



COURSE TITLE:	Interpersonal Practice with Families. Winter 2015
COURSE NUMBER:	623 (Section 001)
CREDIT HOURS:	3
PREREQUISITES:	INTP 521
APPLIES TO, AND METHODS TYPE:	Practice Method Concentration, Advanced IP Methods
INSTRUCTOR:	Leslie Doty Hollingsworth, PhD, ACSW, LMSW
CLASS MEETS:	Wednesdays, 9AM-12Noon
PLACE:	B-798 Lower Story- School of Social Work Bldg.
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COURSE DESCRIPTION:

This course will build on the content presented in course SW 521 (i.e. Interpersonal Practice with Individuals, Families and Small Groups). This course will present a theoretical analysis of family functioning and integrate this analysis with social work practice. Broad definitions of "family" will be used, including extended families, unmarried couples, single parent families, gay or lesbian couples, adult siblings, "fictive kin," and other inclusive definitions. Along with theories and knowledge of family structure and process, guidelines and tools for engaging, assessing, and intervening with families will be introduced. The most recent social science theories and evidence will be employed in guiding family assessment and intervention. This course will cover all stages of the helping process with families (i.e. engagement, assessment, planning, evaluation, intervention, and termination). During these stages, client-worker differences will be taken into account including a range of diversity dimensions such as ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), marital status, national origin, race, religion or spirituality, sex, and sexual orientation. Various theoretical approaches will be presented in order to help students understand family structure, communication patterns, and behavioral and coping repertoires. The family will also be studied as part of larger social systems, as having its own life cycles, and as influencing multiple generations. An overview will be given of current models of practice.

COURSE CONTENT:

Content on the engagement phase will emphasize methods for overcoming barriers to help seeking that are both internal and external to the family. Students will learn how to identify client-worker differences and how to find common ground with clients. In particular, students will learn methods for engaging the most reluctant family members. Assessment content will draw from the major theories of family functioning and life-span development, as well as meta-theories that address oppressive social forces (e.g. sexism and racism). A sampling of reliable assessment measures will be introduced and applied. Goal setting and planning will flow from the assessment of the family, the goals of the family and its individual members, empirical

evidence for different approaches, and ethical considerations. A variety of intervention and prevention models will be presented, along with the specific methods and procedures of each model. Work with nontraditional families, couples counseling, and divorce and separation counseling will also be included. The role of social work in the primary prevention of family problems will be emphasized (e.g. family life education programs). Methods for the evaluation of intervention and prevention efforts will be covered, including the use of self-report and observational measures.

COURSE OBJECTIVES:

Upon completion of the course, students will be able to:

1. Articulate at least two conceptual frameworks that take into account individual and family needs, problems and experiences within the family, and resources and opportunities of the social environment. (Practice Behaviors 3 IP, 9 IP)
2. Describe challenges, risks, and tasks as they apply to diverse groups such as; women, the poor, families of color, and gay and lesbian families. (Practice Behavior 5. IP)
3. Identify the resources, strengths, and effective family processes across diverse populations including those based on a range of diversity dimensions such as ethnicity, race, sexual orientation, and class. (Practice Behavior 4. IP)
4. Apply family assessment frameworks that are ecological and family-centered and take into account the influence of oppressive social forces. Such assessments will account for the presence and impact of family violence, the presence and impact of substance abuse, and the impact that the students' own value system has on their assessment formulations. (Practice Behaviors 5 IP, 6 IP, 9 IP, 10.b.IP)
5. Describe ways to establish a professional relationship with family members in order to engage in assessment, goal setting, and planning. The capacity to establish relationships with families will include an appreciation of cultural diversity and the unique strengths of nontraditional families. (Practice Behaviors 5 IP, 6 IP, 9 IP, 10a.IP)
6. Identify at least two models of prevention and intervention and explain the applicability of each model to the challenges faced by families. (Practice Behaviors 2 IP, 3 IP, 10.c.IP)
7. Apply appropriate outcome measures that are reliable and determined by agreed upon goals in order to evaluate the effects of family-centered interventions. (Practice Behaviors 10.b.IP, 10.d.IP)

COURSE DESIGN. The course is designed to include lectures, assigned theoretical and practice reading and discussion, exposure to the actual experiences of families in general and to those of particular families through such media as case materials, videotapes, and client personal descriptions; and role-playing as worker and as family member.

