



SW 602: Interpersonal Practice Interventions in Integrated Health, Mental Health and Substance Use for Adults

Term:	Fall 2020, SW602 Section 003
Instructor:	Lindsay A. Bornheimer, PhD, LCSW
Course #/term:	SW602.003 Fall 2020
Time and place:	Friday 9/7/20 – Friday 12/4/20 from 2 to 5 PM EST (Note: course is virtual, see schedule below for live class times)
Credit hours:	3
Prerequisites:	Foundation essentials required
Pronouns:	She, her, hers
Email:	bornheim@umich.edu (best way to reach me is email)
SSW Phone:	734-615-2915 (note: not physically in the office this fall)
Office:	SSW 3792
Office hours:	By Zoom; will be posted in CANVAS with a sign-up

1. Course Statement

a. Course description

The course will build on intervention therapy and practice from the foundation semester and promote more advanced intervention skill level of engagement, contracting, use of evidence based, evidence informed interventions and termination/evaluation phases. Particular focus will be on advanced clinical competency development regarding: 1. Behavioral activation, 2. Cognitive restructuring, 3. Managing resistance, 4. Emotion Regulation, 5. Functional Analysis, 6. Problem solving and 7. Distress Tolerance.

b. Course content

This course focuses on skill building to provide a range of brief, evidence-based and/or evidence-informed interventions including prevention, treatment and recovery as well as longer-term treatment and support for clients as appropriate. Examples include: motivational interventions; brief treatments for mental health and substance use problems; adjustment to illness, crisis intervention, and chronic illness management.

Core evidence-based/evidence-informed therapies will be the focus of this class including: 1) motivational interviewing, 2) cognitive behavioral therapy (CBT), 3) dialectical behavior therapy (DBT), and 4) acceptance and commitment therapy (ACT).

This course is adult-focused. Attention will be given to application of interventions with clients

across diverse populations and need with a focus on common health and mental health conditions such as depression/anxiety, substance use, chronic pain, etc. Attention will also be given to application of interventions in a variety of practice settings such as community mental health agencies, health care facilities and non-profit agencies.

c. Course objectives and competencies

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

1. Demonstrate engagement strategies that are relevant to the practice setting (EPAS Competency 1,6)
2. Utilize evidence-informed assessment procedures to identify appropriate intervention strategies
3. Develop person-centered treatment goals, objectives, and interventions. (EPAS Competency 1, 7, 8)
4. Implement evidence-based prevention and intervention strategies (e.g. cognitive behavioral interventions, parent management training) that are compatible with client's goals, needs, circumstances, culture, and values. (EPAS Competency 1, 8, 2)
5. Develop trauma-informed intervention skills in working with adults that are grounded in practice and research informed for effectiveness. (EPAS Competency 1, 2, 3, 4, 8)
6. Monitor and evaluate interventions with regard to: effectiveness, sensitivity to diversity factors; impact of adults' social identities on their experience of power and privilege; and appropriateness of the intervention to specific client needs resulting from conditions (EPAS Competency 1, 2, 8, 9)

d. Course design

This course uses a **flipped classroom** engaged-learning approach using a myriad of pedagogical strategies such as: remote class discussions, small group work, experiential/simulated exercises, case examples, written assignments, guest speaker(s), role-plays, and other activities in order to facilitate understanding of the course content and to promote skill development.

Asynchronous and Synchronous class sessions will include a lecture or presentation, accompanied by a discussion or clinical practice/activity. This course is designed to be practice-oriented and will highlight advanced clinical practice techniques to work effectively with clients and colleagues in a variety of healthcare settings.

Given the COVID-19 context and the fact that this is a virtual course, below you will find an elaborated version of anticipated workload every week, especially regarding how you are expected to engage in the flipped classroom format.

e. Curricular themes

Multiculturalism and Diversity will be addressed throughout this course and will be highlighted in content related to differences in health outcomes, beliefs, behaviors, and the role of protective factors and social support in health status and disease outcomes. The key diversity dimensions will be examined as they relate to health beliefs and health behavior. Social Justice and Social Change will be addressed in content examining differences in mortality and morbidity in

population subgroups, and access and barriers to care. This course emphasizes the identification of theories, practice and/or policies that promote social justice, illuminate injustices and are consistent with scientific and professional knowledge. Promotion, Prevention, Treatment, and Rehabilitation will be addressed through content on concepts and definitions of health and disease, theories and models of health behavior, and stress, coping, and adaptation as they relate to health and disease across the life span. Behavioral and Social Science Research will be explored and read throughout the course and will include findings from epidemiology, demography, medical sociology, health psychology, medical anthropology, social work, public health, medicine, nursing, and health services research.

f. Relationship to social work ethics and values

This course will examine current ethical issues and controversies in the field integrated health care. The NASW Code of Ethics will be used to inform practice in this area. Students will analyze ethical issues related to: stigmatization and psychiatric labels; client confidentiality; client rights and prerogatives; especially the rights of populations at risk; prevention and elimination of discrimination; equal access to resources, services, and opportunities; respect for the diversity of cultures; changes in policy and legislation that promote improvements in social conditions; and informed participation of the public. Students are required to abide by the NASW Code of Ethics while enrolled in the program.

g. Intensive focus on PODS

This course integrates PODS (privilege, oppression, diversity, and social justice) 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 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.

