1. Course Description:

This course will approach work with individual clients from a person-in-environment perspective and build on the content presented in course 521/540 (i.e. Interpersonal Practice) and equivalent courses. 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 diversity (i.e. race, gender, ethnicity, class, and sexual orientation of the client), time-limited treatment methods, and practice with involuntary clients.

2. Course Content:

This course will present various models of intervention designed to prevent and treat psychosocial problems of individual adults. Emphasis will be placed on approaches that enhance
social functioning, strengthen problem solving capacities, and support the coping capacities of individual adults. The various models will be responsive to the impact of social environments, and supported by empirically based efficacy studies. Treatment models that focus on specific psychosocial problems associated with work, relationships, mood, anxiety, and impulse problems will be discussed. Various treatment models will be presented such as psychodynamic, cognitive-behavioral, and client-centered. These intervention models will also be evaluated for how well they fit the special needs of diverse populations (e.g., people of color; gay, lesbian, bisexual, and transgendered clients, and the poor) and meta-theories from empowerment, feminist and socialist perspectives will be applied.

Each model presented will cover all phases of the intervention process: engagement and screening, assessment, planning, evaluation, implementation, and termination. Although evaluation will be discussed in much greater depth in the Practice Area evaluation courses, students will learn how to integrate evaluation techniques and measures into their on-going interventions with individual adults so that they can employ systematic measures of their effectiveness in the field. This course will carefully explore the issues that influence and determine client motivation because many individual adults come into the treatment process with varying degrees of willingness and sometimes are coerced to seek help by authorities or family members. Strategies that workers can employ to engage reluctant or resistant clients will be presented. Intervention models in this course will be general enough to apply to a wide range of adult clients in a wide range of situations, since other courses will focus more specifically on special populations and problems. Course content will include ethical issues that relate to interpersonal practice with individual adults and those elements of the NASW code of ethics that especially impact on practice with individual adults.

3. Course Objectives:

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.
2. Assess the effectiveness of various kinds of intervention models and procedures that may be utilized with individual adults.
3. Operationalize the various intervention phases of prevention and treatment models that effectively impact the psycho-social problems of individual adults.
4. Identify common factors that determine client motivation in adults and how to apply specific interventions to enhance “readiness” for client change.

5. Modify intervention models to take into account race, gender, ethnicity, social class, sexual orientation, and special abilities of adult clients.

6. Operationalize the NASW Code of Ethics as it applies to value dilemmas in interpersonal practice with adults.

4. Course Design:

   This course will employ a number of methods 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, and didactic presentations of theory/models/procedures. Whenever possible, assignments will be tied to the field placement experiences of students.

5. Relationship of the Course 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 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 and Social Change 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.

6. Relationship of the Course 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.

REQUIRED TEXTS: (available at Ulrich’s Bookstore)


RECOMMENDED READINGS


*Horowitz, Mardi, & Charles Marmar, Janie Krupnick, Nancy Wilner, Nancy Kaltreider, Robert Wallerstein (1997), Personality Styles and Brief Psychotherapy, Jason Aronson, Northvale, NJ.


ASSIGNMENTS

Assignments will emphasize exercises for developing and practicing new skills, particularly those that facilitate the development and care of the therapeutic relationship. You will develop your ability to assess your skills and to give and receive constructive feedback from others. An important tool will be the recording and assessment of your interview skills and interventions with audio or video tapes. Exercises will also focus on developing centering and stress management skills that will increase your empathy, self-awareness, and readiness. You will also be expected to know how to evaluate relevant scientific literature as a way to inform your practice and to be able to select tools for measuring your effectiveness. Finally, assignments will help you to expand your theoretical base, apply theories to practice, and integrate various approaches.
1) Participation in Individual and Group Exercises (from Teyber Student Handbook and in class assignments). There will be several exercises and small group presentations throughout the semester. You will be asked to write brief reactions to these exercises [1-2 pages each; Pass/Fail; 10% of grade; due same day as reading is discussed in class.

