherapy. *Psychotherapy in Practice*, 58(2), 185-193.

(Skim) Miller, W. & Rose, G. (2009). Toward a theory of motivational interviewing, *American Psychologist*, 64(6), 527-537.

Required Viewing/Listening:

Prochaska: Stages of Change Model [11.41] from <https://youtu.be/eE2gw5eF4Ro>

Recommended Reading/Viewing:

Manchak, S., Skeem, J., & Rook, K. (2014). Care, control, or both? Characterizing major dimensions of the mandated treatment relationship. *Law and Human Behavior*, 38(1), 47-57.

Miller, W.R., & Rollnick, S. (2013). Ch. 2 &3. Motivational Interviewing. Helping People Change, 3rd Ed. New York, NY: The Guilford Press, pp. 14-36.

The Social Work Podcast: The Arc of Therapy (Beginnings Part 1) [46.28] from <http://socialworkpodcast.blogspot.com/>

Working with Reluctant/Involuntary Clients by Dr. Ron Rooney [59.56] obtained from <https://vimeo.com/159808963>

Leung, Pamela Piu-yu, Chang, Cecilia Lai-wan, Na, Sui-man, Lee, Mo-yee (2009). Towards Body-Mind-Spirit Integration: East Meets West in Clinical Social Work Practice, *Clinical Social Work Journal*, 37, 303-311.

Week 6 (10/13/18)

Change Strategies: Internal Focus for Change (Finish) & Helping Clients with Feelings

Discussion: Change Strategies considering the person's intersecting dimensions
Helping clients focus inward and placing locus of change w/ clients
Assessing and responding to clients' feelings

Issues of countertransference & use of supervision
Mindfulness as a strategy for clarifying countertransference issues

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). Interpersonal process in therapy: An integrative model. (7th Edition), Boston, MA: Cengage Learning. Chapter 5: Helping Client with Their Feelings (pp. 143-180).

Wosket, V. (2017). *The Therapeutic Use of Self: Counselling practice, research and supervision*. Classic edition. New York, NY: Routledge. Pp.133-208. **Chapter 6 (Breaking the rules in counselling), Chapter 7 (Working at the boundaries of counselling) & Chapter 8 (The shadow side of the use of self in counselling).**

Required Viewing:

Attachment Theory- Understanding the Essential Bond [8.21] obtained from <https://youtu.be/kwxjfuPlArY>

Recommended Readings:

Gaume, J., Bertholet, N. Faouzi, M., Gmel, G., & Daepfen, J.B. (2010). Counselor motivational interviewing skills and young adult change talk articulation during brief motivational interventions. *Journal of Substance Abuse Treatment, 39*, 272-281.

Gone, J.P. (2010). Psychotherapy and traditional healing for American Indians: Exploring the prospects for therapeutic integration. *The Counseling Psychologist, 38*, 166-235.

Week 7 (10/20/18)

Clarifying the Client's Problem & Interlocking Theoretical Approaches with Treatment Focus

Discussion: How to clarify the presenting problem considering dimensions of diversity
How to use theory to guide problem clarification and choosing intervention
Attachment styles and clinical presentation in adult treatment
Group Presentations on Various Theoretical Approaches

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). *Interpersonal process in therapy: An integrative model*. (7th Edition), Boston, MA: Cengage Learning. Chapter 6.

Van der Kolk, B. (2005). Developmental trauma disorder: Toward a rational diagnosis for children with complex trauma histories. *Psychiatric Annals, 35*(5)

Recommended Reading:

Custers, R. & Aarts, H. (2010). The unconscious will: How the pursuit of goals operates outside of conscious awareness. *Science, 329*, 47-50.

Davis, T. (2009). Diversity practice in social work: Examining theory in practice. *Journal of*

Ethnic and Cultural Diversity in Social Work, 18, 40-69.

Lieberman, A. Padrón, E., Van Horn, P., & Harris, W. (2005). Angels in the nursery: The intergenerational transmission of benevolent parental influences. *Infant Mental Health Journal*, 26(6), 504-520.

Week 8 (10/27/18)

Clarifying Client's Problem, Interpersonal Coping Strategies & Intersectionality Considerations in Therapy

DUE in Class: Theoretical Research & Group Presentations

Discussion: Attachment styles and clinical presentation in adult treatment
Examining interpersonal coping strategies
Intersection of spiritual and economic considerations

Required Readings:

(Text): Teyber, E. & Holmes Teyber, F. (2017). Interpersonal process in therapy: An integrative model. (7th Edition), Boston, MA: Cengage Learning. Chapters 6-7.

Cross, T. (2002). Spirituality and mental health: A Native American perspective, *Focal Point*, 16(1), 22-24.

Recommended Reading:

Fierros, M. & Smith, C. (2006). The relevance of Hispanic culture to the treatment of a patient with post-traumatic stress disorder (PTSD), *Psychiatry (Edgmont)*, 3(10), 49-56.

Leong, F.T.L., & Kalibatseva, Z. (2011). Effective psychotherapy for Asian Americans: From cultural accommodation to cultural congruence, *Clinical Psychology Science and Practice*, 16, 242-245.