2. Class Requirements

a. Text and class materials

Required books (all available through UM Library electronically!); **don't need to purchase unless desired**

- 1) Beck, J. S. (2011). *Cognitive behavior therapy: Basics and beyond*. Guilford Press. [third edition is expected Sep. 2020] Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/015648219>
- 2) Linehan, M.M. (2014). *DBT skills training manual* (2nd ed). New York, NY: The Guilford Press. Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/015992969>

- 3) Miller, W. R., & Rollnick, S. (2013). *Motivational interviewing: helping people change* (3rd ed). New York, NY: The Guilford Press. Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/013592508>

Recommended books if interested in learning more (*not required for course*):

- 1) Rollnick, S.; Miller, W.R. and Butler, C. C. (2008). *Motivational interviewing in health care: Helping patients change behavior*. New York: The Guilford Press. Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/013984561>
- 2) Knaus, W. J. (2012). *The cognitive behavioral workbook for depression: A step-by-step program*. New Harbinger Publications.
- 3) Wright, J. H., Brown, G. K., Thase, M. E., & Basco, M. R. (2017). *Learning cognitive-behavior therapy: An illustrated guide*. American Psychiatric Pub.
- 4) Linehan, M.M. (2014). *DBT skills training handouts and worksheets* (2nd ed). New York, NY: The Guilford Press.
- 5) Treleaven, D. A. (2018). *Trauma-sensitive mindfulness: Practices for safe and transformative healing*. WW Norton & Company.
- 6) Hayes, S., Strosahl, K., & Wilson, K. G. (2012). *Acceptance and commitment therapy the process and practice of mindful change*. New York: Guilford Press. Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/011163178>

Article readings will be posted each week in advance on Canvas. All required articles will be clearly marked in the class schedule below for a given week and in CANVAS, and recommended articles will be provided in list-form at the end of the syllabus if interested in learning more.

Canvas Log In: <https://canvas.umich.edu>

SIMmersion Log In: <https://training.simmersion.com/index.html>

Students are expected to **engage all required course material** prior to class. Note that this is even more important to ensure you can engage with the content and learning process for this course delivered virtually.

b. Class schedule

Synchronous items involve live class via zoom and asynchronous items involve work on your own time (reading, watching, doing). Asynchronous items should ideally be completed **prior** to the live class time to engage in discussion and clinical practice. Live classes will be recorded.

Note: Live class times are as follows: Every scheduled Friday of the semester from 2 pm to 4 pm EST via Zoom (links in CANVAS)

****Live classes will involve discussion groups and practicing skills with classmates; either very minimal or no lecture during live time****

Day/Classes	Topics	To do Prior to Live Class	Due by midnight of the class day (Friday of given week)
Week 1 (Sept 4)	<p>Course Introduction</p> <ul style="list-style-type: none"> - Overview of course - Ethics - Culture and intersectionality - Core intervention/treatment skills in integrated health, mental health, and substance use 	<p><u>Read (all required):</u></p> <p>Edwards, J. B. (2015). Cultural Intelligence for Clinical Social Work Practice. <i>Clinical Social Work Journal</i>, 1-10.</p> <p>National Association of Social. NASW Code of Ethics (Guide to the Everyday Professional Conduct of Social Workers). Washington, DC: NASW, 2017.</p> <p>Westra, H. A., Arkowitz, H., & Dozois, D. J. (2009). Adding a motivational interviewing pretreatment to cognitive behavioral therapy for generalized anxiety disorder: A preliminary randomized controlled trial. <i>Journal of Anxiety Disorders</i>, 23(8), 1106-1117.</p> <p>Hatala, A. (2012). The Status of the “Biopsychosocial” model in health psychology: towards an integrated approach and a critique of cultural conceptions. <i>Open Journal of Medical Psychology</i>, 1(4) 51-62.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
Week 2 (Sept 11)	<p>MI</p> <ul style="list-style-type: none"> - Refresher/overview, and deep dive into engagement 	<p><u>Read (all required):</u></p> <p>Miller & Rollnick text: Chapters 1, 2, and 3</p> <p>Rollnick, S., Miller, W. R., & Butler, C. (2008). <i>How Motivational</i></p>	<p>Complete sign-up for discussion question development (in google sheet)</p>

