1. Course Statement

a. Course content

This course will approach work with individual clients from a person-in-environment perspective and build on the content presented in course SW521. The stages of the treatment process (i.e. engagement, assessment, planning, evaluation, intervention, and termination) will be presented for work with individual adults. The relevance and limitations of various theoretical approaches will be reviewed as they apply to assessment, planning, and intervention methods. This course will focus on empirically evaluated models of intervention and will teach students how to monitor and evaluate their own practice. Special attention will be given to issues of the key 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” including identification of one’s own social and cultural identities and group memberships, and how these relate to working with clients, colleagues, and other professionals. The course will emphasize time-limited treatment methods, and practice with involuntary clients.

b. Course objectives and competencies

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

1) Describe how theory informs and shapes the kinds of intervention strategies that may be employed when working with individual adults, including the indications and contraindications of various IP models. (Practice Behaviors 3.IP, 6.IP)

2) Assess the effectiveness of various kinds of intervention models and procedures that may be utilized with individual adults. (Practice Behaviors 6.IP, 10.c.IP)

3) Demonstrate social work skills [with individual adults] in the pre-engagement, engagement, assessment, intervention, ending and evaluation phases of interpersonal social work practice. Critically apply in a
practice setting a minimum of two empirically supported IP theories. (Practice Behaviors 3.IP, 10.a.IP, 10.b.IP, 10.c.IP, 10.d.IP)

4) Conduct an assessment of coping resources and strengths; biophysical, emotional, behavioral and cognitive functioning; intra-personal and environmental systems. Assess life-threatening problems, such as addictions and violence; and forms of oppression clients’ experience. Identify and assess the effects of diversity dimensions (including 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). (Practice Behaviors 4.IP, 9.IP, 10.b.IP)

5) Demonstrate their ability to form worker-client alliances and collaborations, communicate empathically, and help enhance motivation for change, cultivate hope, and address ambivalence and internal and external barriers to change. (Practice Behaviors 1.IP, 2.IP, 10.a.IP)

6) Identify ways to match or modify intervention methods effectively with [adult] client problems, across diverse populations, cultural backgrounds, sociopolitical contexts and available resources. (Practice Behaviors 4.IP, 9.IP, 10.c.IP)

7) Identify one’s own social and cultural identities and group memberships, and how these relate to working with clients, colleagues, and other professionals. (Practice Behaviors 1.IP, 4.IP, 5.IP)

8) Evaluate the efficacy of interventions used with adult clients including the use of specific evaluation measures. (Practice Behavior 10.d.IP)

9) Apply and articulate social work values, ethical standards, and principles unique to interpersonal practice interventions [with adults] involving diverse populations and settings. (Practice Behavior 2.IP)

c. Course design
This course will employ a number of pedagogical strategies to promote knowledge and skill development, such as reading assignments, case analyses, interactive media simulations, in vivo exercises, role play simulations within the classroom, modeling and video demonstrations, didactic presentations of theory/models/procedures. Whenever possible, graded assignments will be tied to the field placement experiences of students.

d. Relationship to Four Curricular themes

Multiculturalism and Diversity
Will be addressed through careful analysis of how clinical models can be applied and modified to fit the special needs of various groups. Resistance and motivation of adults to interventions will be covered to demonstrate how effective intervention models must be adapted to the fit the needs of various ethnic and racial groups. This course will emphasize that mono-cultural clinical models must be adapted to fit the definitions of "problem" and "treatment" that exist in diverse groups in order for social workers to practice with adults from diverse backgrounds.

Social Justice
Will be addressed by recognizing that, historically, clinical services have excluded poor and oppressed clients from "talking therapies." Often these clients were given the harshest and most restrictive treatments (e.g. shock, sterilization, medications, and lobotomies), whereas more privileged clients were granted more benign interventions (e.g. outpatient family therapy). This course will examine these differences as well as how
socioeconomic exclusion arises in screening criteria that exclude clients because of intelligence, verbal ability, insight, and motivation.