RELATIONSHIP OF THE COURSE TO FOUR CURRICULAR THEMES

Multiculturalism & Diversity: will be addressed by considering the unique characteristics of families of composed of various diversity dimensions (e.g., ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), marital status, national origin, race, religion or spirituality, sex, and sexual orientation), and by tailoring engagement, assessment, goal setting, planning, and intervention to these characteristics. Assessment procedures will focus on strengths rather than deficits in family functioning.

Social Justice: Will be addressed through a multi-systems perspective in which students will view the family as a system within, and affected by, a larger social structure. Family assessment will consider the impact of poverty and discrimination based on various diversity dimensions and other factors in causing or maintaining family problems. Traditional solutions to family problems will be analyzed for their potential to maintain oppression and disempowerment. Empowerment models of practice will be stressed, including the involvement of natural helping networks and teaching advocacy skills to families.

Promotion, Prevention, Treatment & Rehabilitation: Will be addressed by identifying the family functions and processes that are useful for the successful development of its members. Prevention programs will be described that are designed to help the general population and at-risk families to avert problems before they develop (e.g. marital enhancement, parent education, premarital counseling, parent-school linkages, etc.).

Behavioral and Social Science Research: Will be addressed by discussing the relationship of theoretical and empirical knowledge to family practice, by describing the theoretical frameworks within which practice methods may be carried out, and by identifying and critiquing the techniques and outcomes of evaluation which have been used with each practice method.

RELATIONSHIP OF THE COURSE TO SOCIAL WORK ETHICS AND VALUES:

Ethical dilemmas unique to family work will be presented, such as balancing individual and family goals, contracts regarding confidentiality and record-keeping, and addressing oppressive family structures. Presentation of value conflicts that exist toward families in society will be used to raise the students' awareness of personal and professional values.

Faculty Approval of Course Statement: 11/30/2006

INTENSIVE FOCUS ON PRIVILEGE, OPPRESSION, DIVERSITY AND SOCIAL JUSTICE (PODS)

ASSIGNMENTS:

Class Participation and Role Play: Includes preparing for, and participating in class discussion, submitting a case study at the beginning of the term, and participating in role play exercises.

Mid-term Case-based Integrative Paper

Students receive a case study and are asked to

- a. Identify the problem(s) presented in the case study
- b. Provide a theory-based hypothesis for explaining the problem(s), using two published works
- c. Select the appropriate evidence-based family therapy model(s)¹
- d. Discuss application of therapy model(s) in engagement, assessment, intervention, termination, and evaluation

¹ In some instances an established ethical best practice model may be substituted for an evidence-based model with appropriate explanation and empirical support provided by the student.

- e. Discuss how to consider multiculturalism and diversity, social justice, promotion/prevention/treatment, and/or rehabilitation, behavioral and social science research, and social work values and ethics.

Final Case-based Integrative Paper

Students receive a case study and are asked to:

- a. Identify the problem(s) presented in the case study
- b. Provide a theory-based hypothesis for explaining the problem(s), using two published works
- c. Select the appropriate evidence-based family therapy model(s)²
- d. Discuss application of therapy models in engagement, assessment, intervention, termination, and evaluation
- e. Discuss how to consider multiculturalism and diversity, social justice, promotion, prevention, treatment, rehabilitation, behavioral and social science research, and social work values and ethics.

Approved by faculty: 9/3/2014.

Required Reading

Required Texts:³

Van Hook, M. P. (2014). *Social work practice with families: A resiliency-based approach. Second edition*. Chicago: Lyceum Books, Inc. (**Ulrich's Bookstore and Grad Library Reserves**)

Recommended Reading

McGoldrick, M., & Hardy, K. V. (Eds.). (2008). *Re-visioning family therapy: Race, culture, and gender in clinical practice, Second edition*. New York: The Guilford Press.

Other works as assigned. (Will be made available on the CTools site.)

Structure and Format

9:10 – 9:15 Housekeeping details

9:15 – 10:30 Lecture, review, assigned reading discussion, end of chapter questions; videotapes

10:30 - 10:45 Break

10:45 – 12:00 Practice lab activities

In addition to other values, principles, and standards put forth in the NASW Code of Ethics, this course subscribes, in particular, to the stated **values** of:

- *The Importance of Human Relationships*. In that regard, the **Ethical Principle** that *Social workers recognize the central importance of human relationships* is upheld, recognizing, in particular, that:
 - Social workers understand that relationships between and among people are an important vehicle for change.
 - Social workers engage people as partners in the helping process.