Week 9 (11/3/18)

Developing Treatment Focus: Collaborative Assessment and Interpretive Summary/Case Formulation

DUE in Class: Theoretical Research & Group Presentations

Discussion: Identifying the client's strengths and evaluating level of care needs
Engaging the client in the creation of collaborative treatment plans
Finding balance between collecting data and building a healing partnership
Understanding and integration of all information gathered

Required Reading:

(Text): Adams & Grieder (2014). *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health (2nd ed.)*. San Diego, CA: Academic Press of Elsevier Publishing. Section II: Getting Started: Assessment (pp. 37-75).

Malawista, K.L., Adelman, A.J., & Anderson, C.L. (2011). "Graham Crackers" and "In My

Eyes.” Chapters 13-14 in Wearing My Tutu to Analysis and Other Stories: Learning Psychodynamic Concepts from Life. New York, NY: Columbia University Press. pp. 103-123.

Recommended Readings:

Fukui, S., Starino, V., Susana, M., Davidson, L., Cook, K., Rapp, C., & Gowdy, E. (2011). Effect of Wellness Recovery Action Plan Participation on Psychiatric Symptoms, Sense of Hope, and Recovery. *Psychiatric Rehabilitation Journal*, 34(3), 214-222.

Wasow, Mona (2001). Strengths versus deficits, or musician versus schizophrenic. *Psychiatric Services*, 52(10), 1306-1307.

Week 10 (11/10/18)

Person-Centered Treatment Planning: Writing an Interpretive Summary/Case Formulation & Goal Creation

Discussion: What is empathic curiosity & how to use it to engage clients in goal setting
Types of goals, respecting goals, and common problems
Impact of personal biases on treatment planning

Required Reading:

(Text): Adams & Grieder (2014). *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health (2nd ed.)*. San Diego, CA: Academic Press of Elsevier Publishing. Section II: Getting Started: Understanding Needs: Chapter 3, The Integrated Summary (pp. 77-101) & Section III: On the Road, Chapter 4, Setting Goals (pp. 107-132).

McEvoy, R., Baker, D., Plant, R., Hylton, K., & Mansell, W. (2013). Empathic curiosity: Resolving goal conflicts that generate emotional distress. *Journal of Psychiatric and Mental Health Nursing*, 20, 273-278.

Recommended Readings/Videos:

Sterling, E., Esenwein, Silke, Tucker, Sherry, Fricks, Larry, & Druss, Benjamin (2010). Integrating Wellness, Recovery, and Self-management for Mental Health Consumers. *Community Mental Health Journal* 46, 130-138.

Week 11 (11/17/18)

Person-Centered Treatment Planning: Interventions & Objective Writing

Discussion: What is the difference between objectives and interventions?
Goal development utilizing SMART goal writing language
Strengths-based approach and avoiding the “dead man” standard
Risk versus choice
Specifying the: what, who, when, where, and why
Role of shared-decision making and inclusion of natural supports

Required Reading:

(Text): Adams & Grieder (2014). *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health (2nd ed.)*. San Diego, CA: Academic Press of Elsevier Publishing. Section III: On the Road: Chapter 5, Focusing on Change: Identifying Barriers and Specifying Objectives (pp. 133-113) & Chapter 6, Interventions (pp. 155-184).

11/24/18

No Class- Happy Thanksgiving

Week 12 (12/1/17)

Catch up/TBD

Week 13 (12/8/18)

Understanding Relational Dynamics/Themes and Reparative Experiences in the Interpersonal Process

DUE: Role play recording during classtime

Discussion: Assessing and identifying patterns to understand challenges
Strategies for bringing client's conflicts and beliefs into the therapeutic process
Working within the Process Dimension
Addressing conflicts in process, working with transference
Identifying, understanding and processing a corrective experience

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). Interpersonal process in therapy: An integrative model. (7th Edition), Boston, MA: Cengage Learning. Chapter 8-9.

Hook, J., Davis, D., Owen, Jesse, & DeBlaere, C. (2017). Cultural humility: Engaging diverse identities in therapy. Washington, DC. American Psychological Association. Chapter 6: Repairing the Relationship After Cultural Ruptures (p. 137-156) and Chapter 7: Navigating Value Differences and Conflicts (p. 157-178).

Yon, K., Malik, R., Mandin, P., & Midgley, N. (2018). Challenging core cultural beliefs and maintaining the therapeutic alliance: A qualitative study. *Journal of Family Therapy*, 40, 180-200.

Required Videos:

How Childhood Trauma Affects Health Across a Lifetime by Dr. Nadine Burke Harris [16.02] obtained at <https://youtu.be/95ovIJ3dsNk>

Recommended Readings:

Atwood, George E., (2012). "The Tragedy of Self-Destruction", The Abyss of Madness, New York, NY: Routledge, 133-160.

Cheng, C., Wang, F., Golden, D. (2011) Unpacking cultural differences in interpersonal flexibility: Role of culture-related personality and situational factors, *Journal of Cross-Cultural Psychology*, 42(3), 425-444.

Malawista, K.L., Adelman, A.J., & Anderson, C.L. (2011). "How to Save a Life", Chapter 15 in Wearing My Tutu to Analysis and Other Stories, Columbia University Press, New York, NY: pp. 124-134.