_Promotion, Prevention, Treatment and Rehabilitation_
Will be addressed through a focus on intervention models and intervention procedures that can be used to prevent and treat psychosocial problems of adults.

_Behavioral and Social Science Research_
Will be addressed through careful selection of intervention models for which there is empirical evidence on efficacy. Students will learn that although many time-limited models of practice with adults have proliferated over the past two decades, not all of them have generated research that demonstrates their efficacy.

e. **Relationship to social work ethics and values**
In working with adults, social workers must encourage self-determination and empower adult clients to choose and pursue their own change goals. Ethical issues such as sexual relations between client and worker, involuntary treatment, primacy of client interests, and precipitous withdrawal of services will be considered as they impact individual clients.

f. **Intensive focus on PODS**
This course integrates Privilege, Oppression, Diversity and Social Justice (PODS) content and skills with a special emphasis on the identification of theories, practice and/or policies that promote social justice, illuminate injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will support students developing a vision of social justice, learn to recognize and reduce mechanisms that support stigma, oppression, and injustice, work toward social justice processes, apply intersectionality and intercultural frameworks and strengthen critical consciousness, self-knowledge and self-awareness to facilitate PODS learning.

g. **Accommodation for Disability Statement**
If you need an accommodation for a disability, please speak with me individually as soon as possible to discuss accommodations for your specific needs. This information will be kept strictly confidential. As soon as you make me aware of your needs, we can work with the Office of Services for Students with Disabilities (SSD) to help us determine appropriate academic accommodations. For more information and resources, please contact the Services for Students with Disabilities office at G664 Haven Hall, 550 S. State Street, phone: (734) 763-3000, email: ssdoffice@umich.edu.

h. **Academic Conduct**
The conduct of a student enrolled in courses offered by the School of Social Work should be consistent with that of a professional person and according to the ethical practices of the field of social work. Courtesy, honesty, and respect should be shown by students toward faculty members, fellow students, guest lecturers, and administrative support staff. Similarly, students should expect faculty to treat them fairly, showing respect for their ideas and opinions and striving to help them achieve maximum benefits from their experience.

i. **University of Michigan Statement on Civility**
The University of Michigan is a leader in education, research, and patient care. To sustain that leadership, we promote a healthy social and emotional work culture. We value all members of our community, and we know that a civil and considerate environment is integral to the health and well-being of students, faculty, and staff. The purpose of this statement is to foster good relationships throughout the University community.

We aspire to treat each other well, by adopting the following attitudes and behaviors: **Choose kindness.** Always treat each other with consideration and respect, whether in person, on the phone, over email, or on social media.
Think the best. Assume we are all trying to do the right thing. Put yourself in the other person’s shoes, and be flexible and patient with others. **Act in a supportive way.** Encourage each other. Acknowledge each other’s contributions, and lend a hand when others need help. Be inclusive and welcoming.

**j. Multicultural Ground Rules (from The Program on Intergroup Relations, University of Michigan)**

1. Our primary commitment is to learn from each other, from course materials and from our work. We acknowledge differences amongst us in backgrounds, skills, interests, values, scholarly orientations and experience.

2. We acknowledge that sexism, classism, racism, heterosexism, and other forms of discrimination (religion, age, ability, language, education, size, geographic location etc.) exist and may surface from time to time.

3. We acknowledge that one of the meanings of sexism, classism, racism is that we have been systematically taught misinformation about our own group and members of devalued groups. The same is true about elitism and other forms of prejudice or bias – we are taught misinformation about others and ourselves.

4. We will try not to blame people for the misinformation we have learned. However, we hold each other responsible for not repeating misinformation or offensive behavior after we have learned otherwise.

5. Victims should not be blamed for their oppression.

6. We assume that people are always doing the best they can, both to learn the material and to behave in non-biased and multiculturally productive ways.

7. We will share information about our groups with other members of the class, and will not demean, devalue, or "put down" people for their experiences or lack of experiences.

8. We will actively pursue opportunities to learn about our own groups and those of other groups, yet not enter or invade others’ privacy when unwanted.