² In some instances an established ethical best practice model may be substituted for an evidence-based model with appropriate explanation and empirical support provided by the student.

³ Required texts are available for purchase at Ulrich's Bookstore.

- Social workers seek to strengthen relationships among people in a purposeful effort to promote, restore, maintain, and enhance the wellbeing of individuals, families, social groups, organizations, and communities.
- *Competence*. In that regard, the course is oriented to facilitating the development and/or expansion of students' professional knowledge and skills and their ability to apply them.
 - Knowledge of theory is considered essential in informing practice.
 - Knowledge of empirical evidence supporting practice is considered essential.
 - In the absence of empirical evidence (involving randomly controlled experiments), attention to ethical best practices is strongly encouraged.
- *Social Justice*. In that regard, consideration will be given to the systemic and structural forces that surround the circumstances that precipitate clients' needs for social work services.
 - Such circumstances include being discriminated against as a result of being a member of a race or ethnic group or nationality or sexual orientation or religion or age group or ability group that differs from the U. S. majority and/or having insufficient economic, educational, or social means to enjoy a comfortable level of well-being.
 - Circumstances in which the clinician and/or the agency in which the clinician practices are members of the majority group are important sources of attention to ensure that the systemic and structural forces of discrimination in the larger society are not present in client services.
- *Respect for the Dignity and Worth of the Person*. In that regard, attention is given to the competence families bring to services rather than on deficits perceived by the clinician.
 - Client competence has to do with the strengths clients bring to the counseling experience and their histories of having overcome adversity. All this occurs while keeping in mind that what the clinician considers an adversity may not be considered an adversity from the standpoint of the family and that it is up to the family to define adversity in the life of the family.

In accordance with the curricular themes, social work values and ethics, and specifically stated **values** above, we will begin the course with an introduction to the concept of resiliency and other ideological frameworks for approaching social work practice with families. This will be accompanied by attention to the broader consideration of culture and its relationship to social work practice with families as discussed by Van Hook and by McGoldrick and Hardy. This will be followed by a review of considerations and methods of engaging, assessing, and planning intervention with families who seek or are referred for clinical social work services. Interventions covered include evidence-based practice models (cognitive therapy; psychoeducational family therapy; multisystemic therapy) and ethical best practice models on which these evidence-based models build (e.g., structural family therapy; solution-focused family therapy; narrative family therapy; Bowen family systems therapy; object relations family therapy). We'll end the course with a discussion of some of the difficult life situations that bring families into clinical practice and how the practice models covered are relevant.

Practice Lab - In-class Role Plays

Before the start of the second class session, each student will submit a case study. The case study should be an anonymized version of a case encountered in one's field instruction placement or in a place of employment or it can be constructed by the student. In any case, the information provided should include the following:

- Name of each family member, family role, age, and any other identifying, demographic, or cultural information considered relevant for each family member.
- Relationship information of family members, including relationship history.
- Problem(s) presented.
- History and progression of the problem and of attempts to resolve it, including involvement of other systems and service providers.
- Any formal diagnostic information.
- The point in therapy at which the family is being seen (e.g., in the initial session or a subsequent session).

Case study and family member selections.

I'll review the submitted case studies and will select eight cases that best lend themselves to a role play using the models being covered in the class. By the third class session, I'll assign a different case study to coincide with each of the dates on which the models are being covered. I'll also assign class members according to the number of members required for the role play family. All class members will experience the role of a family member at least once.

Co-therapists and reflecting team selections.

Each role play will be led by a team of two and occasionally three co-therapists, all assigned randomly. Reflecting teams will also be part of the role-play experience. Three class members will be randomly assigned in advance as the reflecting team for each role play. Instructions and assigned readings will be available on the CTools site and will be discussed on the date intervention planning is covered. Co-therapists should read required and recommended readings.

Planning role plays.

Role plays will begin on February 18th. The co-therapists will receive information about the family well in advance of the role play. The co-therapists will be responsible for applying the assigned family social work practice model to an intervention in the problem presented, depending on the point in therapy at which the family is being seen. Role play team members should meet in advance outside of class to review the family information provided, decide who will perform which roles, how the co-therapists will interact and proceed, what the intervention plan will be for the particular session, and how the session will be terminated.

