



SW IP Skills Lab
511
Fall 2015

I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.

~Maya Angelou

Professor Julie Ribaudo
2784 SSWB

Office: (734) 936-4949
Email: jribaudo@umich.edu

Office Hours:
Monday 12:15 - 1:30
Thursday 12:15 - 1:00
Others gladly by appointment - Please email me to schedule a time.

COURSE DESCRIPTION

This course offers students the opportunity to practice the assessment, engagement, intervention and evaluation skills essential to interpersonal practice with children, youth and their families while considering the community, organizational, and policy contexts in which social workers practice. The student's field experience and future practice methods courses will build upon the skills rehearsed in this basic course. Throughout this course, students examine social work values and ethics as well as issues of race, ethnicity, gender, sexual orientation, religion, and ability as these relate to interpersonal practice.

COURSE CONTENT

In this course all phases of the IP treatment and prevention process (i.e. engagement, assessment, planning, intervention, evaluation, and termination) will be taught and rehearsed, with attention to how they are applied to work with individuals, families, and small groups. Students will learn and practice specific skills, such as empathic inquiry and collaborative exploration to assess problems in clients' lives that relate to attributes of the client (e.g. age, race, ethnicity, gender, sexual orientation, ability) as well as the historical, political, situational,

environmental and psychological factors relevant to the client's functioning. Students will practice the use of specific assessment tools, such as biopsychosocial assessment, genograms, ecomaps, and family sculpting to discern patterns of functioning, to assess strengths and vulnerabilities, and to plan, implement and monitor process of growth or change strategies. Students will practice methods of intervention specific to three modalities of intervention, such as CBT, Child-Parent Psychotherapy and Psychodynamic Psychotherapy. Additionally, students will learn strategies of self-regulation in order to stay cognitively and emotionally able to effectively intervene in therapeutic relationships. Students will practice methods of evaluating change based on situational effectiveness and on whether their implementation enhances the client's capacity for self-determination and the system's capacity for justice.

COURSE OBJECTIVES

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

- (1) Demonstrate skills for engagement such as empathic inquiry, active listening, collaborative exploration, case recording and goal setting.
- (2) Utilize three assessment tools to identify client strengths and vulnerabilities, as well as sources of biopsychosocial, cultural, sociopolitical and spiritual risks and supports.
- (3) Recognize the impact of age, race, gender, ethnicity, social class, sexual orientation, power and privilege on interpersonal practice by
 - (a) Demonstrating self-awareness of their own privilege, identity, positionality and life experiences impact on their capacity to relate to others with different personal privilege, identity, sociopolitical and life experiences.
 - (b) Describing how others who are very different may perceive them and how status and power issues impact professional relationships with clients, colleagues, and other professions.
- (4) Conduct culturally sensitive interpersonal practice by:
 - (a) Articulating socio-political, environmental, family and/or individual-level contributing factors of at least two specific disorders, prevention and/or treatment goals, developing measurable prevention and treatment objectives, and employing measurement tools to monitor and evaluate practice while maintaining sensitivity to the individualized needs of clients.
 - (b) Implementing treatment protocols consistent with treatment plans and sensitive to clients' situations
 - (c) Recognizing basic termination issues that pertain to interpersonal practice.
- (5) Demonstrate intervention skills specific to two evidence informed treatment modalities such as CBT, Child-Parent Psychotherapy, and Psychodynamic Psychotherapy.
- (5) Demonstrate capacity for strategic use of self in the therapeutic relationship by identifying their own sociopolitical, environmental, and experiential or emotional/cognitive factors that may support or impede the therapeutic relationship.

COURSE DESIGN

This is the inaugural run of a new way of teaching SW511. Although some theory will be reviewed, most of our time will be utilized for practice and reflection. Learning happens best in a supportive, comfortable environment. To that end, we will use various methods such as

individual exercises, class discussion, and small group work to examine the material presented. We will use PowerPoint, videos, movie clips and song clips to illustrate topics.

My hope is that you will glean basic techniques even within the classroom experience. I will try to highlight basic techniques of reflective listening, attunement and asking questions. Because we will be exploring topics that can raise strong feelings, it is important that you practice listening to and respecting others, especially when strong and/or opposing opinions are offered. Your contributions to a supportive learning environment will be much appreciated. All students will be expected to contribute visually (attending to others) and verbally (talking and listening).