9. We each have an obligation to actively combat the myths and stereotypes about our own groups and other groups so that we can break down the walls which prohibit individual development, group progress and cooperation and group gain.

10. We want to create a safe atmosphere for open discussion. Members of the class may wish to make a comment verbally or in an assignment that they do not want repeated outside the classroom. Therefore, the instructor and participants will agree not to repeat the remarks outside the session that links a person with his/her identity.

11. We will challenge the idea or the practice, but not the person.

12. We will speak our discomfort.

13. Are there other ground rules that the class would like to add...?

**k. Academic Misconduct**

Student academic misconduct refers to behavior that may include plagiarism, cheating, fabrication, falsification of records or official documents, intentional misuse of equipment or materials (including library materials), and aiding and abetting the perpetration of such acts. The preparation of reports, papers, and examinations, assigned on an individual basis, must represent each student’s own effort. Reference sources should be indicated clearly. The use of assistance from other students or aids of any kind during a written examination, except when the use of aids such as electronic devices, books or notes has been approved by an instructor, is a violation of the standard of academic conduct. Plagiarism – not referencing another's words
or ideas – is a violation of academic integrity and will be grounds for failure on an assignment. In addition, papers that are completed for another course are not acceptable and will be assigned 0 points. Additional resources for discussions of academic conduct and integrity include the School of Social Work and the Center for Research on Learning and Teaching (CRLT). Please refer to the Student Guide to the Master’s in Social Work Degree Program 2007-2008 for further discussion of appropriate academic conduct.

I. Writing Assistance
For assistance with writing, you may go to the Writing Workshop 1139 Angell Hall (734)764-0429.

m. Statement on Plagiarism and Academic Integrity
It is your responsibility to be familiar with and abide by the School of Social Work’s standards regarding intellectual honesty and plagiarism. These can be found in the MSW Student Handbook. [http://www.ssw.umich.edu/studentguide/2007](http://www.ssw.umich.edu/studentguide/2007).

n. Class Expectations
This course will use a combination of lecture, class discussion, case material, role-plays and actual practice exercises, experiential activities, small group experiences, discussion and video material to enhance learning. **Attendance: Students are expected to attend all class sessions.** Since this is a practice course, much of the learning is experiential and requires attendance. This means attendance is crucial to understanding the content of the course. You can miss one class with a valid excuse. Please contact the instructor before you miss the class for the excuse to be valid. Beyond this one absence you will lose points for missing class. Please save your one absence for sickness and/or any events you must attend instead of class.

**Due dates:** Assignments are expected to be handed in on time, in hard copy form, at the beginning of the class session for which they are due. **Do not wait for the class break to print out assignments.**

**Participation:** Beyond attendance, class participation is 10% of your grade. This includes participation in class exercises, sharing ideas and giving constructive feedback to your peers. There will be many opportunities and ways to participate in class, so please engage in ways that you are comfortable and in ways that push your comfort zone. Despite our cultural and personality differences, social work requires us to interact, and this will be an expectation in class as well.

**Written Assignments:**
All writing assignments are expected to be typed, double-spaced, using 12-point font, with 1” margins on each side, using APA style (5th edition). Your written work will be graded on a clear grasp and integration of the course content, completeness, thoroughness, originality and creativity, organization and clarity, format, writing style (e.g., the use of active voice), grammar and appropriate referencing of sources. Good, clinical writing is expected and you will lose points for lack of clarity. If you need help with writing, please consult the Sweetland Writing Center at U of M, and feel free to talk with me about it.