Sixty minutes will be provided for the role play, including one consultation break in which the reflecting team and the co-therapy team/family will exchange places for a brief period and proceed according to the instructions for using a reflecting team.

Prior to the start of the role play and after the "family" is situated in the interviewing room (10:45), the role play team will provide the class with a brief introduction and plan with regard to the role play. Class members will also be provided with printed copies of the role play scenarios prior to the beginning of the role play session. Debriefing will occur in the final 15 minutes of the class. (11:45AM-12:00Noon)

Grading.

Grading for role plays is part of the Attendance/Participation points. Role plays provide a learning experience so that performance itself is not graded. No submission is required.

ASSIGNMENTS AND GRADING BASIS

Overall Grading Criteria

Written assignments should be carried out according to the stated instructions for each. Full citations and references should be included. *Please separate your paper by headings and subheadings. Use the 6th edition of the American Psychological Association (APA) Publications Manual for appropriate citations within the body of your paper, reference list, and headings and sub-headings.*

Written assignments will be evaluated according to whether they are:

- **Strong:** This work not only fully and accurately meets all requirements of the assignment but shows evidence of extraordinary attention, depth of effort, and critical thought on the part of the student. Most would consider them model assignments. These assignments would generally translate into A or A+ letter grades.
- **Acceptable:** This work adheres fully to the requirements of the assignments; however, the quality of the work is not particularly special or noteworthy. These submissions would generally translate into B or B+ letter grades.
- **Barely acceptable:** This work meets expectations in some but not all aspects of the assignment. It would generally translate into B-, C or C+ letter grades.
- **Unacceptable:** This work does not meet published expectations of the assignment. It would generally translate into C or D letter grades.

Notes:

- **In addition to the above, accuracy of spelling, grammar, and sentence structure, and general appropriateness for graduate work will be considered in the grading of all written assignments.** Please make use of resources through the *SSW Office of Student Services* or the University's *Sweetland Writing Center* in preparation of papers or proofreading.
- All written assignments, with the exception of make-up papers, should be submitted as attachments through the CTools site. Submit make-up papers as email attachments.

Assignments:

A. Attendance and Participation as class member (3 points per class attended with participation – not including the first class but including April 15th). Maximum possible: 13 classes – 39 points. Students enrolling in the course after the first class will be responsible for submitting make-up work for the missed class(es). Ungraded case studies must be submitted by the start of the second class - January 14, 2015 (See discussion of Practice Lab – In Class Role Plays, p. 6 of the syllabus.)

1. All students are expected to prepare for class in advance by:
 - a. Reading the assigned textbook and other assigned course material.
 - b. Preparing responses to discussion questions at the end of chapters in the Van Hook text or as distributed.
 - c. Viewing assigned videos.
2. All students are expected to participate in role plays as outlined and in other in-class experiential activities.

MAKE-UP OPTION: The maximum number of grading points attainable in this class is 100. Therefore, missing a class results in a reduction of 3 points. Although attendance at all classes is important, students may take advantage of up to two make-up options. (Classes missed beyond the two or any class not made up will result in a deduction from

the final grade of 3 points per missed class.) To take advantage of the make-up option, students should submit, as an email attachment, all work that would have been expected had they attended class. Examples are answers to end of chapter discussion questions or other discussion questions provided by the instructor; reviews and summaries of assigned reading materials and videos.

NOTE: Attendance and participation points will be recorded on the CTools site at the end of the term. The weekly sign-in sheet is the only mechanism used to record attendance. It is the class member's responsibility to sign in weekly. **Unsigned attendance sheets will be recorded as an absence. There will be no exceptions.**

B. Mid-term Case-based Integrative Paper. Length: 10 pages minimum; 12 pages maximum. Maximum points: 30 points. Due: February 25th, 2015

Students will receive a case study and are asked to

- a. Identify the problem(s) presented in the case study
- b. Provide a theory-based hypothesis for explaining the problem(s), using two published works
- c. Select the appropriate evidence-based family therapy model(s)⁴
- d. Discuss how you, as the clinician, would apply the selected therapy model(s) in engagement, assessment, intervention, termination, and evaluation. [This should be detailed so that in reading it, I'm able to envision what the process would look like if I were observing it.]
- e. Discuss how to consider multiculturalism and diversity, social justice, promotion/prevention/treatment, and/or rehabilitation, behavioral and social science research, and social work values and ethics. [This should be detailed and based on evidence-based or best practice knowledge. It is not enough to write a sentence or two.]