		<p>Interviewing fits in Health Care: Chapter in <i>Motivational interviewing in health care: helping patients change behavior</i>. Guilford Press. (PDF in CANVAS)</p> <p>Santiago, C. D., Kaltman, S., & Miranda, J. (2013). Poverty and mental health: how do low-income adults and children fare in psychotherapy?. <i>Journal of Clinical Psychology</i>, 69(2), 115-126.</p> <p>Potocky, M. (2016). Motivational interviewing: A promising practice for refugee resettlement. <i>Journal of Ethnic & Cultural Diversity in Social Work</i>, 25(3), 247-252.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 3 (Sept 18)</p>	<p>MI</p> <ul style="list-style-type: none"> - Deep dive into focusing and evoking, and application for substance abuse and smoking 	<p><u>Read (all required):</u> Miller & Rollnick text: Chapters 12, 13, 14</p> <p>Bertholet, N., Faouzi, M., Gmel, G., Gaume, J., & Daeppen, J. B. (2010). Change talk sequence during brief motivational intervention, towards or away from drinking. <i>Addiction</i>, 105(12), 2106-2112.</p> <p>Codern-Bové, N., Pujol-Ribera, E., Pla, M., González-Bonilla, J., Granollers, S., Ballvé, J. L., ... & ISTAPS Study Group. (2014). Motivational interviewing interactions and the primary health care challenges presented by smokers with low motivation to stop smoking: a conversation analysis. <i>BMC Public Health</i>, 14(1), 1225.</p>	

		<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 4 (Sept 25)</p>	<p>MI</p> <ul style="list-style-type: none"> – Deep dive into planning, resistance, and application in integrated health, mental health, and substance use 	<p><u>Read (all required):</u> Miller & Rollnick text: Chapters 19, 20, and 21</p> <p>Britton, P. C., Bryan, C. J., & Valenstein, M. (2016). Motivational interviewing for means restriction counseling with patients at risk for suicide. <i>Cognitive and behavioral practice</i>, 23(1), 51-61.</p> <p>Lundahl, B., Droubay, B. A., Burke, B., Butters, R. P., Nelford, K., Hardy, C., & Bowles, M. (2019). Motivational interviewing adherence tools: A scoping review investigating content validity. <i>Patient education and counseling</i>. 102(12):2145-2155.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor (required) Treatment videos/additional videos</p> <p>Note: live class will be shorter this week to give time for role play recording (for assignment due 10/2)</p>	
<p>Week 5 (Oct 2)</p>	<p>CBT</p> <ul style="list-style-type: none"> – Refresher/overview 	<p><u>Read (all required):</u> Beck text: Chapters, 1, 2, and 3</p> <p>González-Prendes, A. A., & Brisebois, K. (2012). Cognitive-behavioral therapy and social work values: A critical analysis. <i>Journal of Social Work Values and Ethics</i>, 9(2), 21-33.</p> <p>Vally, Z., & Maggott, C. (2015). Evaluating the outcome of cultural adaptation of cognitive-behavioral therapy for adult depression: A meta-</p>	<p>MI Role play, reflection, and peer-evaluation assignment 1 due 10/2</p>

		<p>analysis of treatment studies in developing countries. <i>International Journal of Advanced Counselling</i>, 37, 283-304.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 6 (Oct 9)</p>	<p>CBT</p> <ul style="list-style-type: none"> - Deep dive into application of skills for depression 	<p><u>Read (all required):</u> Beck text: Chapters 11, 13, and 14</p> <p>López-López, J. A., Davies, S. R., Caldwell, D. M., Churchill, R., Peters, T. J., Tallon, D., ... & Lewis, G. (2019). The process and delivery of CBT for depression in adults: a systematic review and network meta-analysis. <i>Psychological medicine</i>, 49(12), 1937-1947.</p> <p>Pachankis, J.E., Hatzenbuehler, M.L., Rendina, H.J., Safren, S.A., & Parsons, J.T. (2015). LGB-affirming cognitive-behavioral therapy for young adult gay and bisexual men: A randomized controlled trial of a transdiagnostic minority stress approach. <i>Journal of Counseling and Clinical Psychology</i>, 83, 875-889.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 7 (Oct 16)</p>	<p>CBT</p> <ul style="list-style-type: none"> - Deep dive into application of skills for anxiety and OCD 	<p><u>Read (all required):</u> Beck text: Chapters 15, 20, and 21</p> <p>Kaczurkin, A. N., & Foa, E. B. (2015). Cognitive-behavioral therapy for anxiety disorders: an update on the empirical evidence. <i>Dialogues in clinical neuroscience</i>, 17(3), 337.</p>	<p>SIMmersion with Roger due 10/16</p>