o. Additional Student Guidelines and Resources
**Trigger Warning:**
This course is trauma-informed and focused. For any student who has experienced difficulty or trauma it could bring up painful material. Students may experience a range of emotions throughout the course and may feel vulnerable. All feelings are acceptable, but students will be expected to be able to manage them. There will not be sufficient follow up for processing painful memories or severe anxiety that might get triggered by the course content. In general, it is important that students who expect to struggle seek support or therapeutic assistance to work through their own recovery during their graduate education in order to be present and effective in working with wounded clients. Wounded healers who have worked toward resilience make some of the best therapists. See resources for this below.
Health and Wellness:
Health and wellness situations or circumstances may impede student success within the program. Students should feel free to contact the School's Health and Wellness Advocates, Lauren Davis or Nyshourn Price, at ssw.wellness@umich.edu. Students may also visit/call the University's Counseling and Psychological Services (CAPS). CAPS offers a variety of clinical services, referrals, and workshops. CAPS, Hours: 8am-5pm, 530 S State St., Ann Arbor, MI 48109 [https://caps.umich.edu](https://caps.umich.edu)

Safety and Emergency Preparedness:
In the event of an emergency, dial 9-1-1 from any cell phone or campus phone.

All University of Michigan students, faculty and staff are required to familiarize themselves with emergency procedures and protocols for both inside and outside of the classroom. In the event of possible building closure (i.e. severe weather conditions, public health notices, etc.) you may contact (734)764-SSWB (7793) for up-to-date School closure information.

Be Prepared. Familiarize yourself with the emergency card posted next to the phone in every classroom/meeting room. Review the information on the emergency evacuation sign (located nearest the door) and locate at least (2) emergency exits nearest the classroom.

If you are concerned about your ability to exit the building in the case of an emergency, contact the Office of Student Services and/or email ssw-ADAcompliance@umich.edu, Office of Student Services. School of Social Work | Room 1748, 734-936-0961

For more information, view the annual Campus Safety Statement at [http://www.dpss.umich.edu/](http://www.dpss.umich.edu/).


### Additional Expectations and Grading Scale
Assignments are expected to be handed in on their due dates in the format designated on the syllabus. Assignments will be marked down 5% for every day late. If you are experiencing difficulty with course assignments it is your responsibility to contact the instructor.

The criteria for each grade follows:

- **A+ = 100**
- **A = 96-99**
- **A- = 92-95**
- **B+ = 89-91**
- **B = 85-88**
- **B- = 81-84**
- **C+ = 78-80**
- **C = 74-77**
- **C- = 70-73**
- **D = 65-79**
- **E = less than 65**
2. Class Requirements

a. Text and class materials


b. Class schedule

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Agenda</th>
<th>Required Readings &amp; Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 9</td>
<td>Introduction&lt;br&gt;Class Requirements and Assignments&lt;br&gt;Course Innovation; Breadth vs. Depth; Transparency of skill development Ethics</td>
<td>The Syllabus&lt;br&gt;NASW Code of Ethics&lt;br&gt;Dennis C. Wendt, Joseph P. Gone, and Donna K. Nagata “Potentially Harmful Therapy and Multicultural Counseling: Bridging Two Disciplinary Discourses” The Counseling Psychologist 2015, Vol. 43(3) 334–358.&lt;br&gt;Christina M. Rummell &amp; Nicholas R. Joyce (2010) “So wat do u want to wrk on 2day?”: The Ethical Implications of Online Counseling, ETHICS &amp; BEHAVIOR, 20:6, 482-496</td>
</tr>
<tr>
<td>Class 2</td>
<td>Group Jigsaw 1 – Cultural Humility Lecture on Therapist Performance Anxiety; Case Formulation; Working Alliance Lab on “Introducing CBT with Tanisha Mosley”</td>
<td>Chapter 1: Teyber and Teyber’s ‘Interpersonal Process.’ Pages 4-7 on performance anxiety and treatment effectiveness&lt;br&gt;Chapter 2: Teyber and Teyber’s ‘Working Alliances.’ Pages 37-66</td>
</tr>
<tr>
<td>September 16</td>
<td></td>
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<tr>
<td>Class 8</td>
<td>November 4</td>
<td>Lecture: DBT Guest lecture by Laura Ganzel, LLMSW Mental Health Professional Washtenaw County Community Mental Health Youth and Family Services Student Presentations (90 minutes)</td>
</tr>
<tr>
<td>Class 9</td>
<td>November 11</td>
<td>Student Presentations (90 minutes) Video and Discussion: partner violence Lab on “Brief MI with Gabe”</td>
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<tr>
<td>Class 10  November 18</td>
<td>Lecture on Anxiety; what is it? (causes, symptoms, recovery)</td>
<td>Read Chapters 1-3 (skim as-needed) Read Chapters 4 (Relaxation)</td>
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<tr>
<td>Class 11  November 25</td>
<td>Group Jigsaw 5 Lecture on Chapter 9 from Bourne Group Activity/Discussion: Anxiety and Phobia Therapeutic Techniques</td>
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<tr>
<td>Class 12  December 2</td>
<td>Self-Care Guest speakers Trauma Treatment Activity or Videos</td>
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<tr>
<td>December 11</td>
<td>Classes End</td>
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</tbody>
</table>