NOTE: Writing of the Mid-term Case Study Integrative Papers should be based primarily on knowledge acquired from reading assignments from January 14th through February 11th.

C. Final Case-based Integrative Paper. Length: 12 pages minimum; 15 pages maximum. Maximum points: 31 points. Due: April 17th, 2015. Students will receive a case study and are asked to:

- a. Identify the problem(s) presented in the case study.
- b. Provide a theory-based hypothesis for explaining the problem(s), using a minimum of two published works.
- c. Select the appropriate evidence-based family therapy model(s).⁵
- d. Discuss application of therapy models in engagement, assessment, intervention, termination, and evaluation. [This should be detailed so that in reading it, I'm able to envision what the process would look like if I were observing it.]
- e. Discuss how to consider multiculturalism and diversity, social justice, promotion, prevention, treatment, rehabilitation, behavioral and social science research, and

⁴ In some instances an established ethical best practice model may be substituted for an evidence-based model with appropriate explanation and empirical support provided by the student.

⁵ In some instances an established ethical best practice model may be substituted for an evidence-based model with appropriate explanation and empirical support provided by the student.

social work values and ethics. [This should be detailed and based on evidence-based or best practice knowledge. It is not enough to write a sentence or two.]

NOTE: Writing of the Final Case-based Integrative Paper should draw from all reading assignments, lectures, videos, and other contents throughout the course but especially focusing on materials covered from February 18th through April 8th.

ASSIGNMENT SUMMARY

Assignment	Points
A. Class attendance/participation	39 points maximum possible (3/class after the first)
B. Mid-term case-based integrative paper	30 points maximum possible
C. Final case-based integrative paper	31 points maximum possible
Total	100 points maximum possible

***Please note that grades are based on a 100 point system.**

Grading

Grades are earned by successfully completing the assignments as described above.

A+ 100-99

A 95-98

A- 90-94

B+ 87-89

B 84-86

B- 80-83

C+ 78-79

C 74-77

C- 70-73

D 60-69 (no credit)

E 50-59 (no credit)

F <50 (no credit)

If Special Accommodations would be helpful to you in the completion of assignments (e.g., longer time, a separate space to reduce distraction), please email me or otherwise let me know privately and by the second class session. Similarly, if there are other arrangements or responses that would be helpful to you in maximum use of, and success in this course, please notify me by the second class session.

Instructions for written assignments. Written assignments are to be completed independently. Please see the Student Guide section on “Ethical Conduct in the University Environment.” This section addresses plagiarism and the possible consequences for failing to appropriately attribute authorship for paraphrases or ideas acquired from another source. The University of Michigan Library system has an on-line resource to assist you in preparing proper citations for assignments using the *American Psychological Association Publications Manual 6th Edition*.

Policy on Class Absences: In addition to missed content and classroom experience, absence from class for any reason results in not attaining the attendance/participation points that are available for the class missed. It is the student’s responsibility to make sure the attendance sheet is signed and to complete any make-up assignments within the required period (prior to the start of the class following the class that was missed). The make-up option is available for up to two missed classes. (Please note the make-up policy under Assignment A.)

Grades of Incomplete (I) are granted only with appropriate documentation of the student’s inability to complete the work as referred to in the *Student Guide to the MSW Program*.

Cell-phone or computer usage: In courtesy to me and members of the class, please refrain from texting or using your computer for anything other than note-taking or required classroom activities. Please place your cell phones on off or vibrate. (If your place of employment, internship, or other circumstances require you to be available for contact by cell-phone, please notify me.)

