RUTGERS
School of Social Work

COURSE SYLLABUS

CLINICAL SOCIAL WORK II
19:910:512
SPRING 2019
INSERT LOCATION
INSERT DAY & HOURS OF THE COURSE

Instructor:
Phone:
E-Mail:

CATALOG COURSE DESCRIPTION

This course addresses therapeutic work with couples, families and groups. The focus is on the professional use of self in differentiated ways to enhance therapeutic outcomes. Reinforcement of the connections among theory, evidence-based practice, interventions and culturally appropriate and anti-oppressive stances toward social work practice occurs.

COURSE OVERVIEW

This course builds on the advanced techniques of practice taught in Clinical Social Work I. Clinical Social Work II is designed to prepare students to conceptualize, provide, and supervise delivery of social work services to couples, families and groups. Emphasis is on developing competence in processes for helping prevent problems, and to enhance, develop and restore social functioning.

PLACE OF COURSE IN THE PROGRAM

This course builds on the learning principles and skills of Clinical Social Work I and focuses on intelligent application and evaluation of practice theories. Prerequisite is successful completion of both Clinical Social Work I, and one semester of advanced practice field along with a concurrent field placement in direct practice.

PROGRAM LEVEL LEARNING GOALS AND THE COUNCIL OF SOCIAL WORK EDUCATION'S SOCIAL WORK COMPETENCIES

The Council on Social Work Education Policy and Accreditation Standards
The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). CSWE's accreditation standards can be reviewed at www.cswe.org

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In keeping with CSWE standards, the Rutgers School of Social Work has integrated the CSWE competencies within its curriculum. These competences serve as program level Learning Goals for the MSW Program and include the following. Upon completion of their MSW education students will be able to: demonstrate ethical and professional behavior; engage in diversity and difference in practice; advance human rights and social, economic and environmental justice; engage in practice informed research and research informed practice; engage with individuals, families, groups organizations and communities; intervene with individual, families, groups organizations and communities; and evaluate practice with individuals, families, groups, organizations and communities.

This course will assist students in developing the following competencies:

Competency 2: Engage Diversity and Difference in Practice
Clinical social work practitioners are knowledgeable about many forms of diversity and difference (e.g., culture, age, health/mental health functioning, educational attainment, sexual orientation/gender identity socioeconomic status, race/ethnicity etc.) and how these components influence the therapeutic relationship and clients' presenting concerns. Clinical social workers understand how various dimensions of diversity affect explanations of health/mental health and well-being, as well as help-seeking behaviors. Practitioners in clinical social work value cultural strengths and recognize the importance of tailoring their engagement strategies, assessment tools, and interventions to meet the diverse needs of their clients. Practitioners in clinical social work monitor their biases, reflect on their own cultural beliefs, and use and apply knowledge of diverse populations and complex health/mental health delivery systems to enhance client well-being. Clinical social workers recognize the need to conceptualize cases using an intersectional perspective and to identify their clients' strengths and resiliencies, while learning to critically evaluate their own family history, privileges, and characteristics. In presenting case material, clinical social work practitioners integrate anti-oppressive stances and attend to clients' experiences of oppression and marginalization while also working to avoid undue pressure or use of power over clients.

Competency 6: Engage with Individuals, Families, Groups, Organizations, and Communities
Clinical social work practitioners recognize the importance of the engagement process and understand the importance of differential use of self in initial encounters. Practitioners in clinical social work rely on the ecological perspective to inform the therapeutic relationship; are aware of how interpersonal dynamics and cultural factors shape the therapeutic relationship; and use relational techniques to develop a therapeutic relationship. Clinical social workers recognize how engagement with couples, families and groups may differ from individual approaches, and they develop differential engagement skills accordingly. Clinical social workers value collaboration and thus recognize the importance of clients' input in the development of their treatment goals. Clinical social workers use the engagement process to help clients convey their thoughts and concerns within the therapeutic relationship as well as to other providers/stakeholders.

Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities
Clinical social workers understand the importance of the assessment process and recognize that it is ongoing and that it directly informs their interventions. Clinical social workers value holistic assessment and therefore use the bio-psycho-social-spiritual assessment process as well as analysis of clients' strengths and resiliencies, their coping skills, and their adaptation to traumatic and stressful life events in a full assessment. Practitioners of clinical social work understand how their personal experiences may impact the assessment process. Clinical social workers recognize the power of intergenerational family patterns on individuals and explain these to clients while avoiding deterministic approaches to identifying such patterns. When applicable, clinical social workers rely on the *Diagnostic and Statistical Manual of Mental Disorders* to enhance their assessment, to conduct differential diagnosis, and to communicate with other healthcare providers about clients' presenting problems and symptomatology. Clinical social workers elicit client feedback about their experience of the assessment process, reflect upon varied meanings of the assessment, and share these assessment outcomes with clients.

Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities
Clinical social workers select effective modalities for intervention based on the extant research as well as the client's cultural background. Clinical social work practitioners integrate their knowledge of various individual, family, and group psychotherapeutic modalities, as well as crisis intervention techniques and community-wide referrals, to intervene effectively; demonstrate flexibility by tailoring interventions to suit the needs of multiple client populations; and understand the effects of the social environment on client well-being. Clinical social workers therefore recognize the need to intervene on mezzo and macro levels. Practitioners in clinical social work critically select, apply, and evaluate best practices and evidence-informed interventions; they value collaboration with the client and other professionals to coordinate treatment plans. Clinical social workers maintain knowledge of the communities they serve in order to ensure that clients are connected with relevant services and resources in an effective manner, while eliciting client feedback about how the interventions are impacting the client.