Two major themes will underlie most of our discussions and practice, though they will not often be reflected in the readings. The first major theme will be: *what helps children develop to their fullest potential?* Attachment theory will be presented to help us consider this question. The second major theme will be: *what helps children change when they have adopted strategies for survival that may not serve them across settings?* Your preconceived ideas about both these arenas will impact how you perceive information in this class. Together, we will explore our ideas and thoughts about "what makes us tick." *This course will be most useful to you if you are willing and able to reflect on your own thoughts, feelings and ideas.*

RELATIONSHIP OF THE COURSE TO FOUR CURRICULAR THEMES

- (1) *Multiculturalism and Diversity* will be concentrated in the topics of relationship building, communication, assessment, intervention, termination and evaluation. These topics will explore how the differences between worker and client impact and shape these critical dimensions of social work practice.
- (2) *Social Justice and Social Change* will be central to the topic of various roles assumed by social workers and in clienthood. The focus of the course is on small system change (individual, families, and groups) but the larger social context and implications for change will be embedded in person in the environment (PIE) ecological assessment, and in the experience of applicants as they enter social agencies. These themes will be integrated into this course through the use of case examples and case scenarios that will be selected by the instructor to exemplify skills in practice.
- (3) *Promotion, Prevention, Treatment, and Rehabilitation* will be themes reflected in various purposes and models of contemporary social work practice. In addition, this course will emphasize skills that can be implemented with promotion, prevention, treatment, and rehabilitation as practice goals and outcomes.
- (4) *Behavioral and Social Science Research* will be presented in this course to support practice methods, skills and assessment procedures. Planning, decision-making and intervention procedures will be directly borrowed from the behavioral and social sciences.

RELATIONSHIP OF THE COURSE TO ETHICS AND VALUES

Social work ethics and values will be addressed within the course as they pertain to issues related to working with clients and colleagues. The NASW Code of Ethics will be used to

give students direction about these ethical issues. In particular, this course will focus on client issues, such as confidentiality, privacy, rights and prerogatives of clients, the client's best interest, proper and improper relationships with clients, interruption of services, and termination.

Competency Practice Behaviors

Competency #3 - Apply critical thinking to inform and communicate professional judgments.

Social workers

- distinguish, appraise, and integrate multiple sources of knowledge, including research-based knowledge and practice wisdom;
- analyze models of assessment, prevention, intervention, and evaluation;
- demonstrate effective oral and written communication in working with individuals, families, groups, organizations, communities, and colleagues.

Competency #4 - Engage diversity and difference in practice.

Social workers

- recognize the extent to which a culture's structures and values may oppress, marginalize, alienate, or create or enhance privilege and power
- gain sufficient self-awareness to eliminate the influence of personal biases and values in working with diverse groups
- recognize and communicate their understanding of the importance of difference in shaping life experiences
- view themselves as learners and engage those with whom they work as informants.

Competency #6—Engage in research-informed practice and practice-informed research.

Social workers

- use practice experience to inform scientific inquiry
- use research evidence to inform practice.

Competency #7—Apply knowledge of human behavior and the social environment.

Social workers

- use conceptual frameworks to guide the processes of assessment, intervention, and evaluation
- critique and apply knowledge to understand person and environment.

Competency #10 (a)–(d)—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

Assessment

Social workers

- collect, organize, and interpret client data;
- assess client strengths and limitations;
- develop mutually agreed-on intervention goals and objectives;
- select appropriate intervention strategies.

ACCOMMODATIONS

If you need or desire an accommodation for a disability, please let me know as soon as possible. Many aspects of this course, the assignments, the in-class activities and the way that the course is taught can be modified to facilitate your participation and progress throughout the semester. The earlier that you make me aware of your needs the more effectively we will be able to use the resources available to us such as the services for Students with Disabilities, the Adaptive Technology Computing Site, and the like. If you do decide to disclose your disability, I will (to the extent permitted by law) treat that information as private and confidential. Also, please notify me if religious observances conflict with class attendance or due dates for assignments so that we can make appropriate arrangements.