Williams, K.E., Ciarrochi, J., Heaven, P. (2012). Inflexible parents, inflexible kids: A 6-year longitudinal study of parenting style and the development of psychological flexibility in adolescents, *Journal of Youth and Adolescence*, 41, 1053-1066.

McWilliams, Nancy (1994). Psychoanalytic Diagnosis: Understanding Personality Structure in the Clinical Process, Chapters 5 & 6: Defensive Processes, Guilford Press, New York: NY.

Week 14(12/15/18)

Getting Unstuck; Evaluating the Process, Working through and Termination; Wrap-up

Discussion: Resistance as trying to cope with familiar patterns
Use of motivational interviewing to engage clients and address resistance/competing goals
Use of supervision to evaluate "stuckness"
Evaluating progress and effectiveness
Wrap-Up
Class evaluations

Required Reading:

(Text): Teyber, E. & Holmes Teyber, F. (2017). Interpersonal process in therapy: An integrative model. (7th Edition), Boston, MA: Cengage Learning. Chapter 10.

(Text): Adams & Grieder (2014). *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health (2nd ed.)*. San Diego, CA: Academic Press of Elsevier Publishing. Section IV: Journey's End: The Destination: Chapter 7, Evaluating the Process. (pp. 187-233).

Hook, J., Davis, D., Owen, Jesse, & DeBlaere, C. (2017). Cultural humility: Engaging diverse identities in therapy. Washington, DC. American Psychological Association. Chapter 8: Working Within Your Limits (p. 179-198).

Westmacott, R. & Hunsley, J. (2010). Reasons for terminating psychotherapy: A general population study. *Journal of Clinical Psychology*, 66(9), 965-977.

Safran, J. (2000). Resolving therapeutic ruptures: Diversity and integration, *Journal of Clinical Psychology*, 56,2, 233.

Recommended Readings:

Change, D., & Berk, A. (2009). Making cross-racial therapy work: A phenomenological study of clients' experiences of cross-racial therapy. *Journal of Counseling Psychology*, Vol 56(4), 521-536.

Giacco, D., Matanov, A., Priebe, S. (2014). Providing Mental Health Care to Immigrants: Current Challenges and New Strategies. *Current Opinion Psychiatry* 27(4), 282-288.

Werges, Daniel. (2007). The other dual diagnosis: Intellectual disability & mental illness. *NADD Bulletin*, 10(5), Article 2. <http://thenadd.org/modal/bulletins/v10n5a2~.htm>

Owen, J., Adelson, J., Imel, Z., & Rodalfo, E. (2012). “No show”: Therapist racial/ethnic disparities in client unilateral termination. *Journal of Counseling Psychology*, 59(2), 314-320.

Safran, J. (2000). Resolving therapeutic ruptures: Diversity and integration, *Journal of Clinical Psychology*, 56,2, 233.

V. Texts and Reading Materials

Required Texts

Adams, N. & Grieder, D. (2014). *Treatment Planning for Person-Centered Care: Shared Decision Making for Whole Health (2nd ed.)*. San Diego, CA: Academic Press of Elsevier Publishing. (ISBN# 978-0-12-394448-1)

Hazzard, V. & Picot, I. (2015). The Color of Hope: People of Color Mental Health Narratives, 1st Ed. Middletown, DE. (ISBN# 1514273489 or 978-1514273487)

Teyber, E. & Holmes Teyber, F. (2017). Interpersonal Process in Therapy: An Integrative Model, 7th Ed. Boston, MA: Cengage Learning. (ISBN# 978-1-305-27153-1)

Optional Texts and Readings

Malawista, K.L., Adelman, A.J., & Anderson, C.L. (2011). Wearing my Tutu to Analysis and Other Stories: Learning Psychodynamic Concepts from Life. New York, NY: Columbia University Press. (ISBN#978-0-231-15164-1)

Additional Readings, both required and optional, will be made available on the Canvas site.

VI. Evaluation: Assignments, Grading and Methods

Grade Standards:

Students will earn points toward their final grade as noted below:

Points	Grade	What the point totals & subsequent grad generally indicate
94-100	A	Outstanding, excellent work in all areas
88-93	AB	Outstanding, excellent work in many areas
82-87	B	Meets expectations in all areas
76-81	BC	Meets expectations in most areas; below in others
70-75	C	Below expectations in most areas; not acceptable graduate work
64-69	D	Below expectations in all areas

<64	F	Course failure
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Due Dates at a Glance:

Assignment*	Due Date	Points
Reflection paper	10/7 by 11:59 pm	15 points
Small Group Theoretical Research & Presentation	10/27 and 11/3 in class presenting and paper due 11/11 by 11:59 pm	30 points
Teaching a skill or Concept	ongoing	10 points
Treatment planning exercise	12/2 by 11:59 pm	15 points
Video Role play & Self-Assessment paper	12/8 role play in class & paper due by 12/16 by 11:59 pm	25 points
Participation/Professionalism	Ongoing	5 points
Total Points		100 points

* All assignments due electronically into Canvas unless otherwise announced

ASSIGNMENTS

Assignment #1: Reflection Paper

Due: 10/7 by 11:59pm

Value: 15 points

In this assignment, you are asked to write specifically from your perspective as a social work therapist-in-training. You will write a paper reflecting on the following questions:

Therapeutic alliance: How is this defined in course content? How do you conceptualize or understand it? What are some signs that you have established a therapeutic alliance and why is this important?