c. Assignments

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Due date</th>
<th>Percent of overall grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class Participation and Attendance</td>
<td></td>
<td>5%</td>
</tr>
<tr>
<td>Ethical Dilemma Paper</td>
<td>September 11 at 11:59pm Submit via Canvas</td>
<td>10%</td>
</tr>
<tr>
<td>Jigsaw Reflections</td>
<td>1: September 23 at 11:59pm 2: September 30 at 11:59pm 3: October 7 at 11:59pm 4: November 4 at 11:59pm 5: December 2 at 11:59pm</td>
<td>5%</td>
</tr>
<tr>
<td>Complete Three Simulation Exercises</td>
<td>Exercise 1: due 9/30 at 11:59pm Exercise 2: due 10/7 at 11:59pm Exercise 3: due 11/18 at 11:59pm</td>
<td>5% each; 15% total</td>
</tr>
<tr>
<td>Group Methods Assignment</td>
<td>October 28, November 4</td>
<td>30%</td>
</tr>
<tr>
<td>Assessment and Intervention Paper</td>
<td>December 17 at 11:59pm Submit via Canvas</td>
<td>35%</td>
</tr>
</tbody>
</table>
d. Class Attendance and Participation.

<table>
<thead>
<tr>
<th>when determining your participation grade</th>
<th>Class Participation &amp; Grading Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Regularly makes helpful, relevant contributions and observations to class discussions that challenge/encourage other learners to think about the material in new ways. Actively participates in small-group discussions. Actively attends to lectures and discussions. Attends class regularly and shows up on time. Consistently demonstrates that she/he has read the assigned material. Completes 4 required reflections.</td>
</tr>
<tr>
<td>4</td>
<td>Often makes helpful, relevant contributions to class discussions. Often participates in small-group discussions. Often pays attention to lectures and discussions. Attends class regularly and shows up on time. Demonstrates that s/he has usually read the assigned material. Completes 3 of 4 required reflections.</td>
</tr>
<tr>
<td>3</td>
<td>Occasionally contributes to class discussions. Participates to some extent in small-group discussions. Is attentive to lectures and discussions. Attends class regularly and shows up on time. Demonstrates that s/he has usually read the assigned material. Completes 2 of 4 reflections.</td>
</tr>
<tr>
<td>1-2</td>
<td>Rarely contributes to or is prepared for small-group discussions. Does not attend regularly or is often tardy. Inattentive to lectures and discussions and has not read the assigned material. Directs disrespectful verbal and/or non-verbal behaviors towards others in the classroom. Completes 0-1 required reflection.</td>
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</tbody>
</table>

e. Grading

From MSW Student Guide policies on Grades in Academic Courses and in Field Instruction:
Letter grades from A through E are given for class performance. Grades of A are given for exceptional individual performance and mastery of the material. The use of A+, A, and A– distinguishes degrees of superior mastery. B grades are given to students who demonstrate mastery of the material: B+ is used for students who perform just above the mastery level but not in an exceptional manner; B– is used for students just below the mastery level. C grades are given when mastery of the material is minimal. A C– is the lowest grade which carries credit. D grades indicate deficiency and carry no credit. E grades indicate failure and carry no credit. Due to the brief length of time a mini-course meets, partial attendance will likely result in a grade of E.
Please follow these links for further information: Student Grievance procedures and the policy for grading in special circumstances.
Assignment Sheet

Assignment 1:

Ethical Issues Paper: 3-4 pages, double-spaced.