2) Taped Clinical Role Play, Part I: Building the Therapeutic Alliance, “Honoring” Resistance”, and Creating an Internal Focus of Change. Audio or video tape at least 15-30 minutes of a role-played interview. Indicate that this role play will take place in the early stages of treatment. Provide you “client” with only basic information to the prior to the role-play. This assignment will require that the client be willing and able to improvise, inventing details based on the limited information you offer. You each will have the opportunity to be therapist and client, so the risks and challenges in each role will be shared. As therapist, demonstrate abilities such as accurate empathy, summarizing, partializing, “going beyond what was said” [deeper empathy], exploring ambivalence, “honoring” resistance, and other abilities for engaging the client. You might also choose to practice confrontation skills. Acknowledge and discuss any worker/client differences [e.g., age, gender, race, class, religion, sexual orientation, special abilities], as appropriate. Ask the role-play “client” to give you written and verbal feedback. At a later time and after considering the feedback you receive, repeat the role-play and again ask for written and verbal feedback. Written feedback from the “client” should also be turned in with the assignment. Transcribe 5-10 minutes of the tape to illustrate a strength in your approach OR a place where you felt “stuck” and in need of additional feedback. Additionally, using concepts from Teyber and from Safran and Muran, illustrate and discuss how you tried to maintain and/or strengthen your working alliance with the client. Highlight examples of efforts to repair ruptures in the alliance and the results. 5-7 pages; 20% of grade; Due date: 10/23. NB: A handout with more detailed guidelines for this paper will be provided in class and on course tools.

3) Taped Clinical Role Play, Part II: Working with the same client situation, but at a later stage of therapy (mid-stage or nearing termination), create a tape recording (10-15 minutes) of an interaction that illustrates your efforts to respond to your client’s conflicted emotions. Illustrate Teyber’s concepts (approaching affect, identifying affects, providing a holding environment, and pointing out strategies for avoiding/resisting
feelings) in the role play. As in Part I, seek and incorporate your client’s feedback into a second trial role play and into your written discussion of the work. 5-7 pages; 20% of grade; 
Due Date: 11/20

4) Read an personal narrative or case study of a psychotherapeutic experience—either from the point of view of the client/patient or the therapist (A list of suggestions will be provided in class). Summarize the account along with your reactions to this narrative, including the following:

• What was the modality used by the therapist in this narrative? Give examples of how some of the key ingredients of this modality appear in the story the narrator tells. What techniques are used by the therapist? How is the frame of the therapy established and maintained throughout the story? How are the goals for treatment established, pursued, and achieved? Describe the nature of the relationship between the therapist and the client. What role does the relationship between therapist and client play in the account (from both therapist and client perspectives)? How is transference/countertransference acknowledged and worked with in the story?

• What were the challenges faced by each participant in developing and maintaining the therapeutic alliance.

• In your opinion, what are the strengths and weaknesses in the therapeutic approach and style of the therapist in this account?

• Refer to research on the efficacy, strengths and limitations of this treatment modality. What are your reactions to this data? Consider possible biases you detect in the selection or interpretation of studies and comment on specific lessons from the review that you can apply to your practice.

• What were you own personal reactions to this narrative via your identification with both therapist and client. What do you feel would be challenging to you in this case, (again in both roles)?

7-10 pages; graded; 20% of grade. Due 12/05.

5) Centering and Interview Preparation. Cognitive restructuring, progressive relaxation, and autogenic methods of centering will be taught in class. Apply at least one of these methods to a number of role-play or actual interviews as indicated on the Interview Preparation Form. Using this Form, assess your level of discomfort before and during the interview and reflect on the process of centering and preparation after the interview. Extra forms are available on the class Web site. Make assessments of your comfort level for at least 3 interviews.
without any preparation/centering. Your assessments for these 3 interviews will form a brief baseline for comparison with the centering/preparation phase of the assignment. Next, make assessments for 5 more interviews but this time use one of the preparation/centering methods. In 3-4 pages double spaced pages describe: a) the centering method or methods you used and your reasons for using them; b) what seemed to help or hinder in your implementation of the centering methods you used? c) what are the overall outcomes, lessons, and conclusions from your implementation of the centering and interview preparation skills? **Pass/fail; 10% of grade; Due date: 12/5.**

6) **Appraisal of your current role as therapist and goals for growth.** Write an 7-10 page essay, relying on the conceptual frameworks and techniques studied in this class (from Teyber, Safran & Muran, and others) in which you discuss your own challenges as a therapist. Please use clinical material from your own field experience to illustrate these challenges. Your reflections should emphasize particular aspects of the work itself (e.g., addressing and managing resistance in the therapeutic relationship, responding to ruptures in the therapeutic alliance, responding to and staying with intense affects, handling transference and countertransference feelings in the work; dealing with challenges related to self disclose; managing termination, etc.) Discuss your reasons for comfort or discomfort with particular theoretical approaches. Comment on ethical issues you have encountered thus far in your work as a therapist and how you have resolved these questions. Please incorporate feedback you’ve received thus far from supervisors, teachers, clients, and peers in your reflections. Use this essay as an opportunity to communicate with me and with yourself about your goals for your own continued growth as a practitioner. (7-10 pages; graded; 20% of grade; due 12/12.