Building Relationship: At this point, how do you feel about your ability to build relationship, especially with respect to working cross-culturally, with diverse populations, bias and/or countertransference. What do you think are your strengths in this area and what are or will be your challenges?

Next steps: What are some concrete steps you can take to address these challenges as you move forward in order to effectively engage with your future clients? What do you hope to learn this semester that can support you in this process, either from the class or about yourself (or both)?

Length: 4-6 pages

Format: Double spaced, 12 pt. Times Roman font, 1-inch margins. If you do site references in your paper make sure they follow the APA guidelines.

This assignment will be graded according to the following rubric:

Reflects thoughtfully and critically on the questions posed and demonstrates an exploration of one's own thoughts and feelings (self-awareness) about their clinical social work practice (e.g. connects the reflection to their practice).	/5
Illustrates a depth to the self-reflection (e.g. does not just point out the superficial or obvious, but analyzes specific feelings/thoughts/behaviors more deeply) and presents further insights and ideas	/5
Integrates course concepts and content into a sophisticated discussion, with correct citations and formatting	/3
Organization/Grammar/Clarity/Spelling	/2
Total	/10

Assignment #3: Small Group Theoretical Research & Presentations

Due: In class 10/27 and 11/3

Value: 30 points

The purpose of this assignment is to introduce you to a broad array of theoretical approaches, each of which highlight a different aspect of the human condition and assist you in critically evaluating one approach. Advanced social work practice in mental health requires social workers to have a full range of theoretical approaches that drive treatment decisions and interventions (Turner, 2017). By having knowledge of broader-based theoretical approaches for your social work practice, it may assist you in not becoming overly identified with one narrow focus that limits understanding of diverse clients and their contexts.

This assignment is worth 30 points and presentations will be held in class on 10/27 and 11/3.

The following are the steps for this assignment:

Step 1: Choose a partner for the assignment.

Step 2: With your partner, choose a theoretical approach you will research and present to the class. I will supply the class with a list of theoretical approaches you may choose from or you may also offer up a theoretical approach you are interested in (and not on the list).

Step 3: Conduct a literature search and gather information on your chosen theoretical approach. Make sure that the information is from reputable sources (e.g. texts, credible websites, peer-reviewed journals). Between you and your partner, you should have no fewer than 5 resources. You will be asked to highlight one reading/resource to assign to the class that informs them in some way on your theoretical approach.

Step 4: Prepare to present your findings to the class. Specifically, be ready to:

- a) Briefly summarize the theoretical approach
- b) Provide the main tenets or components of the approach

- c) Identify some positive outcomes of the approach (e.g. who gets better, under what circumstances? Are there also other implications of using this approach?)
- d) Identify the theoretical approach's limitations (e.g. what are the criticisms of the approach?)
- e) Highlight any pertinent information on the theoretical approach's use with a diverse population and **critically analyze the approach's applicability to a diverse population** (e.g. does the literature talk about the approach specific to various diverse populations (age? Race? Ethnicity? gender? Is it hard to tell?)
- f) Summarize if you feel you will end up using this approach in your social work practice and why/why not.

Step 5: Present the theoretical approach to the class. The presentations will provide the opportunity for students to gain knowledge on multiple theoretical approaches and to analyze if the presented approach may be one that they adopt within their own social work practice.

Step 6: Write-up your findings in a paper using the delineated talking points in Step 4 above. This paper should be between 7-10 pages and cover all the points of your presentation. Papers must be typed, double-spaced, use 1-inch margins, be in 12 pt. Times New Roman font and have proper APA citations and formatting (use APA style with in-text parenthetical references as well as a reference list). *Remember that material that is not correctly cited will be considered plagiarized.* Pages should be numbered. This assignment should be checked thoroughly for correct spelling and grammar.

Papers will be due into Canvas no later than 11/11/18 by 11:59 pm.

Grading Rubric for Small Group Theoretical Approach Research & Presentation Assignment

Presentation (10 points) and Paper (20 points)

Presentation (10 points)	
Effectively summarizes the theoretical approach in an engaging and clear way	2 points
Provided a clear discussion of the positive outcomes of the approach	2 point
Identified the limitations and/or criticisms of the theoretical approach	2 point
Shared relevant information on the approach's applicability across a diverse client population	2 point
Professional presentation demonstrating preparation, clarity, and delivery	1 point
Provision of one relevant and meaningful resource (e.g. reading)	1 point
Total Presentation Points	10 points
Paper (18 points)	
Effectively summarizes the theoretical approach	6 points
Analyzes the theoretical approach (both positive outcomes and limitations)	4 points
Addresses issues of the theoretical approach's use with diverse populations	4 points
Provides rationale for if you will use this theoretical approach in your work and why/why not	3 points
Organization/Grammar/Clarity/Spelling/APA citations and formatting	3 points
Total Paper Points	20 points
Total Presentation and Paper Points	30 points

Assignment #4: Treatment Planning experience and Reflection Paper

Due: 12/2 @ 11:59 pm

Value: 15 points

The purpose of this assignment is to practice developing a comprehensive case summary and Treatment plan. You will choose from a variety of clinical scenarios and develop a treatment plan that includes: client strengths, client identified problems and goals, the clinical intervention you plan to use along with a rationale for your chosen intervention. More details on this assignment will be given in class.