<u>Assessment of Competencies/Program Level Learning Goals</u>: Because this course focuses on providing you with the knowledge, skills, and values for you to advance human rights and social, economic, and environmental Justice and engage in policy practice, it has been selected be to part of the School of Social Work overall assessment program of the social work competencies/program level learning goals. This means that four of the course assignments has been designed to assess your attainment of these competencies.

The CSWE Competencies are Assessed with these Assignments:

Competency	Assessment Assignment
Two: Engage Diversity and Difference in Practice The student recognizes the impact of clients' intersectional identities and issues and integrates anti-oppressive stances.	Group Paper (Section 2- especially points 1-3)
Six: Engage with Couples, Families and Groups The student identifies how engagement with groups differs from individual approaches and describes differential engagement skills.	Group Paper Section 2
Seven: Assess Couples, Families and Groups **7.1:** The student assesses his/her/their own family history and intergenerational patterns and creates a genogram to capture that information. **7.2:** The student assesses his/her/their own family history and intergenerational patterns and analyzes how their own cultural and family history may impact the assessment process.	Genogram Assignment 7.1- Physical Genogram 7.2- Parts 1 & especially 2 of paper
Eight: Intervene with Couples, Families and Groups The student demonstrates flexibility in tailoring interventions (including on-going modifications) to suit the needs of clients (couples, families and groups) drawing on knowledge of client circumstances and knowledge of varied couple, family and group psychotherapeutic intervention methods.	Group Paper Section 4

COURSE LEARNING GOALS
Course level learning goals primarily relate to the aforementioned competencies/program level learning goals as the course addresses policy analysis skills and competencies as well as addresses human rights and social, economic and environmental justice through the study of the evolution of the US welfare state and the emergence of the social work profession.

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

1- Differentially use one's professional self to intervene with couples, families and groups using an anti-oppressive stance while drawing on current supported theories of practice and research.

2- Develop a proposal for a group that allows the student to integrate engagement, assessment and intervention strategies tailored to specific groups.

3- Demonstrate awareness of how demographics, family of origin, and intersectional identities impact the self of the social work practitioner, as well as the clients with whom we work.

SCHOOL OF SOCIAL WORK MISSION STATEMENT AND SCHOOL WIDE LEARNING GOALS

The mission of the School of Social Work is to develop and disseminate knowledge through social work research, education, and training that promotes social and economic justice and strengths individual, family, and community well-being, in this diverse and increasingly global environment of New Jersey and beyond.

School Wide Learning Goals: Upon graduation all students will be able to:

1. Demonstrate Ethical and Professional Behavior;
2. Engage Diversity and Difference in Practice; and
3. Engage, Assess, and Intervene with Individuals, Families, Groups, Organizations, and Communities

REQUIRED TEXTS:

Gottman, J. and Silver, N. (2015). *The seven principles for making marriage work.* New York: Random House. ISBN 9780553447712

Nichols, M.P. (2009). *Inside family therapy: a case study in family healing* (2nd ed). Boston, MA: Allyn & Bacon. ISBN 978-0-205-61107-2

Yalom, I.D. & Leszcz, M. (2005). *The theory and practice of group psychotherapy* (5th edition). Boston, MA: Basic Books. ISBN-10: 0465092845 | ISBN-13: 978-0465092840

Other required readings can be accessed through the RU Libraries electronic reserve system at https://www.libraries.rutgers.edu/. In the QuickSearch box on the Libraries homepage, type the Course NAME or the Course Number (Social Welfare Policy and Service 1 19:910:504) and select Course Reserves in the autofill drop down).

RECOMMENDED TEXTS – readings will be available in docsharing and on the Library E-Reserves

Van Hook, M. P. (2014). *Social work practice with families: A resiliency –based approach* (2nd ed.). Chicago: Lyceum.

COURSE REQUIREMENTS

This course will use a combination of discussion, experiential exercises, and lecture (the least used modality at this level). At the option of individual section instructors, there may also be individual or group assignments and presentations in addition to the required genogram and peer supervision assignments; if these are used, they will be computed into the course grade.

Students are expected to:
1. **Read all required and specifically assigned readings**.
2. Additionally, read a large sampling of the supplementary readings.
3. Attend all classes, and participate in class discussions and exercises. **Students with more than two absences will drop a letter grade for each absence (3=B).**
4. Demonstrate, in class sessions and in the assignments, that they have read the readings, can relate readings and class material to their field experiences, and have sought out empirical evidence for the validity of various theories and the effectiveness of various intervention approaches.
5. Adhere to the University's Policy on Academic Integrity as well as the NASW Code of Ethics.

Assignment Integrity Statement
Plagiarism, cheating, lying, sabotage or any other violation of academic or professional standards for ethical behavior will not be tolerated, and will result in failure for the assignment and course. **Plagiarism includes lack or inaccuracy of citation. See Section 10 Academic Integrity.**

ALL assignments should include the following:
On my honor, I have neither received nor given any unauthorized assistance on this assignment. Signed by _____. (Inserted typed name is acceptable for electronic papers).