COURSE REQUIREMENTS

- (1) Attend each session (20 points); absences will lower your grade since:
 - (a) Some material considered essential to the objectives of the course will only be presented in class;
 - (b) The application of key concepts and student co-learning requires participation in class discussions and exercises.
 - (c) Predictability, reliability and consistency are core to any strong relationship... "being there" is incredibly important to clients, so it is important in this class
 - (d) Attendance means participating and attending to others. **Using computers or mobile devices to text, shop, Facebook, etc. will significantly reduce your attendance points. Unless you have a family emergency, (and please speak to me about it ahead of time) please put your phones away.**

- (2) Completion of Four Assignments
 - a) Me – Hanging on a Thread intro – 5 points
 - b) Conduct a Working Model of the Child Interview & two-page write up – 25 points
 - c) Engage in a simulation by constructing a parent or child client – 10 points
 - d) Psychosocial Assessment and Treatment Plan - 40 points

WEEKLY READING ASSIGNMENTS

NOTE: All reading besides those found in the required or optional text can be found as PDF in the files tab Canvas. In general, most professors assign about 60 pages of reading per week. Please do your best to read and be prepared

September 14 – Week One

Introductions

Class introductions

Intro to Canvas

Course expectations

September 21 – Week Two

Intro into IP Practice

Engagement Skills - Empathy and Listening Skills

- Canvas - Hepworth, et al., - Building blocks of communication: Communicating with empathy and authenticity, pp. 83-127
- Canvas - Seligman - Why How You Feel Matters, pp. 1- 6

- Canvas - Rubin - Chapter 1: *Doing Therapy*, pp. 1 -15.

September 28 – Week Three

Intro into Assessment

Code of Ethics

- Cooper and Lesser - Chapter 3: *The clinical interview: The process of assessment*
- Zeanah – *Constructing a Relationship Formulation*
- Review the Working Model of the Child Interview (WMCI)

October 5 – Week Four

Knowledge and Skills for Assessment and Planning

- Perry and Szalavitz
 - Chapter 4: Skin Hunger
 - Chapter 5: The Coldest Heart (warning: graphic material)
- Ray (2013). Chapter 2: Primer on Child Development. *Advanced Play Therapy*
- Konrad - Child-Centered Assessment

October 12 – Week Five

Personality Development – Attachment Theory

In class – FAN model

- Davies - Attachment as a context for development, *Child Development* pp. 7 - 38
- Mann and Kretchmar - A disorganized toddler in foster care: Healing and change from an attachment theory perspective. *Zero to Three*. pp. 29-36
- Bettman and Jasperson (2010). Anxiety in adolescence: The integration of attachment theory and neurobiologic research into clinical practice. *Clinical Social Work Journal*, 38: 98-106.

October 19 - Fall Study Break

October 26 – Week Six

Diagnosis

Intervention planning – providing feedback/obtaining agreement

Ethnicity, Culture and Social Work Practice - Working Across Differences

- Lieberman, A. (1990). Culturally sensitive practice with children and families. *Child and Adolescent Social Work*. Vol. 7: 101-120
- Walker and Rosen - 5 Good Things about Cross Cultural Therapy
- Walker and Rosen - Walking a Piece of the Way, pp. 35 – 52.

November 2 – Week Seven

Diagnosis

Privilege and Oppression

ROLE PLAYS FOR BIO-PSYCHO-SOCIAL-SPIRITUAL ASSESSMENTS

- Evans, G. and Kim, P (2013). Childhood poverty, chronic stress, self-regulation and coping. *Child Development Perspectives*, Vol. 7: 43 – 48
- Mengeot, S. The impact of cumulative trauma in infancy: Some treatment techniques. *Clinical Social Work Journal*.

Additional resource:

- Parens, et al. (2011) Troubled Children: Diagnosing, Treating and Attending to Context
- Zegers, M. A. M., Schuengel, C., Van IJzendoorn, M. H., & Janssens, J. M. A. M. (2006). Attachment representations of institutionalized adolescents and their professional caregivers: Predicting the development of therapeutic relationships. *American Journal of Orthopsychiatry*, 76, 325–334.

November 9 - Week Eight

Knowledge and Skills for Intervention – Child Play Therapy

In class Video – Terry Kottman – Adlerian Child Play Therapy

<http://search.alexanderstreet.com.proxy.lib.umich.edu/ctiv/view/work/1778813>

- Kaplow, et al. - The Long-term consequences of early childhood trauma: A case study and discussion
- Konrad – Therapeutic Communication with Children

November 16 – Week Nine

Knowledge and Skills for Intervention – Structural Family Therapy

In class – Video mother/adolescent family therapy video:

<http://ctiv.alexanderstreet.com.proxy.lib.umich.edu/View/534807> (50 minutes) From section 2.1 (23:20) to through 2.49 (1:12). Be ready to discuss your questions, observations, and clinical insights.