		<p>Craske, M. G., Rose, R. D., Lang, A., Welch, S. S., Campbell-Sills, L., Sullivan, G., ... & Roy-Byrne, P. P. (2009). Computer-assisted delivery of cognitive behavioral therapy for anxiety disorders in primary-care settings. <i>Depression and anxiety</i>, 26(3), 235-242.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 8 (Oct 23)</p>	<p>DBT</p> <ul style="list-style-type: none"> - Overview, treatment process 	<p><u>Read (all required):</u> Linehan text: Chapters 1 and 2</p> <p>Ramaiya, M. K., Fiorillo, D., Regmi, U., Robins, C. J., & Kohrt, B. A. (2017). A cultural adaptation of dialectical behavior therapy in Nepal. <i>Cognitive and behavioral practice</i>, 24(4), 428-444.</p> <p>DeCou, C. R., Comtois, K. A., & Landes, S. J. (2019). Dialectical behavior therapy is effective for the treatment of suicidal behavior: A meta-analysis. <i>Behavior therapy</i>, 50(1), 60-72.</p> <p>Davis, J. H. (2015). Facing Up to the Question of Ethics in Mindfulness-Based Interventions. <i>Mindfulness</i>, 6(1), 46-48.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 9 (Oct 30)</p>	<p>DBT</p> <ul style="list-style-type: none"> - Deep dive, application in general and for 	<p><u>Read (all required):</u> Linehan text: Chapter 6 (recommended to read 7, 8, 9, and 10 if you have time, but not required)</p> <p>Skerven, K., Whicker, D. R., &</p>	

	<p>personality disorders</p>	<p>LeMaire, K. L. (2019). Applying dialectical behaviour therapy to structural and internalized stigma with LGBTQ+ clients. <i>The Cognitive Behaviour Therapist</i>, 12.</p> <p>Byrnes, J. H., & Payne, A. C. (2019). Treatment Adherence from the Perspective of Dialectical Behavior Therapy: Sitting in the Boat and Staying the Course. In <i>Psychiatric Nonadherence</i> (pp. 145-164). Springer, Cham.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
<p>Week 10 (Nov 6)</p>	<p>ACT – Overview</p>	<p><u>Read (all required):</u> Hayes, S., Luoma, J., Bond, F., Masuda, A., Lillis, J, Acceptance and commitment therapy: Model, processes and outcomes, <i>Journal of Behavior Research and Therapy</i> 44 (2006) 1– 25</p> <p>Hayes, S. C. (2004). Acceptance and commitment therapy, relational frame theory, and the third wave of behavioral and cognitive therapies. <i>Behavior therapy</i>, 35(4), 639-665.</p> <p>Mallinckrodt, B. (2010). The psychotherapy relationship as attachment: Evidence and implications. <i>Journal of Social and Personal Relationships</i>, 27(2), 262-270.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p>Note: live class will be shorter this week to give time for role play recording (for assignment due 11/13)</p>	

<p>Week 11 (Nov 13)</p>	<p>ACT</p> <ul style="list-style-type: none"> - Deep dive, application chronic for chronic illness and pain 	<p><u>Read (all required):</u></p> <p>Hughes, L. S., Clark, J., Colclough, J. A., Dale, E., & McMillan, D. (2017). Acceptance and commitment therapy (ACT) for chronic pain. <i>The Clinical journal of pain</i>, 33(6), 552-568.</p> <p>Twohig, M. P., & Levin, M. E. (2017). Acceptance and commitment therapy as a treatment for anxiety and depression: A review. <i>Psychiatric Clinics</i>, 40(4), 751-770.</p> <p>Wynne, B., McHugh, L., Gao, W., Keegan, D., Byrne, K., Rowan, C., ... & Dooley, B. (2019). Acceptance and commitment therapy reduces psychological stress in patients with inflammatory bowel diseases. <i>Gastroenterology</i>, 156(4), 935-945.</p> <p>Simister, H. D., Tkachuk, G. A., Shay, B. L., Vincent, N., Pear, J. J., & Skrabek, R. Q. (2018). Randomized controlled trial of online acceptance and commitment therapy for fibromyalgia. <i>The Journal of Pain</i>, 19(7), 741-753.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	<p>CBT or DBT Role play, reflection, and peer-evaluation assignment 2 due 11/13</p>
<p>Week 12 (Nov 20)</p>	<p>Trauma sensitive mindfulness</p> <ul style="list-style-type: none"> - Overview and application with trauma in integrated health, mental health, and substance use 	<p><u>Read (all required):</u></p> <p>Richmond, K., Burnes, T., & Carroll, K. (2012). Lost in trans-lation: Interpreting systems of trauma for transgender clients. <i>Traumatology</i>, 18:1,45-57.</p> <p>West, J., Liang, B., & Spinazzola, J. (2017). Trauma sensitive yoga as a complementary treatment for posttraumatic stress disorder: A</p>	