Grading

Grade		Definition	Equivalent
A	92-100	Outstanding	4.0
B+	87-91	Very Good	3.5
B	82-86	Good	3.0
C+	77-81	Average	2.5
C	70-76		2.0

F   69 and below   Failing   0.0
*Scores to be rounded up at .5

IX.   COURSE EVALUATION

Rutgers University issues a survey that evaluates both the course and the instructor. This survey is completed on line by students in the middle and toward the end of the semester, and all answers are confidential and anonymous. The instructor may also discuss the mid-term evaluations in class to revise the course if necessary.

X.   ASSIGNMENTS FOR CSW II

Course Assignments are valued in the following way:

A.	**Group Proposal Paper**	**30 points**
B.	**Genogram Assignment**	**30 points**
C.	**Family or Couple**	
	Role Play Assignment	**30 points**
D.	**Class Participation**	**10 points**
		100 points

A. CSW II Group Proposal Assignment: Due on

Important overall criteria:
The paper is approximately 10 pages +/-2.
- No abstract or running head is necessary.
- A title page including student name, class and section, professor, and title of assignment is required.
- Include the honor statement on the title page. *On my honor, I have neither received nor given any unauthorized assistance on this examination.*
- Do not use initials or real names to identify your clients. All names in the paper should be pseudonyms.
- APA 6 reference and citation style is required.
- The majority of in-text citation will come from the Yalom book. Be sure to include the page numbers when citing these books, e.g. (Yalom, 2005, pp. 32–33).
- Literature supporting your assertions/ planned interventions should be liberally sprinkled throughout the paper.
- You may use "I" and "we" and should use a direct and academically appropriate style of writing.
- Grammar and syntax matter and will constitute a portion of the grade.

Assignment Overview:
This assignment provides students the opportunity to prepare a proposal for a new clinical therapeutic group that you would like to conduct with a target population of interest to you. All groups are "clinical" in the sense that they provide direct interventions

with clients and aim to have therapeutic value. You should define your group as one of the following types: mutual support, psychoeducational or 'therapy.'

You will need to consider the target population and how its demographics impact the way you design your group. How would you recruit and engage the population of interest (how does this differ from other groups?)? How will you plan group sessions (use an appendix to include sample group agendas and the outline for the group. Will this be an open or closed group and will there be a fixed number of sessions or will it be on-going (and why)? How will you assess how the group is functioning over time? What intervention modalities will you draw upon and how will you expect to modify them over time? **Answers to these questions should be guided by course readings and other literature and must include 3-5 references, one of which is the Yalom & Leszcz text (with year and page numbers).**

All citation must be APA 6 consistent. If you use handouts from published resources or from a group with which you have been involved in your appendix, you must cite the resource appropriately.

<u>Paper Outline:</u>
Bolded sections are used for determining the CSWE competency accomplishment.

Section 1-Title and Purpose of the Group:
- Name of group and why that title is chosen
- Statement of purpose for group (Goals).
- Identify whether the group is open or closed in terms of population and whether it is a fixed number of sessions or on-going (and why). Discuss the pros & cons of your chosen format.
- Describe your role as a leader or co-leader, and what you will do in that role (active, reflective, educative etc.).

Section 2-Recruitment, Engagement:
- Who is the population you are trying to recruit and what demographic or personal history qualities affect the likelihood that they will connect to the group?
- What intersectional identities are in play and how will the blend of potential participants be influenced by demographic and cultural characteristics?
- **How will you modify recruitment and engagement strategies to take issues of race, gender, economic status, age, education levels or other personal characteristics of group members into account, particularly in conjunction with your own intersectional position and privilege?**
- What challenges do you anticipate in engaging the group members?
- What screening procedures will you use for inclusion/ exclusion?

- How will you orient and engage the group at the first meeting? How will this be informed by their individual demographic and personal histories? How will you manage issues of power and privilege?
- What problems do you anticipate with recruitment, permissions or screening?

Section 3- Group Conditions and Assessment:
- What is the plan for the number, frequency, length, and time of meetings and what is the rationale for those decisions?
- Include an appendix with a sample outline for each session and the major topics to be covered (if defined topics are part of your group).
- What physical space, financial, child-care, transportation, food or other arrangements will need to be considered?
- How will you assess the stage of group cohesion over time?

Section 4- Group Cohesion and Intervention:
- How will you promote group cohesion?
- What intervention modalities do you expect to use most often? Remember that if this is a mutual support group, your facilitation skills are more likely to be a customary intervention while if it is a psychotherapeutic group, reflection will be a regularly used intervention. Be detailed about your interventions.
- Name two potential scenarios that may arise and describe how you would intervene to manage them.
- Include references from the literature to support the use of this type of treatment for your population. If there is no evidence base for your population, cite evidence from the closest population and note the lack of research relating to your target population.

Section 5- Evaluation:
- How will you evaluate whether the group's purpose/ goals have been achieved?
- How will you evaluate your role as the facilitator in engaging, assessing and intervening with this group?
- Summary of why this proposed group should take place.

