



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

Term:	Spring/Summer 2021
Instructor:	Lindsay A. Bornheimer, PhD, LCSW
Course #/term:	SW602.002 Sp/Su 2021
Time and place:	Monday (5/10 to 8/2) from 9 AM to 11 AM (Eastern Time Zone) (Note: course is virtual, 9 to 11 am EST is live class time via zoom)
Credit hours:	3
Prerequisites:	Foundation essentials required
Pronouns:	She, her, hers
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Office Hours:	Monday from 11 am to noon EST via Zoom (sign-up in CANVAS)

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, goal setting, use of evidence based and informed interventions, and the termination and evaluation phases of treatment. Particular focus will be on advanced clinical competency development regarding: 1. Engagement and rapport building, 2. Goal setting and problem solving, 3. Identifying and implementing appropriate intervention approaches, and 4. Termination and evaluation of treatment.

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: 1. Case conceptualization, 2. Behavioral activation, 3. Cognitive restructuring, 4. Exposure, 5. Managing ambivalence and resistance, 6. Emotion regulation and distress tolerance, and 7. Trauma-sensitive mindfulness.

Core evidence-based/evidence-informed therapies will be the focus of this class including: 1. Motivational interviewing, 2. Cognitive behavioral therapy (CBT) and 3. emerging acceptance-based therapies such as Dialectical Behavioral therapy (DBT), Acceptance and Commitment Therapy (ACT), and Mindfulness-Based Cognitive Therapy (MBCT).

Attention will be given to application of interventions with clients across diverse populations and needs, 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 integrated health, mental health, and substance abuse practice settings such as community

mental health agencies, health care facilities and non-profit agencies.

b. Course objectives and competencies

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

1. Upon completion of the course, students will be able to: 1. Identify and provide evidence-based interventions and best social work practices in a variety of health settings including integrated health, mental health, behavioral health, hospital, outpatient and community care settings. (EPAS Competency 2, 4, 8)
2. Deliver brief, trauma-informed, interventions for mental conditions, risky or harmful substance use conditions, adjustment to illness and chronic disease management. (EPAS Competency 2, 4, 8)
3. Provide clinical, evidence-based/evidence-informed rationale for use of a specific intervention to match client needs, preferences and response. (EPAS Competency 2, 4, 8)
4. Use focused interventions to engage clients in change process to improve health and to adhere to patient-centered treatment/care plans (e.g., motivational interviewing) (EPAS Competency 4, 6, 8)
5. Deliver brief supportive interventions addressing holistic consequences of physical, mental illness and injury. (EPAS Competency 6, 8)
6. Identify and provide longer-term models of treatment and support for clients with persistent illnesses/conditions that require follow-up over time. (EPAS Competency 6, 8)
7. Provide information, education, guidance, and support to family members about health conditions, prevention, available treatments, illness and self-management, peer support and recovery. (EPAS Competency 2, 6, 8)
8. Monitor and evaluate outcomes of interventions and modify, adjust interventions accordingly. (EPAS Competency 7, 9)

c. Course design

This course supports a flipped classroom approach in which students complete pre-work (readings, lecture materials, viewing videos) and class time has minimal didactic lecture and is primarily spent practicing intervention techniques.

Use of student generated standardized clients developed in the required assessment course may be used to practice intervention skills.

Active engagement in intervention practice, engagement in role plays, observation and critical analysis of various interventions, matching interventions to client needs, and mutual constructive feedback is critical to the skill development focus of this class.

d. Intensive focus on PODS

This course integrates 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 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.

Consideration will be given to the ways in which diversity factors such as age, race, ethnicity, gender, sexual orientation, sexual identity, socioeconomic status and class, immigration status, ability, family status, geographic location, ethnicity and culture interact with and impact health, mental health and behaviorally focused interventions.