		<p>qualitative descriptive analysis. <i>International Journal of Stress Management</i>, 24(2), 173.</p> <p>Hicks, L. M., Dayton, C. J., & Victor, B. G. (2018). Depressive and trauma symptoms in expectant, risk-exposed, mothers and fathers: Is mindfulness a buffer?. <i>Journal of affective disorders</i>, 238, 179-186.</p> <p>Gonzalez, A., Locicero, B., Mahaffey, B., Fleming, C., Harris, J., & Vujanovic, A. A. (2016). Internalized HIV stigma and mindfulness: associations with PTSD symptom severity in trauma-exposed adults with HIV/AIDS. <i>Behavior modification</i>, 40(1-2), 144-163.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
Week 13 (Nov 27)	Thanksgiving break; no class, readings/videos, or assignments due		
Week 14 (Dec 4)	Wrap up: termination and evaluation of progress in integrated health, mental health, and substance use	<p><u>Read (all required):</u> Gelman, C. R., Fernandez, P., Hausman, N., Miller, S., & Weiner, M. (2007). Challenging endings: First year MSW interns' experiences with forced termination and discussion points for supervisory guidance. <i>Clinical Social Work Journal</i>, 35(2), 79-90.</p> <p>Stollenga, D., Schiphorst Preuper, H. R., Dijkstra, P. U., Boonstra, A. M., & Reneman, M. F. (2020). Early termination in interdisciplinary pain rehabilitation: numbers, timing, and reasons. A mixed method study. <i>Disability and Rehabilitation</i>, 1-7.</p>	

		<p>Kriegel, J., Rissbacher, C., Pözl, A., Tuttle-Weidinger, L., & Reckwitz, N. (2020). Levers for integrating social work into primary healthcare networks in Austria. <i>Health Policy</i>, 124(1), 75-82.</p> <p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	
			<p>Final Integrative Analysis and Case Application Paper 12/11</p>

****NOTE: ALL STUDENTS WILL BE NOTIFIED IF THERE ARE SYLLABUS CHANGES VIA ANNOUNCEMENTS IN CANVAS******

c. Assignments/Tasks and Points for Grading

Assignment/Task	Due date (all by 11:59 PM EST on date listed below)	Percent of Overall Grade
Live class attendance and participation in discussions and practicing of clinical skills	Ongoing	15% (15 points)
Question development for discussion groups	TBD per student Sign up in google sheet for due date (topic/week)	5% (5 points)
SIMmersion virtual client (CBT Functional Analysis with Roger Ellison)	Due 10/16 Submit screenshot of score in canvas	5% (5 points)
Role play, reflection, and peer-evaluation (x2)	Due 10/2 (vignette-based using MI) and 11/13 (vignette-based using CBT or DBT) Partners will be assigned	40% (40 points; 20 each)

Final Integrative Analysis and Case Application Paper (vignette-based)	Due 12/11	30% (30 points)
Possible bonus points	Ongoing	5% (5 points)

Note: assignments add up to 95 points **before** the possible bonus points (5), see grading section

All assignment descriptions will be posted on the CANVAS site with their due dates.

Assignment Overviews (greater detail in the assignments section of CANVAS):

- 1. Live class participation and attendance:** Read below in section d, attendance and class participation.
- 2. Question development for discussion groups:** Students will sign-up to choose a class week to be responsible for generating 2 discussion questions from the article readings (not books, only from articles). Each question needs to be from 2 different articles which are assigned for a given week. One question can be a general discussion question related to a reading, and one question **MUST** be PODS-focused (privilege oppression diversity and social justice) related to a reading. Discussion questions will be used in the live class discussion so be mindful of the due date for the week you sign up for in the google doc: <https://docs.google.com/document/d/1PonN1ke7juJ28FEyrXYpmz5Ff3EsXaXS2aWzSGcTx4E/edit?usp=sharing> . Sign up is due to be completed by the start of the 2nd live class. Post your discussion questions in the discussion post area of CANVAS (there will be a discussion thread for each week) and you should enter your 2 questions within the thread in which your questions are due. When you post, PLEASE lead with the type of question and article you are referring to. For *example*, “Discussion question for Gordon article: begin with your question.....” Or “PODS question for Gordon article: begin with your question.....”
- 3. SIMmersion virtual client:** Virtual work with 1 of the SIMmersion clients (CBT Functional Analysis with Roger Ellison). The goal is to get 75% or better in this 15-20 min conversation. You can attempt as many times as needed and will submit the screenshot of a score of 75% or better through CANVAS (upload a screen shot of your performance report score into the assignment section). SIM with Roger: 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.
- 4. Role play, reflection, and peer-evaluation (two are due):** Students will record and share 2 minutes (video clip is a piece of your role play) of a role play in which they are using skills from interventions of focus. Students will be assigned a partner. There will be 2 videos/reflections/evaluations due during the semester: the **first** one using motivational interviewing, and the **second** one using either CBT or DBT. The 2 minutes should show