Grading Rubric for Group Paper (30 points)
- **5 points**—Writing and References: (appropriate grammar and syntax (2); APA references (1)
- **5 points**—Purpose (1 for including each bullet point; additional 1 for sophisticated and well-referenced answers)
- **5 points** —Recruitment and Engagement-(1 for including each bullet point; additional 2 for sophisticated and well-referenced answers)

- **5 points**—Group Conditions-(2 for including each bullet point; additional 1-2 for sophisticated and well-referenced answers)
- **5 points**—Group Cohesion-(2 for including each bullet point; additional 1-2 for sophisticated and well-referenced answers)
- **5 points**—Evaluation-(2 for including each bullet point; additional 1-2 for sophisticated and well-referenced answers)

B.   Four Generation Genogram with Written Analysis of Family Trends
Due on:

Part of doing a full assessment with a family is identifying the dynamics that run like currents throughout the family's history. The genogram allows us to understand this. Another critical feature of doing good social work is to understand the way our own family history has impacted us. This assignment is designed to help explore and understand one's own family influences, while also developing skills for creating and assessing genograms. This is a multi-step process:

Step 1- Throughout the early part of the semester, gather information from your family members about at least 4 generations of your family (All parents and parents' parents; their siblings and their families, etc.). Be sure to have information about the people, their relationships, any substance use/ divorces/hobbies/ relationship styles/ parent –child interactional styles, etc. Ethnicity and educational information is important to include as well. If some family members are immigrants, indicate from what country and the year of immigration. Strengths as well as challenges should be included.

If one has been adopted or in foster care, use the family you identify with most clearly as your family of origin (where you know more of the people and their stories). You will indicate existence of other families as 'bubbles' next to the symbol for you. Although family traumas clearly influence your own interactions with others who have experienced trauma, use your judgment about the level of information you elect to share, recognizing that the instructor and class mates are bound by confidentiality.
(If you have multiple foster families or other circumstances, feel free to talk with your instructor about how to focus your genogram.)

(Genopro software is NOT to be used; clear structure lines are necessary and a creative key is required)

Step 2- Prior to class on 3/22, be sure you have completed the readings for that date and use a large piece of paper/ posterboard to create a working genogram of your family with at least 4 generations (People often find butcher block paper or the back of wrapping paper to be useful). Start with the dark structure lines (family structure- children from unions) and then add relationship lines (enmeshed, distant etc.) in colors. Be sure to include appropriate information about each person, as well as relationship lines as described in the readings. Use of color (circling those with alcohol use with purple for example), stickers (flags for military service) or other creative ways of indicating patterns

in the family is encouraged and a key explaining the symbols and/or color use should be included. **Bring this to class on 3/22**. All of the structure lines and many relationship lines should be included on the genogram brought to class (at minimum).

Step 3- During class, we will work in dyads to help each other recognize themes/trends/dynamics in one another's genograms, while also interviewing one another to try to incorporate other information into the genogram. Your sensitive use of questions and help with guiding analysis of your partner's genogram is expected and confidentiality must be strictly observed. You will only share your information with the partner in class, NOT the whole class.

Step 4- <u>**The final "project" is due on:**</u> It consists of the fully delineated genogram (it should be rich with information) as well as a 6-9 page paper identifying the trends and patterns you have been able to identify in your genogram. If you bring your genogram to class rolled up, put your first name on the outside of the tube. The genogram will be returned to you after grading. An outline of the paper is provided below:

Outline:
1. **Family Trends:**
   Describe the trends in the family genogram, including education, marriage, parent-child relationships, gender issues, ethnicity, abuse of any sort (e.g. substance or family violence), mental health issues, and any other patterns that emerge. How do you assess issues related to culture (race, religion, ethnicity, education) have impacted your family over time? Identification of psychosocial patterns is the main focus of this section. What are the strongest or most prevalent patterns you see?

2. **Analysis:**
   Describe how the family's way of relating, **vulnerabilities**, and **strengths** are transmitted intergenerationally. Analyze how these patterns are likely to affect the current generation and following ones into the future. How might they be perpetuated? How might they be broken? Use of a family therapy theory can be helpful to explain the family dynamics.

3. **Work with Partner**
   Describe the process of working with your partner/s in identifying trends. Describe your experience, key insights, and your own level of comfort in each role (interviewer/interviewee).

4. **Use of Genograms**
   Consider how this may be of use as a tool in your practice (or not). How does it fit with the population with whom you hope to work?

Genogram Assignment Grading Rubric (30 points):
   5 points   **Genogram Construction:**

Structure lines, relationship lines, clarity, level of relevant detail, creativity with the key

5 points **Identification of Family Trends:**
Ability to identify and depict patterns in the diagram

10 points **Written Analysis of Family Trends/Generational Patterns:**
Written analysis of generational patterns, discussion of varied patterns' impact on the family and how they may influence future generations (and self); (Sections 1-2)

5 points **Written Analysis of Experience:**
Written analysis of your experience of being interviewed vs. interviewing for the genogram in class; Discussion of use in one's practice. (Sections 3-4)

5 points **Syntax:**
Clarity of writing, grammar and following the outline for critical analysis.