**Class Attendance & Participation.** Participation in class discussions is strongly encouraged but will not be graded. Attendance is expected at each class. If you miss a class for any reason, please ask a classmate or instructor to tape record the class for you, share notes, and collect handouts for you.
9/04 Class #1
• Introduction to Course work
• The Uses and Misuses of Theory
• Ingredients of the Therapeutic Alliance

9/18 Class #3
• Developing Culturally Competent Practice
• Enhancing Motivation for Change
• Assessing Your Motives as a Helper

Turner: Chpt. 4 “Client-Centered Theory: A Person-Centered Approach, pp. 69-93
McWilliams (on reserve) Nancy McWilliams (1999) Psychoanalytic Case Formulation,
Chpt. 2 “Orientation to Interviewing” pp. 29-47.
Chpt. 4 “Assessing Developmental Issues” pp. 65-84.

Class 4: 9/25/2003
• Overview of Theoretical Approaches and Their Integration
• Relaxation as a Foundation for Change

Teyber: Chpt. 5 “Responding to Conflicting Emotions.” pp. 116-148
Davis et al.: Chpt. 4-5, “Progressive Relaxation” pp. 31-68
Safran : Chpt. 3 “Understanding Ruptures & Therapeutic Impasses” pp72-107.
McWilliams Chpt. 5 “Assessing Defense” pp. 85-101

10/2 Class #5
• Deepening Awareness
• The therapist and mindfulness
• Working with personal history in the therapeutic relationship

Teyber: Chpt. 6  “Familial and Developmental Factors” pp. 151-178.
Davis et al  Chpt. 5  “Meditation” pp. 35-50 and Chpt. 6  “Visualization”pp. 51-60
Safran: Chpt. 4  “Therapeutic Metacommunications” pp. 108-139.

10/9 Class #6
• Addressing Ethical Dilemmas
• Refuting Irrational Ideas
• Self Suggestions
• Core Cognitions from Childhood

Cournoyer (electronic reserve)
  Chpt. 3, “Ethical Decision Making”, read and do exercises
Davis et al. Chpt. 8 “Self-Hypnosis” pp. 69-82.
  Chpt. 12 “Refuting Irrational Ideas” pp 107-126.
  Chpt. 13 “Thought Stopping,” pp 127-134
  Chpt. 14 “Worry Control” pp 135-150
Turner: Chpt. 3 “Behavior Theory & Social Work Treatment” pp. 39-68
  Chpt. 5 “Cognitive Theory & Social Work Treatment” pp. 94-115

10/16 Class #7
• Cognitive Techniques
• Inflexible Coping Strategies

Teyber: Chpt. 7  “Inflexible Interpersonal Coping Strategies” 179-208
Davis et al Chpt. 15 “Coping Skills Training” pp. 151-174
McWilliams Chpt. 10 “Assessing Pathogenic Beliefs” pp. 180-199.
10/23 Class #8 Papers due

- Coping Skills Training
- Desensitization
- Conflict in the Therapeutic Relationship

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10/30 Class #9

- The Therapy Relationship for Interpersonal Change
- Research Reviews on Efficacy of Practice Approaches and Problems

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11/6 Class #10

- Goal Setting
- Motivational Interviewing

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11/13 Class #11

- Integration of Childhood Factors and Cognitive Therapy

9/16/03 jh628-001f03.doc  Page 14
• Involuntary Clients
• Collaborating with Pharmacotherapy

Miller and Rollnick, Chpt. 7 & 8 “Responding to Change Talk and Resistance”
Rubin (on reserve) Lillian Rubin The Man With The Beautiful Voice (and More Stories from the Other Side of the Couch) (2003), Beacon Press.
   “To Live Or Die” pp. 31-102
   “Waiting and Watching” pp. 103-130
   “Border Crossings” pp. 131-153

11/20 Class #12 Papers due

• Developing a responsible eclectic approach to psychotherapy
• Considering the whole self of the client and the therapist
• Challenges in brief and mid-length psychotherapies

Turner: Chpt. 28 “Transpersonal social work” pp 663-698
Chpt. 29 “An Interlocking Perspective for Social Work” pp. 699-711
John Wilson & Jacob Lindy (eds) 1994 Countertransference in the Treatment of PTSD,
Chpt. 1 “Empathic Strain and Countertransference” pp. 5-30
Chpt. 2 “Empathic Strain and Therapist Defense” pp. 31-61.
Chpt. 3 “Empathic Strain and Countertransference Roles” pp. 62-85

11/28/03 Thanksgiving Holiday

12/4 Class #13 Papers due (reminder last paper due 12/12)

• Setting goals for continuing growth as therapists
• Class summary and year-end celebration