Assignment #5: Teaching a Skill or Brief Intervention

Due: ongoing

Value: 10 points

The purpose of this assignment is to gain practice teaching a coping skill or short intervention to consumers; to get feedback on practice in order to increase clinical skills; to learn a variety of skills and interventions from other students; to be able to experience what it is like to be in the role of client

Due date: TBD

Description: Students will work in pairs to teach a coping skill or intervention to the class. You are expected to work together to explain and teach the skill. You may choose to each teach a small skill that complement each other (such as 2 kinds of grounding exercises for trauma) or you may choose to work together to teach a more involved skill (explaining and then demonstrating how to use passive vs assertive communication). You may choose to have a small discussion be part of your teaching (Asking your group what kind of negative self-talk comes up for them?) The presentation should be 10-15 minutes with up to 5 minutes for feedback and processing with the group.

Thorough demonstration of the therapeutic skill or intervention is presented in a clear, well-paced and organized way	5
Clearly establishes a framework for the usefulness of this technique with specific clients or situations, and answers related questions from the class	5
Total:	10

Assignment #6: Role Play & Self-Assessment Assignment

Due Date: Role play 12/8 (in class) Paper due 12/15 by 11:59 PM

Value: 20 points (10 video and 10 paper)

The purpose of this assignment is to demonstrate that you have attained some mastery of research informed clinical social work practice and to assess what you feel you did well and opportunities for improvement.

Role Play

You will video record a role play demonstrating some of the research informed practice skills learned in class and from assigned readings. Your recorded role play should be **10-12 minutes**. You will work in pairs for this assignment. Your recording will capture you as the role of the clinical social worker with your partner in the role of client.

Do not read from scripts for this assignment. The purpose is not to demonstrate your acting ability but rather to demonstrate that you are learning to apply the basic skills and concepts of collaborative, competency-based culturally humble counseling. Class time will be provided in the Practice Skills Lab. If you need additional time, arrangements can be made to reserve lab time outside of class.

For the role play, you will pick a client and/or issue that you would like to practice using your relational and treatment planning skills with. You can come up with your own scenario or a variety of them will be provided to you in class. It may be helpful to recall a past or current client to help make this experience more meaningful for you. Obviously, care must be taken to protect the confidentiality of any past or current clients.

Required Content:

Your role play should demonstrate an earnest attempt at the following **Engagement & Relational skills:**

- Begin to develop rapport and alliance with your client
- Identify and affirm some client strengths
- Use open-ended questions
- Use Reflective listening
- Use your body and language to convey safety and acceptance

Your role play should demonstrate an earnest attempt at the following **Treatment planning skills:**

- Begin to collaboratively define a presenting problem (s)
- Begin to elicit ideas about how the client would like to change and/or how they'd like to use the therapy space

An orientation to the lab and the video recording equipment will be provided during class time. You will save your recording and copy it to a USB drive, so you can view it later when you write your self-assessment paper. *Please test and verify that your recording plays properly for the duration from the USB drive.*

The most important preparation you can do for this assignment is to carefully construct a scenario that provides you with opportunities to incorporate all of the above required

elements. Also, be sure to thoroughly brief your role play partner before you begin the role play.

Self-Assessment Paper

Write a **3-5-page** self-assessment paper evaluating your role as the social worker, including both what you think you did well and opportunities for continued practice. Your evaluation should reflect a thoughtful and thorough appraisal of your work, including both the verbal and non-verbal dynamics of the session. When referring to the skills you used, mention where they occurred in the video (the time of playback).

Formatting: Papers must use APA-6 formatting throughout. The paper should be **double-spaced, Times Roman 12 pt font, with 1-inch margins**. Please include a title page. Students who have writing challenges are encouraged to make use of the University Writing Center for this assignment and/or to have someone else proofread your paper.

Selecting references and citations. No specific number of references is required for this paper, but claims in your paper must be backed by citations and a reference page if appropriate

Role Play & Self-Assessment Grading Rubric

20 Points

Role Play Recording		10
<input type="checkbox"/> Rapport building		2
<input type="checkbox"/> Affirms client strengths		2
<input type="checkbox"/> Open ended questions and/or reflective listening		2
<input type="checkbox"/> thoughtful use of language to create a therapeutic space		2
<input type="checkbox"/> Identifies presenting problem		2
<input type="checkbox"/> Collaboratively works to identify client’s theory of change		2
Self-Assessment Paper		
Thoroughness (all directions followed)		1
Thoughtful exploration of demonstrated strengths		4
Thoughtful exploration of Opportunities for more practice		4
Formatting, organization, spelling, grammar		1
	0.0	10

Participation/Professionalism

Due: Ongoing

Value: 5 points

Participation is REQUIRED. Effective participation consists of having completed readings and other assignments, the ability to integrate social work concepts with field and other experiences,

AND the ability to fully engage in problem solving and other exercises (presenting social work issues or other perspectives for discussion as well as responding to other students who present issues). It also includes arriving to class on time. You are required to be an alert, attentive and active participant in this class. This includes attentive non-verbal behavior and offering comments relevant to course dialogue. Participation can be challenging for some students. Please see instructor EARLY in the semester if you need any assistance in this or any other areas, as students will be expected to actively participate in each class. As part of your participation grade, a self-reflection and rating of your own participation will be required at the end of the semester.