- Goldstein - Chapter 11: Couple and family treatment, pp. 267-285.
- Turns and Kimmes (2014). "I'm NOT the Problem!" Externalizing Children's "Problems" Using Play Therapy and Developmental Considerations.

November 23 – Week Ten

Knowledge and Skills for Intervention - Child-Parent Psychotherapy

ROLE PLAYS FOR BIO-PSYCHO-SOCIAL-SPIRITUAL ASSESSMENTS

- Ghosh Ippen, et al. (2011) - Traumatic and stressful events in early childhood: Can treatment help those at highest risk? *Child Abuse and Neglect*, Vol. 35: 504–513.
- Zilberstein & Messer (2010). Building a Secure Base: Treatment of a Child with Disorganized Attachment. *Clinical Social Work Journal*, 38:85-97.

November 30 – Week Eleven

Knowledge and Skills for Reflective Practice

Live supervision of a case (?)

- Heffron - *Balance in Jeopardy: Reflexive Reactions vs. Reflective Response in Infant/Family Practice*, pp.15-17
- Weigand – Reflective Supervision in Child Care.

December 7- Week Twelve

Knowledge and Skills for Termination

Self-Care in Practice

- Ray – Progress and Termination

- Many, M. (2009) – Termination as a therapeutic intervention when treating children who have experienced multiple losses.
- Berzoff & Kita (2010). Compassion Fatigue and Countertransference: Two Different Concepts

December 14 - Week Thirteen

Course Wrap Up

- Jones-Harden – You Cannot Do This Work Alone
- Shedler – That was Then, This is Now

COURSE REQUIREMENTS

- (1) Attend each session (20 points); absences will lower your grade since:
 - (a) Some material considered essential to the objectives of the course will only be presented in class;
 - (b) The application of key concepts and student co-learning requires participation in class discussions and exercises.
 - (c) Predictability, reliability and consistency are core to any strong relationship... “being there” is incredibly important to clients, so it is important in this class
 - (d) Attendance means participating and attending to others. **Using computers or mobile devices to text, shop, Facebook, etc. will significantly reduce your attendance points. Unless you have a family emergency, (and please speak to me about it ahead of time) please put your phones away.**

Assignments

Working Model of the Child Interview – 25 points

Due: 11/2/15 @ 11:59 as a Word Document in Canvas

Paper Length – No more than 2 pages, single-spaced (so you will need to be concise), plus a 3 to 4 paragraph single-spaced reflection.

In this assignment you will practice asking developmental and parenting representation questions of an actual parent. The questions, scoring manual and a corresponding article (Zeanah – WMCI Described) are all found in the files tab. You ARE NOT being trained to code WMCI's but you can still use the interview for clinical purposes.

Interview – you will need to find a parent of a child (up to about age 12 is perfect but you can use into adolescence if need be). The interview should take no more than 1.5 hours (at the most). We will discuss asking the questions and insuring you get responses. It will help you immensely if you can record your interview but that is not mandatory.

After you have completed the interview, review the coding manual and for each scale, think about what you heard during the interview. This is where having an audio of the interview can

be very helpful. Take your best guess at what “score” in each category best captures the interview and choose a statement from the interview that illuminates your choice.

Paper - After contemplating the individual scales, develop a narrative (as in the example) that highlights the overall tone of the interview and provide a few key examples of actual statements, connecting them with the 2 or 3 scales that are particularly salient to your interview. Once done highlighting a few key scales, your interpretation and “evidence,” end with a paragraph or two that describes whether you think the parent has a balanced, disengaged or distorted representation of their child and some discussion of the reasoning for your conclusion. Be careful to stay descriptive in arriving at and describing your conclusions. For example, it is less sophisticated to say “Ms. L is clearly a loving mother” – it is more descriptive to say “Ms. L lit up when she talked about her daughter. She offered many examples of joy and pleasure in their relationship, for example...”

Reflection – End your paper with a three to four paragraph reflection on your experience of the process, what you learned about interviewing, and how your understanding parenting has changed through this process. You can add any other thoughts/ideas/questions/feelings to this section as well.

Bio-Psycho-Social-Spiritual Assessment – 50 points

Will be discussed in class. **Due 1 week following your “session” with your assigned client.** I will give you an example (from Cooper and Lesser, Chapter 4, for those of you whose 521s are using that text) of a psychosocial assessment. Please upload as a Word Document.