application of skills (you as the clinician with a student as the client). In addition to submitting the short video, you will submit a 1-page reflection (questions for the reflection will be provided in CANVAS). Lastly, you will complete a peer evaluation of your partner for when they were the clinician. All will be uploaded in CANVAS under this assignment header.

- 5. Final Integrative Analysis and Case Application Paper:** This final paper assignment will focus on integration of cumulative course concepts and intervention skills learned across the semester. A vignette of a clinical case will be provided to students and a series of questions will be asked for response in a written paper (max of 6 pages). Responses will demonstrate students' ability to compare/contrast intervention approaches including strength/limitations; application to diverse clients; comfort level in using various models, etc.

Assignment Guidelines: All assignments and papers to be handed-in are due by 11:59 pm on the dates posted in the syllabus and in CANVAS. Late assignments will result in an automatic reduction of points (1 point will be deducted every 48 hours after the due date/time). Assignments more than 5 days late will not be accepted.

For all assignments you will be graded on:

- Meeting assignment parameters (we will review parameters for each assignment ahead of time)
- Good writing skills: clarity of thought, organization, and flow (**see next section**)
- Effort/ability to self-reflect and think critically
- Demonstration of social work values (empathy, strengths-based thinking, and client dignity)
- Insightfulness and clinical judgment
- Integration of reading materials
- Ability to discern which aspects of use of self would be important in assessment or intervention

Writing skills: Papers and assignments are expected to be well organized, clearly written, and show minimal grammatical errors. In this and most of your classes you will be asked to demonstrate grammar, spelling, and the rules of the American Psychological Association Publication Manual (6th Ed). Note: when APA is expected, it will be clearly requested on assignment descriptions. You are not required to purchase the manual; however, I do encourage you to access it and other writing recourses online (e.g. <https://owl.english.purdue.edu/owl/> and <http://guides.lib.umich.edu/c.php?g=282964&p=1885441>). Please be aware that there will be a reduction of points for poor writing skills (including grammatical errors) and APA errors (when APA is requested). Please use the Sweetland Writing Center if you require writing assistance.

d. Attendance and Class Participation

It is important that you attend each live class session, turn on your webcam, engage in clinical

practice with other students, engage in live class discussions, complete all asynchronous activities (readings, content, and videos), and submit all assignments in CANVAS. It is requested that all students turn on **webcams** during the class for engagement-purposes and to build our classroom community. Use of a webcam will also be important for our virtual discussions of content and practicing skills in role-plays (small groups via zoom). Please let me know if you don't have access to a webcam and/or internet for streaming purposes.

Given the context of remote learning and different environments we are all in, attendance/participation grades for the live class will be managed individually at the discretion of the instructor. Missing more than two 'live' classes, in part or in total for any reason, will result in an automatic attendance/participation grade deduction. *Email me if there is a conflict with attending a live class time (just as you would for missing an in-person class) and we will troubleshoot accordingly.*

Health-Related Class Absences: Please evaluate your own health status regularly and refrain from attending class and coming to campus if you are ill. You are encouraged to seek appropriate medical attention for treatment. School of Social Work students who miss class due to illness of any kind will be given opportunities to access course materials online or provided with alternative learning opportunities. Please notify me by email about your absence as soon as practical, so that I can make accommodations. Please note that documentation (a Doctor's note) for medical excuses is *not* required.

e. Course Requirements and Grading

I will provide feedback to help you deepen awareness of: 1) the process of working with clients, 2) who you are in your work (strengths/challenges), 3) themes that arise in interpersonal practice, and, 4) writing and communication skills. Both content and format will be considered in assignment grades. Failure to follow APA style including references will result in a lower grade. Rubrics for each assignment that is a written submission (i.e., papers) will be posted in CANVAS along with the assignment descriptions.

I will occasionally award a **bonus point** for assignments that are exceptionally well-done and for exceptional class participation and contribution. You can work towards bonus points in the assignments as well (look at the bottom of each assignment description in CANVAS to see what can be done for potential point(s)). Thus, you will notice the points in the assignment section add up to 95, with 5 points of room for bonus points and therefore being eligible for an A+.

Late assignments will result in an automatic reduction of points (1 point will be deducted every 48 hours after the due date/time). Assignments more than 5 days late will not be accepted. Please email the instructor regarding any lateness.