VII. Course Policies

Classroom Climate:

Classroom climate, or the way a classroom space feels to everyone in the room based on communication, norms, values and processes, impacts participation, motivation and learning. Meeting course objectives requires that the instructor and students actively work to create a learning environment that is respectful and safe so that ideas can be examined honestly, diverse viewpoints shared, and in-class activities approached with maximum curiosity and enthusiasm. In order to learn, we must be open to the views of people different from ourselves. Diversity in beliefs, ideas and lived experiences are highly valued here. Each student has knowledge and experience that will enhance the learning of their colleagues and each voice is important. In our time together over the semester, please honor the uniqueness of your fellow classmates, and appreciate the opportunity we have to learn from each other. Because the class will represent diverse individual beliefs, backgrounds, and experiences, every member of this class must show respect for every other member of this class. We will share the challenges of upholding our community guidelines and responding to moments when we fail to abide by them. Students will be held accountable for what they are expressing verbally and nonverbally. Students are expected to keep confidential all issues of a personal or professional nature discussed in class.

I am firmly committed to diversity and equality in all areas of campus life and building an inclusive classroom space where everyone feels safe and welcome. I recognize that we all have biases. Discrimination can be direct or indirect and take place at both institutional and personal levels. I believe that such discrimination is unacceptable, and I am committed to providing equality of opportunity for all by eliminating any discrimination, harassment, bullying, or victimization. I invite you to bring any concerns in this regard to my attention.

Student Wellness

As a student you may experience a range of issues that can cause barriers to learning. These might include strained relationships, anxiety, high levels of stress, alcohol/drug problems, racism, feeling down, and/or loss of motivation. **University Health Services (UHS)** can help with these or other issues you may be experiencing. You can learn about the free, confidential mental health services available on campus by calling (608)265-5600 or visiting www.uhs.wisc.edu. Help is always available.

Other student support services and programs include:

- Multicultural Student Center <https://msc.wisc.edu/>
- Gender and Sexuality Campus Center <https://lgbt.wisc.edu/>

- Dean of Students Office <https://www.students.wisc.edu/doso/>

Below are resources for reporting and responding to incidences of bias and hate on campus.

- Report: <https://students.wisc.edu/doso/services/bias-reporting-process>
- Bias Response and Advocacy Coordinator email: reportbias@wisc.edu
- UW-Madison Police Department: uwpd.wisc.edu
- Office of Equity and Diversity: www.oed.wisc.edu/

You may also report incidents in-person to the [Dean of Students Office](#), 70 Bascom Hall, during normal business hours. Reportable incidents include crimes such as vandalism or physical assault, as well as non-academic misconduct, slurs, and intimidation. Anyone who files a report will have the opportunity to meet with the Bias Response and Advocacy Coordinator, so that we can meet their needs and ensure their safety.

Support for Survivors of Sexual Violence

If a student comes to me to discuss or disclose an instance of sexual assault, sex discrimination, sexual harassment, dating violence, domestic violence or stalking, or if I otherwise observe or become aware of such an allegation, I will keep the information as private as I can. However, Chapter 36.11 (22), Wisconsin Statutes, requires “any person employed at [UW-Madison] who witnesses a sexual assault on campus or receives a report from a student enrolled in the institution that the student has been sexually assaulted shall report to the dean of students of the institution. The dean of students shall compile reports for the purpose of disseminating statistical information.” As a faculty member, I am therefore required to report to the dean of students.

For further information about rights and resources:

http://uwpd.wisc.edu/content/uploads/2014/12/CSA-Resorces-Handout-Victim-RightsResources-2014-VAWA.Clery_.pdf

Out-of-Class Contact with Instructor

I encourage students to meet with me outside of class to discuss concerns, answer questions and provide comments and feedback. I am usually available to meet briefly right before class, during break and right after class ends. Rather than holding office hours, I prefer to meet with students by appointment. Please email me with a request to arrange a time to meet. I am happy to meet students in the Social Work Library or the Wisconsin Institutes for Discovery coffee shop if this is a more comfortable and welcoming space for you.

Electronics:

To minimize disruptions to class process all devices must be turned off during the class period unless the instructor gives instructions to utilize electronic devices for a class activity. If you have an urgent reason for leaving your phone on, please inform the instructor *prior to the class beginning*. If there is a medical or other serious need for these devices, please speak to the instructor before class.

Note on Accommodation of Student Disability:

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 Faculty Notification Letter 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); 702 W. Johnson St., #2104, Madison, WI.

I will work directly with you and 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. If you require accommodations to obtain equal access to this class or to any assignments, please contact me as soon as possible.

Attendance Policy:

Students are expected to attend all scheduled classes and to arrive on time.

- Promptness

Prompt arrival to all classes is required. Repeated tardiness will impact your grade. I will consider a late arrival or early departure of more than 20 minutes an absence.