- Describe the dilemma. Discuss the client’s position and how identity and environment may influence client’s experience of their position.

- Describe multiple options for approaching or resolving the dilemma (you can develop these options by reading the clinical literature; please cite our sources).

- Describe the option you selected to resolve the dilemma and the consequences for the clinician and client of this decision. (you can develop these options by reading the clinical literature; please cite our sources).

- Reference the NASW Code of Ethics and discuss at least 1 ethical principle that was involved in this case scenario.

Assignment 2:

Simulated Exercises: Students will login to the SIMmersion Training Center to practice sharpening their practical knowledge of how to deliver CBT and Motivational Interviewing techniques to a client. As students begin mastering their skills they can also explore what happens when ineffective approaches are made in a therapeutic context and how these approaches can impact rapport with a client.

To earn their 5% grade for each simulation, students will be expected to:

1. Score 90% or better at least once for each simulated character

2. Complete at least 4 simulations per character-it may take more than 4 simulations per character to score 90 or better.

A description of each of the simulations is below:

Introducing CBT with Tanisha Mosley
This simulation gives the student an opportunity to explain CBT to a client, which equips the student in learning about CBT and about how to discuss it with a client. The student is given the opportunity to explain different aspects of CBT to the client (Tanisha). Topics include: why CBT over other treatment plans; the connection between thoughts, feelings, and behaviors; patterns in behavior; the roles of the therapist and the client in the treatment; the purpose of homework. The student is given the opportunity to give Tanisha illustrations and diagrams of how CBT works. In addition, students practice ensuring client understanding, using collaborative language, utilizing a conversational tone, demonstrating empathy, individualizing CBT to a client, setting an agenda, and assigning homework.

CBT Functional Analysis with Roger Ellison
Using a self-monitoring worksheet, the student will examine a recent drinking episode and work with the client (Roger) to show how his thoughts, feelings, and events in the recent episode might be interacting. In addition to doing a functional analysis, students practice using collaborative language, utilizing a conversational tone, demonstrating empathy, individualizing CBT to a client, setting an agenda, and assigning homework.
Brief Motivational Intervention with Gabe Turner
This simulation gives students the opportunity to practice a brief intervention focused on motivating a client (Gabe Turner) to engage in behavioral change. In order to engage the client, the student will need to use Motivational Interviewing techniques. In the conversation, the student is given the opportunity to walk through the process of Motivational Interviewing (Engage, Focus, Evoke, Plan). Other techniques the student can practice include: developing a sense of collaboration, displaying empathy, being sensitive to the client's needs, using OARS, using rulers, and eliciting change talk. Finally, this simulation has a cultural sensitivity component included. Throughout the simulation, the student will have the opportunity to learn an effective method to demonstrate cultural sensitivity to the client.

Assignment 3:

Group Methods Assignment During the first few class sessions, students will be divided into four groups (5-6 students per group). Each group will prepare a power point and a class role-play that applies a theoretical technique relevant to direct practice with individuals.

- Begin working immediately on this project. Don't wait. You need to coordinate schedules to plan a role play demonstrating the technique.
- You can design your role-play by choosing technique learned in class and then applying this technique to one of the following scenarios:
  - 55 year old Caucasian male with a history of depression who had his SSDI benefits revoked for his drug use and was referred to therapy to address his substance use so that he can regain access to SSDI benefits. He abuses heroin.
  - 47 year old Latina who lost her eye sight and experiencing depressive symptoms and was referred by her physician.
  - 37 year old Middle Eastern female who is experiencing severe anxiety because she is dating a Caucasian woman and fears her family will find out and harm her.
  - 21 year old African American male who is mourning the loss of his mother and his supervisor at work suggested that he seek treatment.
1) **Review the Literature:**
Start with a literature review of the technique including at least 5 sources. In your search use terms like “meta-analysis” and “review” in order find the best articles that summarize the scientific evidence for the approach. You can also include case studies, book chapters and training videos to enhance your review. I suggest one or two people coordinate the search, and the sources are circulated for everyone to look at. You do not have to write up this review. Use it to create your presentation and role play.