2. Class Requirements

a. Text and class materials

Required books (all available through UM Library electronically)

IMPORTANT NOTE: You do not need to purchase these books unless desired

- 1) Beck, J. S. (2020). *Cognitive behavior therapy: Basics and beyond* (3rd ed). Guilford Press. Available for all students electronically (no cost) via the UM Library: <https://search.lib.umich.edu/catalog/record/018266379>
- 2) 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) 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>
- 6) Treleaven, D. A. (2018). *Trauma-sensitive mindfulness: Practices for safe and transformative healing*. WW Norton & Company.
- 7) 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 and viewing content, practicing skills). Asynchronous items should be completed **prior** to the live class time to engage in discussion and clinical practice. Live classes will be recorded and shared securely with students who may be absent. Breakout sessions with discussions and skill practicing will not be recorded.

Live synchronous class time: Monday from 9 AM to 11 AM (Eastern Time). *Note: the course is scheduled from 8 AM to 12 PM (noon), yet our live time together will only be 2 hours maximum. The additional time is for you to engage in asynchronous material, practice skills, or attend office hours.*

Day/Class	Agenda	To do prior to class (read, watch)	Assignment Due by 11:59 PM EST
Week 1 May 10	Course Introduction <ul style="list-style-type: none"> - Overview of course - Ethical Social Work Practice with Adults - Culture and intersectionality - Core intervention/ treatment skills in integrated health, mental health, and substance use 	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor</p> <p><u>Required Readings:</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>Reamer, F. G. (2018). Ethical issues in integrated health care: Implications for social workers. <i>Health & social work</i>, 43(2), 118-124.</p> <p>Santiago, C. D., Kaltman, S., & Miranda, J. (2013). Poverty and mental health: how do low-income adults and children fare in</p>	

		psychotherapy?. Journal of Clinical Psychology, 69(2), 115-126.	
Week 2 May 17	<p>Advancing Therapeutic Alliance through Anti-racist Clinical Practice</p> <ul style="list-style-type: none"> - Understanding the levels of empathy and how to use them - Utilizing screening and testing to support clinical decision making - Addressing PODS in the therapeutic environment <p>Motivational Interviewing (MI): Overview and the Engaging Process</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Miller & Rollnick text: Chapters 2, 3, and 4 (optional chapters if interested/have time: 1, 5, 6, and 7)</p> <p>Berger, T. (2017) The therapeutic alliance in internet interventions: A narrative review and suggestions for future research, <i>Psychotherapy Research</i>, 27:5, 511-524.</p> <p>Hook, F., Farrell, J., Davis, D., DeBlaere, C. & Utsey, S. (2016). Cultural Humility and Racial Microaggressions in Counseling. <i>Journal of Counseling Psychology</i>, 63 (3): 269- 277.</p> <p>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, <i>Psychotherapy Research</i>, 28:4, 593-605.</p>	
Week 3 May 24	<p>Motivational Interviewing (MI): The Focusing and Evoking Process with Application for Substance Abuse and Smoking</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Miller & Rollnick text: Chapters 8, 10, 14 (optional chapters if interested or have time: 9, 11, 13)</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.</p>	

		<p>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>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. <i>Journal of substance abuse treatment</i>, 86, 36-44.</p>	
<p>Week 4 May 31</p>	<p><u>Memorial Day- HOLIDAY</u> no class, readings/videos, or assignments due</p>		
<p>Week 5 June 7</p>	<p>Motivational Interviewing (MI): The Planning Process, Resistance, and Application in Integrated Health, Mental Health, and Substance Use</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Miller & Rollnick text: Chapters 12, 19, and 20 (optional if interested/have time: 21 and 22)</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>Rollnick, S., Miller, W. R., & Butler, C. (2008). How Motivational Interviewing fits in Health Care: Chapter in <i>Motivational interviewing in health care: helping patients change behavior</i>. Guilford Press.</p>	
<p>Week 6 June 14</p>	<p>Cognitive Behavioral Therapy (CBT): Overview, Cognitive</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p>	<p>MI role play assignment due by 11:59 PM</p>