C. Family or Couple Role Play Assignment

You will be part of a small groups (4-6 in a group) that will develop and present a role play for the class. Your task is to develop a couple or family scenario and to develop a role play to show how to use Engagement, Assessment, and/ or Intervention techniques from a specified Family or Couple modality. You will get some class time to work on the role play but plan to connect outside of class to develop the project as well. For the role play, you can use a real family as the source material but be sure to alter details of the family to make them unrecognizable to others (e.g. change names, genders, circumstances, ethnicity etc.). You may also create a fictional family to suit your needs or use a family from a film (see a list of film options in the "Family Case Studies" folder in the Resources folder on Sakai). Feel free to be creative in your approach. Engaging presentations are usually better learning opportunities for your audience.

The presentations should be no more than 30-40 minutes. The group should:
a) *Briefly (5-7 minutes) present material about the modality or type of couple or family therapy (e.g. Structural, Strategic, Bowenian, etc.),*
b) *Introduce the "couple" or "family" and why they are in treatment (2 minutes)*
c) *Illustrate a role play of Engagement, Assessment, and/ or Intervention techniques that are distinctive for that therapy modality.*
d) *As you develop the presentation, the group members should be willing to discuss how to maintain an equitable workload among the group members. Clarify each member's role within the group and how each member will be accountable to creating a quality presentation.*

Prepare a case summary document with the following information. Bring copies for everyone in the class (or submit to the instructor 48 hours before class):

1. *The name of your group and each group member's name.*

2. *A list of each family member, including their key information in a short paragraph or bulleted list.*
3. *A short description of the presenting problem. 2-3 sentences.*
4. *A description of each Engagement, Assessment, and/ or Intervention technique you plan to display in the role play and why it has been chosen for this family.*
5. *References used to prepare the role play.*

Family or Couple Role Play- Grading Rubric (30 points):

5 points   **Case Summary Handout**
                 Level of clarity. Appropriateness and depth of research.
5 points   **Engagement**
                 Theory consistent efforts to join with the family are demonstrated. Each member of the family is engaged.
5 points   **Assessment**
                 Theory consistent assessment of the problem & strengths is demonstrated.
5 points   **Intervention**
                 Skillful intervention is depicted based on theory and appropriateness to the family and problem.
5 points   **Knowledge of Theory**
                 Command of the theory is demonstrated.
5 points   **Overall Effectiveness as a Learning Opportunity**
                 Level of engagement, interest, and fun generated. Teamwork is evident.

D. Class Participation Grade

Participation points will be based on attendance and class participation. Participation in class discussions is expected and is seen as a way to further develop your professional voice. Involvement in other's peer supervision feedback is also expected.

Students are expected to:

- Regularly participate in class discussions and demonstrate integration of readings and case material. Examples of class participation include, but are not limited to, asking relevant questions/making relevant comments, active participation in small/large group exercises, presentation of case material, and bringing to class relevant articles/readings/current events information.
- Read all required readings and come to class prepared to discuss the topic.
- Attend all classes and arrive on time.
    - Lateness for any reason will impact your participation grade.
    - Absences may occur due to unforeseen circumstances, however, excessive absences (more than two absences) and/or consistent lateness (more than four) will result in the lowering of the final grade by at least one full grade point.
    - Partial attendance of a session is usually considered an absence.
    - The student must notify the instructor in advance or as soon as possible after the missed class. Missed classes will be excused by the instructor only for

compelling reasons (e.g. illness, emergency, and other--to be determined by the instructor); notification does not automatically indicate an excused absence.
- o Even in the event of illness/compelling reasons, 3 or more absences may result in course failure.
- o Students are responsible for obtaining class notes and handouts of the missed session from a fellow student.
- Electronic devices. Cell phones, laptops or other electronic devices are NOT to be used during class time. Using devices will result in the lowering of the class participation grade.
- For some, class participation comes easy, others will need to work at it. Make the effort to be part of the discussion. Repetition should increase your comfort level and prepare you for your social work career.

XI. WRITING ISSUES

All work submitted in a graduate course must be your own. Plagiarism is a separable offense. Cutting and pasting the work of others without providing credit is a violation and is unacceptable.

It is unethical and a violation of the University's Academic Integrity Policy to present the ideas or words of another without clearly and fully identifying the source. Inadequate citations will be constructed as an attempt to misrepresent the cited materials as your own. Use APA (6) citation. ***This requires a page number for every quote***. Titles of journal articles and book titles are not capitalized throughout, but journal titles are (and they are italicized). Format correctly.

Important Considerations
Excellent papers address relevant course concepts, are well-written and well-organized, use formal English, demonstrate a masterful ability to analyze the concepts and issues learned in this course, and show evidence of critical thinking. Excellent papers identify client's strengths as well as their challenges.

Critical analysis requires that you: state/identify concepts, reference and cite sources, provide examples and definitions, discuss/analyze how examples illustrate the concept (or differ from the norm), integrate across course and other academic material, and consider implications. It is wise to give a copy of your assignments (other than the genogram) to your field instructor to discuss.

Resources for Writing
Publication Manual of the American Psychological Association. Washington, DC. APA. (6th edition)

Szuchman, L.T. & Thomlinson, B. (2004). *Writing with style: APA style for social work*. Belmont, CA: Brooks/ Cole.