- Absence

If you must miss class, you are required to inform me via email in advance. Students are responsible for completing any class requirements for the day missed, and for obtaining from a fellow classmate any assignments, materials, and communications missed due to absence, late arrival, or early departure. Students who must be absent due to inclement weather or other emergencies must contact me prior to the start of class. Students who are absent three or more times in the semester will be required to schedule a meeting with the instructor to discuss their performance and continuation in the course. Three or more absences may lead to a student receiving a failing grade.

Religious Holidays:

I recognize that students' choices to observe religious holidays that occur during periods when classes are scheduled. Students are encouraged to arrange with their instructor to make-up work missed as a result of religious observance, and instructors are asked to make every reasonable effort to accommodate such requests.

Reading and Media Assignments:

You are expected to have read, viewed and listened to all assigned material prior to the class date under which the readings are listed above. Reading and critically evaluating what you have read is necessary so that you can learn, actively participate in class discussions, and successfully complete written assignments.

Canvas

All students are required to access Canvas for course content and assignments. If you have difficulty with Canvas, you should contact the DoIT helpdesk.

Late assignment policy

Assignments are due on the date specified by 11:59 p.m. If you are not able to be in class the day a written assignment is due, you are still responsible for turning in your assignment on the due date. If a student a) communicates with me at least 48 hours *prior* to the due date, b) provides a reasonable justification for an extension, and c) we come to an agreement about a revised deadline, the assignment handed in by the new date will be considered “on time.” Unapproved late assignments will be marked down 1 point *for each day the assignment is late*.

Written Assignment Policy:

1. All written assignments are to be completed in Microsoft Word, without exception. The instructor will not review assignments submitted in another format.
2. Always include a cover sheet (not counted as one of the required pages) with the title of the paper, your name, the date turned into the instructor, course number, and course title (do not put this information on the first page of your paper).
3. Students must format assignments using **one-inch margins, double-spacing, and a Times New Roman 12-point font** unless indicated otherwise.
4. You must use correct APA format for citations. Consult the UW writing center’s guide for APA formatting (<http://writing.wisc.edu/Handbook/DocAPA.html>).
5. Reference pages must be on a separate sheet from the paper (not counted as one of the required pages). When required to use references, you must use peer-reviewed journals. **Websites may only be used with prior approval from the instructor.**
6. Papers should be placed in the Canvas by 11:59 p.m. of the due date. You will receive a confirmation e-mail when your paper is successfully downloaded to the Canvas. It is your responsibility to be sure your paper has been downloaded properly. I will adhere to the policy on late assignments if an assignment is not received in Canvas by the time it is due.

Criteria for Assignments

Specific attention should be given to organization, paragraph and sentence structure, clarity, flow and correct citation using APA format. Before turning in any assignment, consider if the following criteria are met:

1. Validity, relevance, support of main points, ability to consider other perspectives.
2. Sources, quotes, and paraphrases appropriately identified; clear connection to course ideas/readings. Own thinking comes through.
3. Organization, clarity, logical flow, completed as required.
4. Has an introduction and conclusion, unless otherwise stated.
5. Paragraphs should have topic sentences that reflect the content of the paragraph and should have a smooth flow from one paragraph to the next.
6. Has **depth**, includes critical evaluation, is integrative-looks at the whole.
7. Appropriate grammar, spelling, format, etc.

Appealing a Grade:

Your goal for this and other courses should be to make the most of your learning experience, and not to simply “get an A.” Grade expectations should NOT be based on what you have received in other courses—this is never a legitimate argument for appealing a grade. If you have an issue with a grade that you receive in this course, please document the reasons for your appeal in writing and provide this to me. Your reasons for your appeal should include a discussion of (1) the extent to which you responded to assignment objectives, (2) the quality of your writing (to include grammar and spelling, organization, flow and clarity), and (3) your ability to demonstrate depth and critical thinking. If there is something about an assignment that is unclear to you, it is your job to bring this to my attention in advance of the due date. Students wishing to appeal a grade must me with the information requested no later than two weeks after the assignment has been returned to students. If you receive a grade and wish to appeal parts of that grade, I require a 24-hour time frame from the time you receive the grade until I will respond to information about the grade.

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.

Grade Appeals/Grievance Policy:

The process for appeal a final grade is set forth in the School of Social Work’s Student Rights and Responsibilities Handbook.