	<p>Conceptualization, and Case Formulation</p>	<p><u>Required Readings:</u></p> <p>Beck text: Chapters 3, 4, and 5</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>Weiss, M., Murray, C., Wasdell, M., Greenfield, B., Giles, L., & Hechtman, L. (2012). A randomized controlled trial of CBT therapy for adults with ADHD with and without medication. <i>BMC psychiatry</i>, 12(1), 1-8.</p>	<p>EST</p>
<p>Week 7 June 21</p>	<p>Cognitive Behavioral Therapy (CBT): Application of Skills in the Treatment of Depression</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Beck text: Chapters 7, 14, and 15</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>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>Vally, Z., & Maggott, C. (2015). Evaluating the outcome of cultural adaptation of cognitive-behavioral therapy for adult depression: A meta-analysis of treatment studies in developing countries. <i>International Journal of Advanced Counselling</i>, 37, 283-304.</p>	

<p>Week 8 June 28</p>	<p>Cognitive Behavioral Therapy (CBT): Application of Skills in the Treatment of Anxiety and OCD</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Beck text: Chapters 17, 18, and 20 (optional chapters if interested or have time: 19, 22)</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, 17</i>(3), 337.</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, 26</i>(3), 235-242.</p> <p>Steele, J. M. (2020). A CBT Approach to Internalized Racism among African Americans. <i>International Journal for the Advancement of Counselling, 42</i>(3), 217–233.</p> <p>Bornheimer, L. A. (2015). Exposure and response prevention as an evidence-based treatment for obsessive–compulsive disorder: Considerations for social work practice. <i>Clinical Social Work Journal, 43</i>(1), 38-49.</p>	<p>SIMmersion with Roger due by 11:59 PM EST</p>
<p>Week 9 July 5</p>	<p align="center"><u>JULY 4TH OBSERVED HOLIDAY</u> no class, readings/videos, or assignments due</p>		
<p>Week 10 July 12</p>	<p>Dialectical Behavior Therapy (DBT): Overview and Application for Personality Disorders</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></p> <p>Linehan text (DBT skills training manual): Chapter 1 and 2 (if you have time/interest: read all chapters)</p>	<p>SIMmersion with Melody due by 11:59 PM EST</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>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>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>Skerven, K., Whicker, D. R., & 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>Week 11 July 19</p>	<p>Acceptance and Commitment Therapy (ACT): Overview and Application for Chronic Illness and Pain</p>	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></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>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>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>Twohig, M. P., & Levin, M. E. (2017). Acceptance and commitment therapy as a</p>	<p>CBT or DBT role play assignment due by 11:59 PM EST</p>

		treatment for anxiety and depression: A review. <i>Psychiatric Clinics</i> , 40(4), 751-770.	
Week 12 July 26	Trauma Sensitive Mindfulness: Overview and Application for Trauma in Integrated Health, Mental Health, and Substance Use settings	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor Treatment videos/additional videos</p> <p><u>Required Readings:</u></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>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>West, J., Liang, B., & Spinazzola, J. (2017). Trauma sensitive yoga as a complementary treatment for posttraumatic stress disorder: A qualitative descriptive analysis. <i>International Journal of Stress Management</i>, 24(2), 173.</p>	
Week 13 Aug 2	Wrap up: Termination and Evaluation of Progress in Integrated Health, Mental Health, and Substance Use	<p><u>Watch (in CANVAS under week):</u> Pre-recorded video of the instructor</p> <p><u>Required Readings:</u></p> <p>Bischoff, T., Krenicki, L., & Tambling, R. (2020). Therapist reported reasons for client termination: A content analysis of termination reports. <i>The American Journal of Family Therapy</i>, 48(1), 36-52.</p> <p>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,</p>	Final integrative paper due by 11:59 PM EST

		M. F. (2020). Early termination in interdisciplinary pain rehabilitation: numbers, timing, and reasons. A mixed method study, <i>Disability and Rehabilitation</i> , 1-7.	
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****NOTE: ALL STUDENTS WILL BE NOTIFIED IF THERE ARE UNANTICIPATED SYLLABUS CHANGES VIA ANNOUNCEMENTS IN CANVAS******