Letter grades ranging from "A" to "F" are earned, with "+" or "-" distinguishing the degree of performance. Each assignment will be given points in a corresponding letter grade, with criteria for each grade as follows:

A+ = 100	B+ = 87-89	C+ = 77-79	D = 66-69
A = 96-99	B = 83-86	C = 73-76	F = less than 66
A- = 90-95	B- = 80-82	C- = 70-72	

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 grade of C– is the lowest which carries credit. D indicates deficiency and carry no credit. A grade of F indicates failure and carry no credit.

If you do not feel that your grade on any assignment is representative of the quality of work you have done, please send me an email within 7 days of the receipt of your graded assignment detailing the specific concerns you have. I will contact you to set up a time to review your concerns in a virtual meeting.

Additional information can be found in the MSW Student Guide for policies on [Grades in Academic Courses and in Field Instruction](#) as well as [Student Grievance procedures](#) and the [policy for grading in special circumstances](#).

f. Class Recording and Course Materials

Audio and video recording of in-class lectures and discussions is prohibited without the advance written permission of the instructor. Students with an approved accommodation from the Office of Services for Students with Disabilities permitting the recording of class meetings must present documentation to the instructor in advance of any recording being done. The instructor reserves the right to disallow recording for a portion of any class time where privacy is a special concern.

Class recordings and all course materials (pre-recorded videos, lecture slides, handouts, readings) may not be reproduced, sold, published or distributed to others, in whole or in part, without the written consent of the instructor.

Additional School and University policies, information and resources are available here:

<https://ssw.umich.edu/standard-policies-information-resources>. They include:

- *Safety and emergency preparedness*
- *Mental health and well-being*
- *Teaching evaluations*
- *Proper use of names and pronouns*
- *Accommodations for students with disabilities*
- *Religious/spiritual observances*
- *Military deployment*
- *Writing skills and expectations*
- *Academic integrity and plagiarism*

Recommended additional article readings (if interested during or after the class):

Week 1:

Berger, T. (2017) The therapeutic alliance in internet interventions: A narrative review and suggestions for future research, *Psychotherapy Research*, 27:5, 511-524.

Holmes, C. & Victoria Foster, F. (2012) A preliminary comparison study of online and face-to-face counseling: Client perceptions of three factors. *Journal of Technology in Human Services*, 30:1, 14-31.

Hook, F., Farrell, J., Davis, D., DeBlaere, C. & Utsey, S. (2016). Cultural Humility and Racial Microaggressions in Counseling. *Journal of Counseling Psychology*, 63 (3): 269- 277.

Nienhuis, J., Owen, J., Valentine, J., Winkeljohn Black, S., Halford, T., Parazak, S., Budge, S. & Hilsenroth, M. (2018) Therapeutic alliance, empathy, and genuineness in individual adult psychotherapy: A meta-analytic review, *Psychotherapy Research*, 28:4, 593-605.

Wampold, B. E. (2015). How important are the common factors in psychotherapy? An update. *World Psychiatry*, 14(3), 270-277.

Weeks 2-4 (MI):

Dickerson, D. L., Brown, R. A., Johnson, C. L., Schweigman, K., & D'Amico, E. J. (2016). Integrating motivational interviewing and traditional practices to address alcohol and drug use among urban American Indian/Alaska Native youth. *Journal of substance abuse treatment*, 65, 26-35.

Ekong, G., & Kavookjian, J. (2016). Motivational interviewing and outcomes in adults with type 2 diabetes: a systematic review. *Patient education and counseling*, 99(6), 944-952.

Kennedy, D. P., Osilla, K. C., Hunter, S. B., Golinelli, D., Hernandez, E. M., & Tucker, J. S. (2018). A pilot test of a motivational interviewing social network intervention to reduce substance use among housing first residents. *Journal of substance abuse treatment*, 86, 36-44.

Marlowe, D., Hodgson, J., Lamson, A., White, M., & Irons, T. (2012). Medical family therapy in a primary care setting: A framework for integration. *Contemporary Family Therapy*, 34, 244-258.

Miller, W. R., & Rollnick, S. (2009). Ten things that motivational interviewing is not. *Behavioural and cognitive psychotherapy*, 37(2), 129-140.

Manthey, T. J., Blajeski, S. & Monroe-Devita, M. (2012). Motivational interviewing and assertive community treatment: A case for training ACT teams. *International Journal of Psychosocial Rehabilitation*, 16, 5016.

Spencer, J. & Wheeler, S. (2016). A systematic review of motivational interviewing interventions in cancer patients and survivors. *Patient Education and Counseling*, 99, 1099-1105.