2) **PowerPoint Presentation:**
Based on the review prepare a power point presentation for the class. Give one print-out of the power point presentation to the instructor – three slides per page with line notes and send it to me by email as well:
- Briefly summarize the approach, in particular, the theoretical principals and main intervention techniques.
- Describe what kind of problems the technique is designed to address and how this fits with the case example of your role play.
- Briefly describe the evidence for the approach. What are the results of your literature search?
- Describe how this technique is used in beginning, middle and ending phases of intervention.
- Describe the strengths and limitations of the technique.
- **Provide insights into your strategies for how this technique may need to be adapted in work with diverse populations based on race, ethnicity, social economic class, ability and disability, gender, gender identity, sexual orientation, religion, etc.**
- Identify issues and populations for which it would not be indicated
- Give a brief assessment of the case you have used in your role play. Provide case information including the demographic profile of the client, and a brief review and history of the presenting problem.
- Include a reference slide of the sources you used.

3) **Role Play:**
Create a two- or three-part role play demonstrating two or three varying stages of interventions using this method, i.e., beginning, middle and end. You may to use yourselves, other students or willing people you know to help demonstrate the role-play that your group designs. In total, the role play should not exceed 20 minutes. Describe which phases of treatment are represented.

4) **Learning points.**
Develop a one-page handout of the main points of your presentation and bring a hard copy to class on the day of your presentation. I will make copies for the class. The presentation is to take 45 minutes including the power point and the role play (not more) This assignment is worth 30% of your grade and will be due on 10/23 and 10/30.

**40% of your grade for this assignment will be designated by your team and 60% will be designated by the instructor.** Each group member will be asked to assign a letter grade for each of their group members using the class scale on page 8. Each group must provide an ‘authorship’ page describing each student’s contribution in 1-2 sentences per student.
Assignment 4:

Intervention and Assessment Group Paper Again, get started early on this project. Work with your group to write a 7-9-page paper about a case that describes the following phases: assessment, intervention plan, intervention implementation, and evaluation. Each student also writes a personal reflection that does NOT count towards the 7-9 pages. Your group can develop part of the case with your imagination if you need to, for example, if you have seen a client just once or twice and want to imagine what a more complete intervention would look like. Cite at least 4 references, using quotes, from class readings by different authors as they relate to your work with this client and provide a reference page at the end of the paper. Be sure to do complete job of integrating the readings. This is the way I know you have read for the course and can integrate the readings. You cannot reference my power point slides.