C. Assignments

Assignment/Task	Due date	Percent of Grade/Points
Attendance and Participation in Live Class	Ongoing	10% (10 points)
Question development for discussion groups	You will choose your week	5% (5 points)
SIMmersion virtual clients (x2) 1) CBT Functional Analysis with Roger 2) CBT Creating a Change Plan with Melody	<u>Roger Due: Week 8 (June 28) by 11:59 PM (EST)</u> <u>Melody Due: Week 10 (July 12) by 11:59 PM (EST)</u>	10% (10 points; 5 each)
Role play, reflection, and peer-evaluation (x2)	<u>MI Due: Week 6 (June 14) by 11:59 PM (EST)</u> <u>CBT or DBT Due: Week 11 (July 19) by 11:59 PM (EST)</u>	30% (30 points; 15 each)
Final Integrative Analysis and Case Application Paper (vignette-based)	Due: Week 13 (Aug 2) by 11:59 PM (EST)	40% (40 points)
Bonus Points and Choice Assignment Points	Ongoing	5% (5 points)

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 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. Questions will be used in the live class discussion so be mindful of the due date for the week you sign-up in the google doc: [see Module 1 of the CANVAS course for link to document]. Since class is on Mondays, discussion questions are due Saturday by 11:59 PM EST prior to the corresponding Monday class. Sign-up week selection is due by the start of the 2nd live class (May 17). When it is your week, 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 clients (two are due):** Virtual work with 12 of the SIMmersion clients (CBT Functional Analysis with Roger and CBT Creating a Change Plan with Melody). The goal is to get 75% or better in this 15-20 min conversation. You must practice with each client at least 3 times but can attempt as many times as needed to achieve the score. You 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). In addition to the functional analysis and change plan skills, you will 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 accurate and effective 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.
6. **Bonus Points and Choice Assignment Points.** 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 these points through choice assignments as well (look at the bottom of assignment descriptions in CANVAS to see what can be done for a potential point). **Thus, you will notice the points in the assignment section add up to 95, with 5**

points of room for bonus points/choice assignment points and therefore being eligible for an A+.

Assignment Guidelines: All assignments and papers to be handed-in are due by 11:59 PM (Eastern Standard Time) 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 resources 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. 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. Rubrics for each assignment that is a written submission (i.e., papers) will be posted in CANVAS along with the assignment descriptions.

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. If the instructor chooses to record a class, they will decide which classes, if any, are recorded, what portion of each class is recorded, and whether a recording is made available on the course management website.

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.

g. Covid-19 Statement

For the safety of all students, faculty, and staff on campus, it is important for each of us to be mindful of safety measures that have been put in place for our protection. By returning to campus, you have acknowledged your responsibility for protecting the collective health of our community. Your participation in this course on an in-person/hybrid basis is conditional upon your adherence to all safety measures mandated by the state of Michigan and the University, including maintaining physical distancing of six feet from others, and properly wearing a face covering in class. Other applicable safety measures may be described in the [Wolverine Culture of Care](#) and the [University's Face Covering Policy for COVID-19](#). Your ability to participate in this course in-person/hybrid may be impacted by failure to comply with campus safety measures. Individuals seeking to request an accommodation related to the face covering requirement under the Americans with Disabilities Act should contact the [Office for Institutional Equity](#). If you are unable or unwilling to adhere to these safety measures while in a face-to-face class setting, you will be required to participate on a remote basis. I also encourage you to review the [Statement of Student Rights and Responsibilities](#) and the [COVID-related Addendum to the Statement of Student Rights and Responsibilities](#).

h. 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.

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):

Weeks 2-4 (MI):

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.

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.

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 5-8 (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.

Week 10 (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.

[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 *Psychiatric Nonadherence* (pp. 145-164). Springer, Cham. doi: 10.1007/978-3-030-12665-0_10

Week 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.

[Hayes, S., Luoma, J., Bond, F., Masuda, A., Lillis, J. \(2006\).](#) Acceptance and commitment therapy: Model, processes and outcomes. *Journal of Behavior Research and Therapy* 44 (1), 1– 25. doi: 10.1016/j.brat.2005.06.006

[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. *Gastroenterology*, 156(4), 935-945. doi: 10.1053/j.gastro.2018.11.030

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 13 (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.