Tuccero, Donna, et al. (2016). Behavioral health in prevention and chronic illness management: Motivational interviewing." *Primary Care*, 43(2) 191-202.

van Wormer, K. (2007). Principles of motivational interviewing geared to stages of change. *Journal of Teaching in Social Work*, 27(1-2), 21-35.

Wahab, S. (2005). Motivational interviewing and social work practice. *Journal of Social Work*, 51(1), 45-60.

Watson, J. (2011). Resistance is futile? Exploring the potential of motivational interviewing. *Journal of Social Work Practice*, 25(4), 465-479.

Yakovenko, I., Quigley, L., Hemmelgarn, B. R., Hodgins, D. C., & Ronksley, P. (2015). The efficacy of motivational interviewing for disordered gambling: systematic review and meta-analysis. *Addictive Behaviors*, 43, 72-82.

Weeks 5-7 (CBT):

Ametrano, R. & Constantino, M. (2013). Cognitive-Behavioral Therapy. *Mental Health Care Issues in America*, v1, 124-131.

Ehde, D. M., Dillworth, T. M., & Turner, J. A. (2014). Cognitive-behavioral therapy for individuals with chronic pain: efficacy, innovations, and directions for research. *American Psychologist*, 69(2), 153.

Jacqueline, B. P., & Lisa, S. T. (2015). Developing and using a case formulation to guide cognitive-behavior therapy. *Journal of Psychology & Psychotherapy*, 5(3), 1.

Schnurr, P. P., Friedman, M. J., Engel, C. C., Foa, E. B., Shea, M. T., Chow, B. K., ... & Turner, C. (2007). Cognitive behavioral therapy for posttraumatic stress disorder in women: A randomized controlled trial. *Jama*, 297(8), 820-830.

Unwin, G., Tsimopoulou, I., Kroese, B. S., & Azmi, S. (2016). Effectiveness of cognitive behavioural therapy (CBT) programmes for anxiety or depression in adults with intellectual disabilities: A review of the literature. *Research in Developmental Disabilities*, 51, 60-75.

Weeks 8-9 (DBT):

Brown, L. F., Davis, L. W., LaRocco, V. A., & Strasburger, A. (2010). Participant perspectives on mindfulness meditation training for anxiety in schizophrenia. *American Journal of Psychiatric Rehabilitation*, 13(3), 224-242.

Kleiber, B. V., Felder, J. N., Ashby, B., Scott, S., Dean, J., & Dimidjian, S. (2017). Treating depression among adolescent perinatal women with a dialectical behavior therapy–informed skills group. *Cognitive and Behavioral Practice, 24*(4), 416-427.

McCauley, E., Berk, M. S., Asarnow, J. R., Adrian, M., Cohen, J., Korslund, K., ... & Linehan, M.M. (2018). Efficacy of dialectical behavior therapy for adolescents at high risk for suicide: a randomized clinical trial. *JAMA psychiatry, 75*(8), 777-785.

Wagner, Elizabeth E., Jill H. Rathus, and Alec L. Miller. "Mindfulness in dialectical behavior therapy (DBT) for adolescents." *Mindfulness-based treatment approaches: Clinician's guide to evidence base and applications* (2006): 167-189.

Welch, S. S., Rizvi, S., & Dimidjian, S. (2006). Mindfulness in dialectical behavior therapy (DBT) for borderline personality disorder. *Mindfulness-based treatment approaches: Clinician's guide to evidence base and applications*, 117-139.

Weeks 10-11 (ACT):

Powers, M. B., Vörding, M. B. Z. V. S., & Emmelkamp, P. M. (2009). Acceptance and commitment therapy: A meta-analytic review. *Psychotherapy and psychosomatics, 78*(2), 73-80.

Forman, E. M., Herbert, J. D., Moitra, E., Yeomans, P. D., & Geller, P. A. (2007). A randomized controlled effectiveness trial of acceptance and commitment therapy and cognitive therapy for anxiety and depression. *Behavior modification, 31*(6), 772-799.

Week 12 (Trauma):

Corstorphine, E., Waller, G., Lawson, R. & Ganis, C. (2007). Trauma and multi-impulsivity in the eating disorders. *Eating Disorders, 8*: 23-30.

West, J., Liang, B., & Spinazzola, J. (2017). Trauma sensitive yoga as a complementary treatment for posttraumatic stress disorder: A qualitative descriptive analysis. *International Journal of Stress Management, 24*(2), 173.

Week 14 (Wrap-up):

Anthony, S., & Pagano, G. (1998). The therapeutic potential for growth during the termination process. *Clinical Social Work Journal, 26*(3), 281-296.

Baum, N. (2007). Therapists' responses to treatment termination: An inquiry into the variables that contribute to therapists' experiences. *Clinical Social Work Journal, 35*(2), 97-106.