COURSE OUTLINE

Date	Topic/Chapter
1/7/2014	<p>Introductions</p> <p>Discussion of the course syllabus</p> <p>Orientation to the course</p> <p>Lecture on Social Work Practice with Families from a Global Perspective: Constructing a Family Therapy Intervention and Measurement Method (Dr. Yumi Katari)</p> <p>Recommended reading:</p> <p>Oshita, Y., & Kamo, K. (2011). <i>Reconstructing meaningful life worlds: A new approach to social work practice</i>. Bloomington, IN: iUniverse.</p> <p>Narabayashi, R. (2006). Family therapy in Japan – context and development. <i>International Congress Series 1287</i>, 150-153. Doi:10.1016/j.ics.2006.01.005</p> <p>Kojima, T. (2006). The development of family therapy in Japanese psychosomatic medicine. <i>International Congress Series 1287</i>, 154-157. Doi:10.1016/j.ics.2005.12.050</p> <p>Yoshikawa, S. (2006). Approach of family therapy for psychosomatic diseases in Japan. <i>International Congress Series 1287</i>, 158-163. doi:10.1016/j.ics.2006.01.066</p>
1/14/2015	<p>Resiliency and Other Ideological Perspectives for Conceptualizing Social Work Practice with Families (e.g., Deficit; Strengths-based; Affirmative)</p> <p>Required reading:</p> <p>Van Hook text – pp. 3 – 49</p> <p>Recommended reading:</p> <p>Bermudez, J. M., & Mancini, J. A. (2013). Familias Fuertes: Family resilience among Latinos. In D. S. Becvar (Ed.), <i>Handbook of Family Resilience</i> (pp.</p>

	<p>215-227). New York: Springer.</p> <p>Marks, L. D., Hopkins, K., Chaney, C., Monroe, P. A. Nesteruk, O., & Sasser, D. D. (2008). "Together we are strong:" A qualitative study of happy, enduring African American marriages. <i>Family Relations</i>, 57, 172-185.</p> <p>McGeorge, C. R., & Carlson, T. S. (16 December 2014). The state of lesbian, gay, and bisexual affirmative training: A survey of faculty from accredited couple and family therapy programs. <i>Journal of Marital and Family Therapy</i>. Doi: 10.1111/jmft.12106. Case studies are due.</p>
1/21/2015	<p>Diversities of Culture, Social Context, Family Structure, and Spirituality within a Resiliency Framework</p> <p>Required reading:</p> <p>Van Hook text – pp. 109 – 152; pp. 319 – 341.</p> <p>McGoldrick, M., & Hardy, K. V. (2008). Introduction: Re-visioning family therapy from a multicultural perspective. In M. McGoldrick & K. V. Hardy (Eds.), <i>Re-visioning family therapy: Race, culture, and gender</i>, pp. 3 – 24). New York: The Guilford Press.</p>
1/28/2014	<p>Engagement and Setting the Stage for Working with Families: Development of the Therapeutic Alliance.</p> <p>Required reading:</p> <p>Van Hook text – pp. 50 – 63.</p>
2/4/2015	<p>Assessment of Families</p> <p>Required reading:</p> <p>Van Hook text, Chapter 3, pp. 64-108</p>
2/11/2015	<p>Intervention Planning</p> <p>Required reading:</p> <p>Van Hook text – Part II, pp. 153-163.</p> <p>Andersen, T. (1991). <i>The reflecting team: Dialogues and dialogues about the dialogues</i>. New York: W. W. Norton & Co. (Handout)</p> <p>Recommended reading:</p> <p>Chang, J. (2010). The reflecting team: A training method for family</p>

	<p>counselors. <i>The Family Journal: Counseling and Therapy for Couples and Families</i>, 18(1), 36-44. Doi: 10.1177/1066480709357731</p> <p>Mitchell, P., Rhodes, P., Wallis, A., & Wilson, V. (2014). A comparison of two systemic family therapy reflecting team interventions. <i>Journal of Family Therapy</i>, 36:237-254. Doi: 10.1111/1467-6427.12018</p>
2/18/2015	<p>Cognitive-behavioral family therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 5, pp. 165 – 188.</p> <p>Recommended reading:</p> <p>Kolko, D. J., Baumann, B. L., Herschell, A. D., Hart, J. A., Holden, E. A., & Wisniewski, S. R. (2012). Implementation of AF-CBT by community practitioners serving child welfare and mental health: A randomized trial. <i>Child Maltreatment</i>, 17, 32-46. DOI: 10.1177/1077559511427346</p> <p>Wells, K. C., & Heilbron, N. (2012). Family-based cognitive-behavioral treatments for suicidal adolescents and their integration with individual treatment. <i>Cognitive and behavioral practice</i>, 29, 301-314. DOI: 1077-7229/11/301-314.</p>
2/25/2015	<p>Psychoeducational Family Counseling</p> <p>Required reading:</p> <p>Van Hook text – Chapter 6, pp. 189-206.</p> <p>Recommended reading:</p> <p>MacPherson, H. A., Leffler, J. M., & Fristad, M. A. (2013). Implementation of multi-family psychoeducational psychotherapy for childhood mood disorders in an outpatient community setting. <i>Journal of Marital and Family Therapy</i>, 40(2), 193-211. Doi: 10.1111/jmft.12013</p> <p>Mid-term case-based integrative papers are due.</p>
3/4/2015	SPRING BREAK – Class will not meet.
3/11/2015	<p>Structural family therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 7, pp. 207 – 222.</p>