Writing Assistance

Success in graduate school and within the larger profession of social work depends on strong writing skills. Several resources are available to help students strengthen their professional and academic writing skills. Writing assistance is available to all MSW students as described below.

New Brunswick Campus

All MSW SSW students (NB, Camden, Newark, IW, online and blended) are eligible to access writing assistance at the New Brunswick Learning Center. Online tutoring may also be available. Contact: https://rlc.rutgers.edu/student-info/group-and-individual-academic-support/writing-coaching

Newark Campus

The Newark writing center is available for MSW students on the Newark campus by appointment. http://www.ncas.rutgers.edu/writingcenter

Camden Campus

The Camden learning center provides writing assistance for MSW students on the Camden campus. http://learn.camden.rutgers.edu/writing-assistance

Additional Online Resources

APA Style
- o Purdue OWL https://owl.english.purdue.edu/owl/resource/560/01/
- o APA Style Guide http://www.apastyle.org/learn/faqs/index.aspx
- o Purdue OWL Mechanics, grammar, organization https://owl.english.purdue.edu/owl/section/1/

Library Research Assistance

Dr. Karen Hartmann is the social work the social work librarian on the New Brunswick Campus karen.hartman@rutgers.edu p. 848-932-6104 ; **Natalie Borisovets** is at Newark, Dana Library natalieb@rutgers.edu973-353-5909; **Katie Anderson** is at Camden, Robeson Library: Katie.anderson@rutgers.edu 856-225-2830. They are all available to meet with students.

XII.   COURSE OUTLINE

UNIT 1: GROUPS and Termination

Class 1	Overview of Course & Assignments, LSW Exam Preparation

Kurland, R., & Salmon, R. (2006). Group work vs. casework in a group: Principles and implications for teaching and practice. *Social Work with Groups,* 28(3-4), 121-132.

Class 2	Clinical Group Practice

Yalom, I.D. (2005). *The theory and practice of group psychotherapy, 5th ed.*
> Chapter 1 – Therapeutic factors (p. 1)
> Chapter 2 – Interpersonal learning (p. 19)
> Chapter 3 – Group cohesiveness (p. 53)

Drumm, K. (2006) The Essential Power of Group Work, *Social Work with Groups*, 29:2-3, 17-31, DOI: 10.1300/J009v29n02_02

Turner, H. (2011). Concepts for effective facilitation of open groups. *Social Work with Groups,* 34(3-4), 246-256.

Class 3	Clinical Group Practice

Yalom, I.D. (2005). *The theory and practice of group psychotherapy, 5th ed.*
> Chapter 5- The Basic Tasks
> Chapter 6- Working in the Here and Now

Rose, S. D., & Chang, H. S. (2010). Motivating clients in treatment groups. ***Social Work with Groups***, 33(2-3), 260-277.

Singh, A.A., Merchant, N., Skudrzyk, B., Ingene, D. (2012). Association for specialists in group work: Multicultural and social justice competence principles for group workers. *The Journal for Specialists in Group Work, 37*(4), 312-325.

Recommended:
Chen, E.C., Kakkad, D., & Balzano, J. (2008). Multicultural competence and evidence-based practice in group therapy. *Journal of Clinical Psychology: In Session, 64* (11), 1261-1278.

Guth, L.J. & Asner-Self, K.K. (2017). International group work research: Guidelines in cultural contexts. *The Journal for Specialists in Group Work, 42*(1), 33-53.

Class 4	Clinical Group Practice

Yalom, I.D. (2005). *The theory and practice of group psychotherapy, 5th ed.*
> Chapter 10 – Creation of the group: Place, time, size, preparation

Leszcz, M. & Kobos, J.C. (2008). Evidence-based group psychotherapy: Using AGPA's practice guidelines to enhance clinical effectiveness. *Journal of Clinical Psychology: In Session*, 64(11), 1238-1260.

Recommended:

Birnbaum, M., & Cicchetti, A. (2001). The power of purposeful sessional endings in each group encounter. *Social Work with Groups,* 23(3), 37-52.

Cohen, M. B., & Graybeal, C. T. (2007). Using solution-oriented techniques in mutual aid groups. *Social work with groups*, 30(4), 41-58.

Kurland, R. (2006). Planning: The neglected component of group development. *Social Work with Groups*, 28(3-4), 9-16.

Lietz, C. A. (2007). Strengths-based group practice: Three case studies. *Social Work with Groups*, 30(2), 73-87.

Waldron, H. B., & Turner, C. W. (2008). Evidence-based psychosocial treatments for adolescent substance abuse. *Journal of Clinical Child & Adolescent Psychology*, 37(1), 238-261.

Wayne, J., & Gitterman, A. (2004). Offensive behavior in groups: Challenges and opportunities. *Social Work with Groups*, 26(2), 23-34.

Class 5	Clinical Group Practice

Group Proposal Assignment is Due

Yalom, I.D. (2005). *The theory and practice of group psychotherapy, 5th ed*
Chapter 11 - In the beginning
Chapter 13- Problem Group Members

Atieno Okech, J.E., Pimpleton-Gray, A.M., Vannatta, R., & Champe, J. (2016). Intercultural conflict in groups. *The Journal for Specialists in Group Work, 41*(4), 350-369.