<http://socwork.wisc.edu/files/StudentRightsResponsibilities.pdf>

Appendix A

Competency and Description	Course Content relevant to Dimensions that Comprise the Competency*	Location in syllabus
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<p>2.1.2 Engage Diversity and Difference in Practice Advanced practice social workers demonstrate in a focus area an advanced understanding of how diversity and difference characterize and shape the human experience and are critical to the formation of identity. They demonstrate comprehension that dimensions of diversity are understood as the intersectionality of multiple factors including but not limited to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. Advanced practice social workers recognize that, as a consequence of difference, a person’s life experiences may include oppression, poverty, marginalization, and alienation, as well as privilege, power, and acclaim, and apply this recognition in their practice. They also demonstrate in practice their understanding of the forms and mechanisms of oppression and discrimination, and a recognition of the extent to which a culture’s structures and values, including social, economic, political, and cultural exclusions, may oppress, marginalize, alienate, or create privilege and power.</p>	<p>Lecture, reading, videos and discussion related to dimensions of diversity and the delivery of services (K, V, S, C/AP)</p> <p>Discussion on meaning of recovery across dimensions of diversity</p> <p>Discussion on gaining rapport & therapeutic alliance with a diverse population</p> <p>Video on minimizing re-traumatization by Dr. Shannon</p> <p>Reading book & discussion of <u>The Color of Hope: People of Color Mental Health Narratives</u></p> <p><u>Assignments:</u> Reflection Paper #1 (K, V, S, C/AP) Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP)</p> <p>Teaching a Skill or Brief Intervention (K, V, S, C/AP)</p>	<p>Weeks 1,2, 3, 4, 5, 6, 7, 8, and 14</p> <p>Weeks 1</p> <p>Weeks 2,3, 4</p> <p>Week 4</p> <p>Weeks 1-3</p> <p>p. 13</p> <p>p. 14-16</p> <p>p.17</p>
<p>2.1.4: Engage in Practice-Informed Research and Research-Informed Practice Advanced Generalist social workers understand and demonstrate that evidence informed practice derives from multi-disciplinary sources and multiple ways of knowing, demonstrate the processes for translating research findings into their focus area of practice.</p>	<p>Lecture, reading, videos and discussion related practice-informed research and research-informed practice (K, S, C/AP)</p> <p>Videos on adverse childhood effects and evidence-based practices</p> <p><u>Assignments:</u> Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP) Reflection paper (K, V, S, C/AP) Role play & self-Assessment paper (K, S, C/AP)</p>	<p>Weeks 1, 2,3,4,5, 7,8, 13 &14</p> <p>Week 13</p> <p>p.14-16</p> <p>P.16</p> <p>p.18-19</p>
<p>2.1.6: Engage with Individuals, Families, Groups, Organizations, and Communities</p>	<p>Lecture, readings, videos, discussion on gaining therapeutic alliance and engaging</p>	<p>Weeks 1,2,3,</p>

<p>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.</p>	<p>individuals in mental health culturally humble clinical practice (K, S, C/AP)</p> <p><u>Assignments:</u> Reflection Paper (K, V, S, C/AP)</p> <p>Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP)</p> <p>Role play & self-Assessment paper (K, S, C/AP)</p>	<p>4,5,6,7,8,9, & 14</p> <p>p.13</p> <p>p.14-16</p> <p>p.18-19</p>
<p>2.1.7 Assess Individuals, Families, Groups 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 a focus area. They engage in inter-professional collaboration and utilize methods of assessment appropriate to a 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.</p>	<p>Lecture, readings, videos, discussion on assessment of individuals and how personal experiences/biases influence assessment and treatment in mental health practice (K, V, S, C/AP)</p> <p><u>Assignments:</u> Reflection paper (K, V, S, C/AP)</p> <p>Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP)</p> <p>Role play & self-Assessment paper (K, S, C/AP)</p>	<p>Weeks 3, 4, 6,7,8,10 &13</p> <p>p. 13</p> <p>p. 14-16</p> <p>p. 18-19</p>

<p>2.1.8 Intervene with Individuals, Families, Groups 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. They independently identify, analyze and implement evidence-informed interventions to achieve the goals of clients and constituencies in a focus area. 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. They also engage in interdisciplinary, inter-professional, and inter-organizational collaboration as appropriate, in evaluating and implementing interventions.</p>	<p>Lecture, reading, videos, and small/large group discussions focused on evidence-based therapy and interventions (K, S, V, C/AP)</p> <p>Video & Discussion on Attachment Theory</p> <p><u>Assignments:</u> Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP) Treatment plan exercise (K, V, S, C/AP)</p> <p>Teaching a skill or brief intervention (K, S, C/AP)</p> <p>Role play & self-Assessment paper (K, S, C/AP)</p>	<p>Weeks 3, 5, 7, 8, &11</p> <p>Week 5</p> <p>p.14-16</p> <p>p. 17</p> <p>p.17</p> <p>p. 18-19</p>
<p>2.1.9 Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities 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. They are knowledgeable about various methods of evaluating outcomes and practice effectiveness in the focus area and incorporate their knowledge of theories of human behavior and the social environment when evaluating outcomes. Advanced Generalist social workers employ qualitative and quantitative methods as appropriate for evaluating outcomes and practice effectiveness in the focus area.</p>	<p>Lecture, reading, videos, and small/large group discussions focused on evaluating outcomes and practice effectiveness within the therapeutic alliance as well as with treatment outcomes (K, S, V, C/AP)</p> <p><u>Assignments:</u> Small Group Theoretical Approach Research & Presentation Assignment (K, V, C/AP) Developing a Treatment plan (K, S, V, C/AP)</p> <p>Teaching a Skill or Brief Intervention (K, V, S, C/AP)</p> <p>Role play & self-Assessment paper (K, S, C/AP)</p>	<p>Weeks 2, 4 & 14</p> <p>p. 14-16</p> <p>p. 17</p> <p>p. 17</p> <p>p.18-19</p>

*K=Knowledge; V=Values; S=Skills; C/AP= Cognitive and Affective Processes