<table>
<thead>
<tr>
<th>Assessment: A brief description of the presenting problem including demographics and cultural identity issues (e.g., age, race, gender, class, sexual orientation, religion, ability/disability) history of the problem with all material disguised to protect confidentiality. Also, include an actual diagnosis (DSM V) or a clearly stated clinical hypothesis.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Context: The context in which you know this client and the client’s precipitating issue.</td>
</tr>
<tr>
<td>Clinical impressions: Include a brief description of the client’s ability to engage, her/his/their physical, mental, emotional, social state at the time of the interview, and their motivation and stage of change.</td>
</tr>
<tr>
<td>History: Provide a brief history of the problem, including family, health and social history that may be relevant.</td>
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<tr>
<td>Treatment Goals: What are the goals of the intervention? What needs to change? Separate goals based on locus of control for the change. In other words, separate recommendations for system’s interventions from changes that the client can control and change. (For example: A systemic locus of control: “the home insecure intervention program will work with Sandy toward a secure housing situation”. A client-based locus of control: “Sandy will reduce negative thoughts that interfere with her attending her meetings with her case manager to work toward more secure housing”)</td>
</tr>
<tr>
<td>Ethical Issues: Describe any ethical or cross-cultural issues that arise with your involvement in this case. Comment on your differences (since this is a group project describe the background of the clinician) from the client based on gender, race, ethnicity, class, age, sexual orientation, gender identity, religion, language, etc. and how you addressed the differences.</td>
</tr>
<tr>
<td>Intervention Plan: Based on the interventions we have studied in class, describe the theoretical approach or approaches that are likely to be the most effective for this case and the goals for intervention as developed through a contract with the client. If more than one theoretical approach is used, describe how you would integrate these approaches theoretically or apply them sequentially to the case. Discuss any barriers or resistance to client progress and how these barriers or resistances are addressed. Provide evidence for your choice of interventions.</td>
</tr>
<tr>
<td>Intervention Implementation: Illustrate the approach you used through a transcript of an actual interview. Comment on the accuracy of your original assessment and plan. Describe how you might improve your responses, including the use of general theoretical approaches you did not use. You may make the session as long as you want. For the transcription, use about 12-15 statements from the client and 12-15 of your responses to the client.</td>
</tr>
<tr>
<td>Evaluation: Describe how you would evaluate the efficacy of your work. Select or create a measure for the evaluation of the goals established for work with this particular client. If you can actually administer the measure with your client – wonderful, but you do not have to actually administer the measure. It is more important to describe how you would introduce the measure to your client. Write down what you might say to the client.</td>
</tr>
</tbody>
</table>
Sources for finding instruments include: Fischer, J. & Corcoran, K. (2007). Measures for clinical practice: A sourcebook; Hudson, W. (1982). The clinical measurement package: A field manual. Homewood, IL: Dorsey; and Antony, M. M. & Barlow, D. H. (2004), Handbook of Assessment and Treatment Planning for Psychological Disorders. New York: Guilford. The UM Library also has a web site to help search for measures: http://guides.lib.umich.edu/tests. For example, you could use the BECK Depression Inventory or the PHQ-9 for a client with depressive symptoms. The measure needs to be attached at the end of your paper or uploaded as a separate PDF.

**Personal reflection** (one 1-page reflection for each group member). Each group member must address all of the following elements in this section of the paper, and state:

- Your own reaction to this encounter
- Describe transference/counter-transference issues with this client or how your self-awareness/relaxation model applies to your work with this client. In what areas do you think you need to grow to feel more competent in your work with individuals?
- In what areas did you feel competent during this encounter?
The participation Reflections refer to a jigsaw group reading exercise and discussion that takes place at the beginning of most classes. Each student must participate in the discussion but is only required to complete a 1-page reflection on 4 of the 5 occasions.

All Group 1s, 2s, 3s, and 4s meet to discuss their thoughts on their respective article for the first 10 minutes. Then one member from each group will come together as a secondary group to share their perspectives with members from the other groups for the remaining 20 minutes.

Students may choose to write a 1-page reflection (double spaced) on what they learned from this assignment and how it can be applied to their practice in the future. This reflection can be submitted to CANVAS before next class.

Required Readings for Everyone During Jigsaw 1:


You are only required to read the 1 article that is assigned to your Jigsaw group.


Required Jigsaw Group Readings for Jigsaw 2:


Required Jigsaw Group Readings for Jigsaw 3:


Group 2: [http://www.abct.org/Information/?m=mInformation&fa=fs_BEREAVEMENT](http://www.abct.org/Information/?m=mInformation&fa=fs_BEREAVEMENT)


Group 3: [https://sleepfoundation.org/sleep-news/cognitive-behavioral-therapy-insomnia](https://sleepfoundation.org/sleep-news/cognitive-behavioral-therapy-insomnia)


Group 4: [https://eatingdisorder.org/treatment-and-support/therapeutic-modalities/cognitive-behavioral-therapy/](https://eatingdisorder.org/treatment-and-support/therapeutic-modalities/cognitive-behavioral-therapy/)


Required Jigsaw Group Readings for Jigsaw 4:


Required Jigsaw Group Readings for Jigsaw 5:


