RUTGERS
School of Social Work

COURSE SYLLABUS
CLINICAL SOCIAL WORK II **19:910:512** **SPRING 2022** **INSERT LOCATION** **INSERT DAY & HOURS OF THE COURSE**

*Instructors: Changes for 2022 are noted in red throughout. Change to black in the version you create for your students/section. Insert your section's due dates in the yellow highlighted areas. Delete this message.

Instructor:
Phone:
E-Mail:

I. 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.

II. 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.

III. 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.

IV. SCHOOL OF SOCIAL WORK MISSION STATEMENT & SCHOOL-WIDE LEARNING GOALS

School's Mission Statement
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.

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

I.   *Demonstrate Ethical and Professional Behavior;*

II.   *Engage Diversity and Difference in Practice; and*

III.   *Engage, Assess, and Intervene With Individuals, Families. Groups, Organizations, and Communities*

By completing this course, you will satisfy the requirements for school-wide learning goals #1-3.

V.   **PROGRAM LEVEL LEARNING GOALS & 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

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.

Practitioners in clinical social work:
- Demonstrate awareness of one's intersectionality and cultural background and how these factors may impact one's practice.
- Use clinical supervision to address personal and cultural biases and increase self-awareness.
- Apply the various models of clinical practice in ways that are culturally relevant to diverse and oppressed groups.
- Acknowledge the impact of client's intersectional issues—race/ethnicity, class, gender, sexual orientation, gender identity, ability status, immigration status, religion, and age—on clients' emotional and physical well-being.

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.

Practitioners in clinical social work:
- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems (poverty, crime, social injustice, racism, classism, sexism, homophobia, and transphobia) and incorporate this understanding into client engagement. Reflect upon the ways these aspects shape the manner in which one engages and works with the client.
- Understand how members of oppressed groups—people of color, people with varying sexual orientation and gender identities, people with different abilities, people with severe and persistent mental illness—may require different methods of engagement.

- Identify ways to enhance collaboration with clients and promote their empowerment, including seeking their input and feedback regarding the treatment process and fostering their capacity to provide feedback to other members of the treatment team.

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.

Practitioners in clinical social work:
- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems—poverty, crime, social injustice, institutional racism, sexism, religious and/or ideological bias, homophobia, and transphobia—and incorporate this understanding into their assessments.
- Select, modify and adapt, and evaluate clinical assessment tools and approaches depending on the needs and social characteristics of clients and current empirical evidence.
- Assess how issues of privilege, social injustice, and inequities in access to resources play a role in client difficulties and how they affect the assessment process, including assisting the client in voicing concerns to the entire treatment team.
- Reflect on their own issues of power and privilege and how they impact the therapeutic relationship.

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.

Practitioners in clinical social work:
- Select psychotherapeutic interventions based on a critical knowledge of theory, research, and practice experience.
- Exhibit flexibility by shifting perspectives and interventions to suit the needs of clients, while recognizing that the multi-faceted assessment drives the selection of appropriate interventions.
- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems—poverty, crime, social inequality, institutional racism, sexism, religious and/or ideological bias, homophobia, and transphobia—and incorporate this understanding into their interventions.
- Intervene effectively with individuals, families and groups, while eliciting client feedback and knowing when to modify approaches.

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

VI.   COURSE LEARNING GOALS:

This course, in alignment with the aforementioned competencies/program level learning goals, addresses engagement, assessment, and intervention skills with couples, families and groups while incorporating knowledge and awareness of diversity and difference, the social workers own intersectionality and biases, and how dimensions of diversity and oppression impact clinical practice.

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

1- To develop the ability to 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- To 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.

4- Demonstrate awareness of the need to practice in a technology rich environment while navigating the ethical complexities of such practice.

VII.   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. (2020). *The theory and practice of group psychotherapy* (6th edition). Basic Books.   ISBN-13: 9781541617575

The required texts can be purchased at the Rutgers University Bookstore, at https://www.barnesandnoble.com , or at https://amazon.com They are also on reserve at Alexander Library, Graduate Reserve.

RECOMMENDED TEXT – readings will be available in Canvas

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

VIII.   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.

Late Assignments

Written assignments are due at the beginning of class (before the instructor begins the session). Late papers/assignments/ will be accepted only in very unusual and compelling circumstances and only if cleared with the instructor in advance. Late papers/assignments not arranged in advance will receive a grade of zero. The instructor has the discretion to reduce the final grade of any late paper even if the lateness is approved in advance.

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 XIII. 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 online 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**	**(Due week 6)**
B.	**Genogram Assignment**	**35 points**	**(Due weeks 10 & 12)**
C.	**Family or Couple Role Play Assignment**	**25 points**	**(Varied due dates)**
D.	**Class Participation**	**10 points**	
		100 points	

A. CSW II Group Proposal Assignment: Due on (week 6, after group modules end)

Assignment Overview:
Successful groups are well designed from the outset. They have a clear purpose and are delivered with a plan. This assignment provides students the opportunity to prepare a proposal for a new group that you would like to conduct with a target population of interest to you. Your task it to describe the planning and delivery of a well thought-out group, describing the key factors required from conception through final evaluation.

Format:
- The paper should be **10 pages +/-2.**
- A title page including student name, class and section, professor, and title of assignment is required.
- Use the section headings below to structure your paper.
- Include the honor statement on the title page. *On my honor, I have neither received nor given any unauthorized assistance on this paper.*
- No abstract or running head is necessary.
- Do not use initials or real names to identify your clients. All names in the paper should be pseudonyms.
- 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. Write in a clear and engaging manner.
- Include your last name in the title of digital files.

References
- The paper should be guided by course readings and other relevant literature and must include **3-5 references at minimum (within the last 10 years),** one of which is the Yalom & Leszcz text (with year and page numbers). Use references that support your work and plan.
- APA 7 reference and citation style is required.
- Literature supporting your choices of format, approach, and interventions should be liberally sprinkled throughout the paper.
- In your appendix, if you use handouts from published resources or materials from a group with which you have been involved, you must cite the resources appropriately.
- For in-text citation (e.g. the Yalom book), be sure to include the page numbers when citing books, e.g. (Yalom, 2005, pp. 32–33).

Paper Outline:

Section 1-Title, Purpose, Format of the Group:
- Name of group and why that title was chosen.
- Define your group as one of the following types: mutual support, psychoeducational, or therapy.
- Explain why this group is needed and the goals of the group.
- Cite literature supporting use of the model and/or type of group you are using and why it is well matched to the target population. Citations should be within the last 10 years unless you are citing a seminal work,
- What is the plan for the number, frequency, length, and time of meetings and what is the rationale for those decisions?

- 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- Group Conditions:
- Describe the physical space you will need for the group. Discuss any arrangements necessary for your specific group to run successfully (e.g. financial support, child-care, transportation, food, supplies).
- If necessary, how will you advocate for what you need to run the group?
- Include an appendix with a sample outline for at least three group sessions and the major topics to be covered (if defined topics are part of your group).

Section 3-Recruitment, Engagement:
Recruitment
- Who is the population you are trying to recruit and how you will recruit them.
- Describe your inclusion and exclusion criteria.
- What problems do you anticipate with recruitment, permissions, or screening?

Engagement
- How will you orient and engage the group at the first meeting?
- How will you establish yourself as the leader or facilitator?
- What challenges do you anticipate in engaging the group members?
- How will you manage issues of power and privilege, including your own?
- How will you work with differences of race, gender, economic status, age, education levels or other personal characteristics of group members, particularly in conjunction with your own intersectional position and privilege?

Section 4- Group Interventions and Cohesion:
- What *group* intervention modalities do you expect to use most often? Be sure the interventions are appropriate for group work and the type of group you are running. For example, if this is a mutual support group, specific facilitation skills are more likely to be a customary intervention, mini-lectures may be part of a psychoeducation group, while in a psychotherapeutic group, reflection might be a regularly used intervention. Be detailed about your interventions.
- 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.

- How will you promote group cohesion?
- Name two potential challenging scenarios that may arise and describe how you would intervene to manage them.

Section 5- Termination and Evaluation:
- How will you end the group (if it is not an ongoing group)?
- How will you manage group members leaving?
- How will you assess the effectiveness of the group and how effective you are as a leader:
  - Over the course of the group
  - At termination
- Summarize why this proposed group should take place.

Grading Rubric for Group Paper (30 points)
- **5 points**   Writing and References: (grammar and syntax; APA references)
- **5 points**   Purpose and Format
- **5 points**   Group Conditions
- **5 points**   Recruitment and Engagement
- **5 points**   Group Interventions and Cohesion
- **5 points**   Evaluation

B.   Four Generation Genogram with Written Analysis of Family Trends
In-class draft genogram assignment due: (week 10)
Genogram & paper due: (week 12)

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 by creating a visual representation of the family's structure, dynamics, and issues.

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 you explore your 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 four generations of your family (parents, grandparents, great grandparents; their siblings and their families, etc.). It is understandable that there may be less information about older generations but do your best to get what information you can. More information will help you to see intergenerational patterns.

You will need to gather basic information on the **family members**, such as names, ages, year of death if deceased, education, occupation, notable characteristics, addictions, etc.

You should also collect information about **relationship dynamics** (e.g. divorces, relationship styles/ parent –child interactional styles), family stressors, as well as family accomplishments and strengths.

Ethnicity and cultural 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. (If you have multiple foster families or other circumstances, feel free to talk with your instructor about how to focus your genogram.)

Clear structure lines are necessary and a creative key is required. Genopro software is NOT to be used.

Step 2- **Genogram draft and peer consultation**; Prior to class on ___ (week 10), be sure you have completed the readings for that date and use a large piece of paper/ poster board to create a working genogram of your family with at least four 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**. 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 interviewing one another, try to incorporate new information into the genogram that arises from your discussion. 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- **The final "project" is due on ___ (week 12):** It consists of the fully delineated genogram (it should be rich with information) as well as a 7-10 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, Issues and Traits:**
   Identification of psychosocial traits and patterns is the main focus of this section. What are the strongest or most prevalent traits and patterns you see? **DESCRIBE** the specific trends and issues depicted in the genogram, such as education attainment, marriage patterns, parent-child relationships, gender issues, ethnicity, religion, traumas, 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) that have impacted your family over time?

2. **Theoretical Analysis:**
   Utilize **concepts from the course** and/or other family therapy theories to **EXPLAIN** the family's way of relating, including relationship patterns and intensities (e.g., boundaries, triangles, enmeshment, hierarchy, differentiation and many more). Use theory to explain the trends identified in the prior section. You can also include the impact of oppression and discrimination on the family over time. **Cite 2- 3 references (within the last 10 years) that support your analysis.**

   Note how **strengths**, **vulnerabilities, and traumas** have been 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 in identifying trends. Describe your experience, key insights, and your own level of comfort in each role

(interviewer/interviewee). Comment on the experience of feeling vulnerable and how it might be helpful in your work as a social worker.

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 (35 points):

5 points   **Genogram Construction:**
            Structure lines, relationship lines, clarity, level of relevant detail, creativity with the key

10 points **Identification of Family Patterns:**
            Ability to identify and depict patterns in the diagram

10 points **Written Analysis of Family Trends/Generational Patterns:**
            Written theoretical 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 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 Canvas). Feel free to be creative in your approach. Engaging presentations are usually better learning opportunities for your audience.

As you plan and develop your 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 your group for creating a quality presentation.

Presentation
The presentations should be no more than 30-40 minutes. Approximate timeframes for the elements are listed below. Your group should:

a) Briefly (5-7 minutes) present a concise overview of the type of couple or family therapy being depicted in the role play (e.g. Structural, Strategic, Bowenian, etc.). Do not get bogged down in a long presentation on the theory. Just provide a brief overview to prepare the class for the role play. Describe the key points you plan to cover.
b) Introduce the "couple" or "family" and why they are in treatment (2 minutes)
c) Conduct a role play that highlights elements of the theory in the following areas:
    a. Engagement (5 minutes)
    b. Assessment (8 minutes)
    c. Intervention (10 minutes)
d) Take questions from the class about your role play.

Case Overview
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 itemized list.
3. A short description of the presenting problem. 2-3 sentences.
4. A description of each Engagement, Assessment, and Intervention element 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 (25 points):

5 points   **Case Overview Handout**
       Level of clarity. Appropriateness and depth of research. Understanding of the theory is demonstrated.

5 points   **Engagement**
       Efforts to join with the family consistent with the theory 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   **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.
  - Even in the event of illness/compelling reasons, 3 or more absences may result in course failure.
  - 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

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.

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-services/writing-tutoring

Newark Campus

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

Additional Online Resources

APA Style

All students are expected to adhere to the citation style of the *Publication Manual of the American Psychological Association,* 7th edition (2020). It can be purchased at APA Manual 9th Edition.

- o The Purdue OWL website also provide assistance with APA style https://owl.english.purdue.edu/owl/resource/560/01/
- o APA Style Guide https://apastyle.apa.org/learn/faqs/index
- o Purdue OWL Mechanics, grammar, organization https://owl.english.purdue.edu/owl/section/1/

Library Research Assistance

Meredith Parker is the social work the social work librarian on the New Brunswick Campus meredith.parker@rutgers.edu ; **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. (2020). *The theory and practice of group psychotherapy, 6th ed.*
    Chapter 1 – Therapeutic factors
    Chapter 2 – Interpersonal learning
    Chapter 3 – Group cohesiveness

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

Recommended:
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. (2020). *The theory and practice of group psychotherapy, 6th ed.*
    Chapter 5- The Basic Tasks
    Chapter 6- Working in the Here and Now

Burnes, T. R., & Ross, K. L. (2010). Applying social justice to oppression and marginalization in group process: Interventions and strategies for group counselors. *The Journal for Specialists in Group Work*, 35(2), 169-176.