UNIT 2: FAMILY AND COUPLES THERAPY (Presentations begin)

Class 6	Termination

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

Maples, J.L. & Walker, R.L. (2014). Consolidation rather than termination: Rethinking how psychologists label and conceptualize the final phase of psychological treatment. *Professional Psychology: Research and Practice*, 45 (2), 104-110.

Recommended:
Rosenthal Gelman, C., Fernandez, P., Hausman, N., Miller, S., & Weiner, M. (2007). Challenging endings: First year interns' experiences with premature termination and discussion points for supervisory guidance. *Clinical Social Work Journal, 35*(2), 79-90.

Class 7   Common Elements in Family Therapy: Theory & Strategies

Nichols, M.P. (2009). *Inside family therapy: a case study in family healing* (2nd ed). Boston, MA: Allyn & Bacon. ISBN 978-0-205-61107-2
Chapters 1, 3, 4

Sprenkle, D. H., & Blow, A. J. (2004). Common factors and our sacred models. Journal of marital and family therapy, 30(2), 113-129.

Van Hook, M. P. (2014). *Social work practice with families: A resiliency –based approach* (2nd ed.). Chicago: Lyceum.

Pages 153-164- Summary of family therapy types

Class 8   Family Interventions

Nichols, M.P. (2009). *Inside family therapy: a case study in family healing* (2nd ed). Boston, MA: Allyn & Bacon. ISBN 978-0-205-61107-2
Chapters 5-9

D'Aniello, C., Nguyen, H.N., & Piercy, F.P. (2016). Cultural sensitivity as an MFT common factor. *The American Journal of Family Therapy, 44*(5), 234-244.

Watts-Jones, T. D. (2010). Location of self: Opening the door to dialogue on intersectionality in the therapy process. Family Process, 49(3), 405-420.

Class 9   Genograms & Triangles
Genogram with Partner Assignment Due– In-Class

Carter, B. & McGoldrick, M. (eds.).(1989). *The changing family life cycle*. Boston: Allyn and Bacon. Chapter 8- Genograms and the Family Life Cycle (Pgs 164-187)

McGoldrick, M., Gerson, R., Shellenberger, S. (1999). *Genograms*. NY: WW Norton.
Chapter 2 – Developing a genogram to track family patterns (pp. 13-52)

Recommended:
Shellenberger, S., Dent, M. M., Davis-Smith, M., Seale, J. P., Weintraut, R., & Wright, T. (2007). Cultural genogram: A tool for teaching and practice. Families, Systems, & Health, 25(4), 367.

Class 10	Bowen Theory

Hill, W. E., Hasty, C. & Moore, C. J. (2011). Differentiation of self and the process of forgiveness: A clinical perspective for couple and family therapy. *The Australian and New Zealand Journal of Family Therapy, 32*(1), 43-57.

LaSala, M. C. (2007). Old maps, new territory. *Journal of GLBT Family Studies, 3*, 1-14.

Van Hook, M. P. (2014). *Social work practice with families: A resiliency –based approach* (2nd ed.). Chicago: Lyceum.
Chapter 11 Bowen Family Systems Pgs 295-304

Class 11	Structural Family Therapy
	==*Genogram & Genogram Paper Due*==

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/ Cole/ Cengage.

Chapter 10 Structural Family Therapy   (Pgs 233- 256)

Nichols, M.P. (2009). *Inside family therapy: a case study in family healing* (2nd ed). Boston, MA: Allyn & Bacon. ISBN 978-0-205-61107-2
Chapters 10-13

Class 12	Integrative & Strategic Family Therapy

Bitter, J. R. (2014). *Theory and practice of family therapy and counseling* (2nd ed.). Belmont, CA: Brooks/ Cole/ Cengage.

Chapter 11 Strategic Family Therapy   (Pgs 257-284)

Hudak, J., & Giammattei, S. V. (2014). Doing family: Decentering heteronormativity in "marriage" and "family" therapy. In Critical topics in family therapy (pp. 105-115). Springer, Cham

Van Hook, M. P. (2014). *Social work practice with families: A resiliency –based approach* (2nd ed.). Chicago: Lyceum.

Chapter 10 Multisystems Family Therapy Pgs 266-294

Class 13　　　Couples Therapy

Gottman, J. and Silver, N. (2015). *The seven principles for making marriage work.* New York: Random House.
Chapters 1-3; Ch 8

Guerin, P. J., Fay, L. F., Fogarty, T. F., & Kautto, J. G. (1999). Brief marital therapy: The story of triangles. In J. M. Donovan (Ed.), Short-term couple therapy (pp. 103–123). New York: Guilford Press. [Ch. 5]

Class 14　　　Couples Therapy

Belous, C.K. (2015). Couple therapy with lesbian partners using an affirmative-contextual approach. *The American Journal of Family Therapy, 43*(3), 269-281.

Butler, M. H., Harper, J. M., & Mitchell, C. B. (2011). A comparison of attachment outcomes in Enactment- based versus Therapist –centered therapy process modalities in couple therapy. *Family Process, 50*(2), 203-220.

Fishbane, M. D. (2011). Facilitating relational empowerment in couple therapy. *Family Process, 50*(3), 337-352.