	<p>Recommended reading:</p> <p>Lindblad-Goldberg, M., & Northey, W. F. Jr. (2013). Ecosystemic structural family therapy: Theoretical and clinical foundations. <i>Contemporary Family Therapy</i>, 33, 147-160. DOI 10.1007/s10591-012-9224-4.</p>
3/18/2015	<p>Solution-focused family therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 8, pp. 223 – 247.</p> <p>Recommended reading:</p> <p>Gingerich, W. J. (2012) Solution-focused brief therapy outcome research. In <i>Solution-focused brief therapy: A handbook of evidence-based practice</i>, pp. 95-111.</p> <p>Trepper, T. S. (2012). Solution-focused brief therapy with families. <i>Asia Pacific Journal of Counselling and Psychotherapy</i>, 3(2), 137-148. DOI:10.1080/21507686.2012.718285.</p>
3/25/2015	<p>Narrative family therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 9, pp. 248 – 264.</p> <p>Recommended reading:</p> <p>Leslie, C. A. (2011, January). Narrative therapy with families. <i>Marriage and Family Therapy: A Practice-Oriented Approach</i>, 313-340.</p> <p>O’Hanlon, B. (1994, Nov.-Dec.). “The third wave” and Epston, D. “Extending the conversation.” <i>The Family Therapy Networker</i>.</p>
4/1/2015	<p>Multisystems family therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 10, pp. 266 – 294.</p> <p>Also, Van Hook – Appendix – Multisystemic Family Treatment (MST), pp. 383-384</p> <p>Recommended reading:</p> <p>Baldwin, S. A., Christian, S., Berkeljon, A., Shadish, W. R., Bean, R. (2012). The effects of family therapies for adolescent delinquency and substance abuse: A meta-analysis. <i>Journal of Marital and Family Therapy</i>, 38(1), 281-</p>

	<p>304.</p> <p>Multisystemic Therapy (MST).</p> <p>Tighe, A., Pistrang, N., Casdagli, L., Baruch, G., & Butler, S. (2012), <i>Journal of Family Psychology</i>, 26(2), 187-197. DOI: 10.1037/a0027120</p>
4/8/2015	<p>Bowen family systems therapy</p> <p>Required reading:</p> <p>Van Hook text – Chapter 11, pp. 295-304.</p> <p>Recommended reading:</p> <p>Charles, R. (2010). Is there any empirical support for Bowen's concepts of differentiation of self. <i>The American Journal of Family Therapy</i>, 29(4), 279-292. DOI: 10.1080/0192618026498</p> <p>Knauth, D. G. (2003). Family secrets: An illustrative clinical case study guided by Bowen family systems theory. <i>Journal of Family Nursing</i>, 9(3), 331-344. DOI:10.1177/1074840703255451</p>
4/15/2015	<p>Object Relations Family Therapy – LAST CLASS SESSION</p> <p>Required reading:</p> <p>Van Hook text – Chapter 12, pp. 305-318</p> <p>Recommended reading:</p> <p>Diamond, D. & Meehan, K. B. (2013). Attachment and object relations in patients with narcissistic personality disorder: Implications for therapeutic process and outcome. <i>Journal of Clinical Psychology</i>, 69(11), 1148-1159. DOI: 10.1002/jclp.22042</p> <p>Jordan, K., & Shaw, R. (2008). Object relations theory in family therapy. In K. Jordan (Ed.), <i>The quick theory reference guide</i> (pp. 209-225). Hauppauge, NY: Nova Science Publishers, Inc.</p> <p>Scharff, J., & Scharff, D. (2003). Object relations and psychodynamic approaches to couple and family therapy. In T. Sexton, G. Weeks, & M. Robbins (Eds.), <i>Handbook of family therapy</i> (pp. 59-81). New York: Brunner-Routledge.</p>
4/17/2015	<p>Final integrative papers are due. Class does not meet.</p>