Grading will be based on thorough collection of information and/or discussion of what information would remain to be collected, clinical acuity in a beginning development of a hypothesis (including thoughts/ideas about the client’s defense mechanisms), and beginning understanding of salient treatment goals.

DUE: One week following your session. All Assessments and papers must be in by 12/7/15 @ 11:59 pm

This assignment requires the completion and submission of three parts:

1. An interview with a client “played” by a class member
2. A complete, written bio-psycho-social-spiritual assessment (approximately 3 to 4 single-spaced pages)
3. A written reflection on your experience with this assignment (approximately 1 -2 pages)

Assessment Interview

In this component of the assignment, you will conduct an in-depth interview with a class member. You will also serve as a client for a class member.

When you the client in the role-play situation, you need to have prepared yourself to address all aspects of your presenting problem and also to have developed your case situation to be able to address most aspects of the Bio-Psycho-Social-Spiritual assessment. Because this section is focused on children and youth, you can choose to be a child, teen or parent of an infant, child or teen. You can build your own case or can use one of the sample cases upon which to build your ideas. It is expected that you will do some reading to prepare you for the more nuanced aspects of your particular dilemma (ex. if the child is supposedly hyperactive, you will need to choose between portraying it as a sheer physiological issue, or the hypervigilance and hyperarousal that comes with trauma).

These interviews will take place in class unless you as a team prefer to do it off site.

Assessment (Written) (See Konrad chapter in Files and/or Cooper and Lesser)

Paper length – 4 pages single-spaced plus a 1 to 2 page single-spaced reflection

You will write up the Bio-Psycho-Social- Spiritual assessment of your interview with a class member portraying a child or parent of a child with a health/mental health/behavioral challenge. Use professional writing with headers and single line spacing. **You cannot go over 4 pages, so you will have to distill your ideas and write thoroughly and concisely.**

Your assessment needs to include the following headings and corresponding information:

- Referral information/Identifying Information
- Referral Source
- Presenting Problem

Relevant information related to understanding how the presenting problem(s) have been impacting functioning across different life domains (home, school, peer, family)

- History of the Problem – describe onset, duration, intensity, what has been tried in the past – glean as much detail as you can about the nature of the problem
- Family Background – key family members and demographics, as appropriate, relationships, parental histories (relationships/employment/supports/finances/stresses/education/religion-spirituality/legal history/health-physical and psychological/violence–and anything else relevant)
- Child's History – birth and early developmental history (including planned or unplanned pregnancy, temperament, early regulation patterns-sleep, eat, etc.) medical, educational, any separations from parents, any history of potentially traumatic events, child care arrangements, alternative emotionally invested people in child's life, peer relationships if beyond toddler (See also the Konrad chapter on child-centered assessment), range and expression of emotions, interests and hobbies
- If child is present – appearance, mood, communication skills, affect regulation, motor development and psychomotor speed, attention and executive functioning, defense mechanisms

- Identification of any effects of poverty, racism, discrimination, privilege, oppression on your client's presenting concerns
- Clinical Case Formulation Summary: Three to four paragraph summary
- Two beginning goals

Notes to Guide Writing your Assessment (See also Konrad chapter):

Before beginning to write, it is important to reflect on what you have learned about the child and family:

- Examine risk and protective factors
- Explore connections among factors with awareness of which ones are obvious or based on facts and which are more speculative and hypothetical
- Write the case formulation in narrative/story form using the steps above
- Edit for clarity and objectivity

In the clinical case formulation summary:

- Avoid statements that might be offensive to the client and/or family
- Emphasize strengths and vulnerabilities/challenges related to the presenting issues
- Address the various domains noted by Konrad (Biological, Psychological, Social, Relational, and Cultural/Spiritual)
- Stay descriptive vs. evaluative
- Make sure recommendations are clear, concise and practical
- Be brief

Reflection and Integration Paper

In one to two single-spaced pages, and in narrative form, reflect on the experience. Some questions to guide you (but you are not limited by them):

- What skills did you use to form an alliance – what was the result?
- What experiential, cultural or spiritual values may have colored your perspective
- What areas of transference or countertransference might you anticipate
- What reactions did you have to the process, the client, the content and/or the assignment?
- What are your key take-aways or "aha's" from this assignment