Gottman, J.M., Levenson, R.W., Swanson, C., Swanson, K., Tyson, R., and Yoshimoto, D., (2003). Observing gay, lesbian and heterosexual couples' relationships – Mathematical modeling of conflict interactions. *Journal of Homosexuality, 45*(1), 65-91.

Class 15　　　Professional Issues, Self-Care, Course Wrap-up

Jackson, K. (2014). Social worker self-care — The overlooked core competency Retrieve at http://www.socialworktoday.com/archive/051214p14.shtml .

Newell, J. M., & MacNeil, G. A. (2010). Professional burnout, vicarious trauma, secondary traumatic stress, and compassion fatigue. *Best Practices in Mental Health*, *6*(2), 57-68.

Schwartz, R. H., Tiamiyu, M. F., Dwyer, D. J. (2007). Social worker hope and perceived burnout. *Administration in Social Work*, *31*(4), 103-120.

XIII. ACADEMIC INTEGRITY

All work submitted in a graduate course must be your own.

It is unethical and a violation of the University's Academic Integrity Policy to present the ideas or words of another without clearly and fully identifying the source. Inadequate citations will be construed as an attempt to misrepresent the cited material as your own. Use the APA citation style which is described in the Publication manual of the American Psychological Association, 6th edition.

Plagiarism is the representation of the words or ideas of another as one's own in any academic exercise. To avoid plagiarism, every direct quotation must be identified by quotation marks or by appropriate indentation and must be properly cited in the text or footnote. Acknowledgement is required when material from another source is stored in print, electronic, or other medium and is paraphrased or summarized in whole or in part in one's own words. To acknowledge a paraphrase properly, one might state: "to paraphrase Plato's comment…" and conclude with a footnote identifying the exact reference. A footnote acknowledging only a directly quoted statement does not suffice to notify the reader of any preceding or succeeding paraphrased material. Information which is common knowledge, such as names of leaders of prominent nations, basic scientific laws, etc., need not be footnoted; however, all facts or information obtained in reading or research that are not common knowledge among students in the course must be acknowledged. In addition to materials specifically cited in the text, only materials that contribute to one's general understanding of the subject may be acknowledged in the bibliography. Plagiarism can, in some cases, be a subtle issue. Any question about what constitutes plagiarism should be discussed with the faculty member.

Plagiarism as described in the University's Academic Integrity Policy is as follows: "Plagiarism: Plagiarism is the use of another person's words, ideas, or results without giving that person appropriate credit. To avoid plagiarism, every direct quotation must be identified by quotation marks or appropriate indentation and both direct quotation and paraphrasing must be cited properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are:

> -Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution.
> -Paraphrasing without proper attribution, i.e., presenting in one's own words another person's written words or ideas as if they were one's own.
> -Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement.
> -Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other nontextual material from other sources without proper attribution".

Plagiarism along with any and all other violations of academic integrity by graduate and professional students will normally be penalized more severely than violations by undergraduate students. Since all violations of academic integrity by a graduate or professional student are potentially separable under the Academic Integrity Policy, faculty members should not adjudicate alleged academic integrity violations by graduate and professional students, but should refer such allegations to the appropriate Academic Integrity Facilitator (AIF) or to the Office of Student Conduct. The AIF that you should contact is Laura Curran, at lacurran@ssw.rutgers.edu. The student shall be notified in writing, by email or hand delivery, of the alleged violation and of the fact that the matter has been referred to the AIF for adjudication. This notification shall be done within 10 days of identifying the alleged violation. Once the student has been notified of the allegation, the student may not drop the course or withdraw from the school until the adjudication process is complete.   A TZ or incomplete grade shall be assigned until the case is resolved. For more information regarding the Rutgers Academic Integrity Policies and Procedures, see: http://academicintegrity.rutgers.edu/academic-integrity-at-rutgers.

The instructor requests that you include the following statement on all assignments, signed.

On my honor, I have neither received nor given any unauthorized assistance on this assignment. With signature (typed name is acceptable when submitted digitally)

XIV.   DISABILITY ACCOMMODATION
Rutgers University welcomes students with disabilities into all of the University's educational programs. In order to receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and provide documentation: https://ods.rutgers.edu/students/documentation-guidelines. If the documentation supports your request for reasonable accommodations, your campus's disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the Registration form on the ODS web site at: https://ods.rutgers.edu/students/registration-form.

XV.   ACTIVE SHOOTER RESOURCES
Over the years, there has been an increase in the number of active shootings on campus. It is important that you know what to do in cases there is an active shooter on campus. Please go to this site to retrieve information that will reduce your personal risk in case of an active shooting on campus: http://rupd.rutgers.edu/shooter.php .

XVI.   OFFICE ON VIOLENCE PREVENTION AND VICTIM ASSISTANCE
Our school is committed to fostering a safe, productive learning environment. Title IX and our school policy prohibit discrimination on the basis of sex, which regards sexual misconduct — including harassment, domestic and dating violence, sexual assault, and stalking. We understand that sexual violence can undermine students' academic success

and we encourage students who have experienced some form of sexual misconduct to talk to someone about their experience, so they can get the support they need.

Confidential support and academic advocacy are available through the Rutgers Office on Violence Prevention and Victim Assistance, 732.932.1181, http://vpva.rutgers.edu. Services are free and confidential and available 24 hrs/day, 7 days a week.