Smith, L. C., & Shin, R. Q. (2008). Social privilege, social justice, and group counseling: An inquiry. *The Journal for Specialists in Group Work*, 33(4), 351-366.

Recommended:
Gitterman, P. (2019). Social identities, power, and privilege: The importance of difference in establishing early group cohesion. *International Journal of Group Psychotherapy*, 69(1), 99-125.

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.

Class 4   Clinical Group Practice

Yalom, I.D. (2020). *The theory and practice of group psychotherapy, 6th ed.*
    Chapter 9 – Creating the Group

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.

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

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

Yalom, I.D. (2005). *The theory and practice of group psychotherapy, 5th ed*
Chapter 10 - In the beginning
Chapter 12- The Challenging Group Member

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)
Group Proposal Assignment is Due

Class 6   Termination

Barrett, M. S., Chua, W. J., Crits-Christoph, P., Gibbons, M. B., & Thompson, D. (2008). Early withdrawal from mental health treatment: Implications for psychotherapy practice. *Psychotherapy: Theory, research, practice, training*, 45(2), 247.

Goode, J. , Park, J. , Parkin, S. , Tompkins, K. & Swift, J. (2017). A Collaborative Approach to Psychotherapy Termination. *Psychotherapy, 54* (1), 10-14. doi: 10.1037/pst0000085.

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   Family Therapy Overview – Concepts, Models, and Common Factors

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 Therapy Overview – Intersectionality, Therapist Location-of-Self

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

Combs, G. (2019). White privilege: What's a family therapist to do?. *Journal of marital and family therapy*, *45*(1), 61-75.

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

McGoldrick, M., Gerson, R., & Petry, S. (2020). *Genograms: Assessment and treatment.* WW Norton & Company.
Chapter 2 (pp. 35-70
Chapter 4 (pp. 95-151)

Recommended:

Balaguer, A., Mary, D., & Levitt, M. (2000). The genogram: From diagnostics to mutual collaboration. *The Family Journal*, *8*(3), 236-244.

Magnuson, S., & Shaw, H. E. (2003). Adaptations of the multifaceted genogram in counseling, training, and supervision. The Family Journal, 11(1), 45-54.

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
Genogram Draft and Consult with Partner Assignment Due: In-Class

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

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   Strategic Family Therapy/ Technology in Social Work

Genogram & Genogram Paper Due

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)

Burgoyne, N. & Cohn, A. S. (2020). Lessons from the transition to relational teletherapy
        during COVID-19. *Family Process, 59(3)*, 974-988.

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

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.

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.

Recommended:

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.

Class 15	Leadership, Self-Care, and Course Wrap-up

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.

Vito, R. (2020). How do social work leaders understand and ideally practice leadership? A synthesis of core leadership practices. *Journal of Social Work Practice*, *34*(3), 263-279.

XIII. **ACADEMIC INTEGRITY**
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.

As per Rutgers University Academic Integrity Policy, "Students are responsible for understanding the principles of academic integrity and abiding by them in all aspects of their work at the University. Students are also encouraged to help educate fellow students about academic integrity and to bring all alleged violations of academic integrity they encounter to the attention of the appropriate authorities." All SSW students are expected to review and familiarize themselves with the RU Academic Integrity Policy in its' entirety.

As per Rutgers University Academic Integrity Policy, "The principles of academic integrity require that a student: make sure that all work submitted in a course, academic research, or other activity is the student's own and created without the aid of impermissible technologies, materials, or collaborations; properly acknowledge and cite

all use of the ideas, results, images, or words of others; properly acknowledge all contributors to a given piece of work; obtain all data or results by ethical means and report them accurately without suppressing any results inconsistent with the student's interpretation or conclusions; treat all other students ethically, respecting their integrity and right to pursue their educational goals without interference. This principle requires that a student neither facilitate academic   dishonesty by others nor obstruct their academic progress; uphold the ethical standards and professional
code of conduct in the field for which the student is preparing."

Students should review all types of Academic Integrity Violations per the RU Academic Integrity Policy. Below are some of the more common violations, as articulated in Rutgers University Academic Integrity Policy:

"Plagiarism: Plagiarism is the use of another person's words, ideas, images, or results, no matter the form or media, without giving that person appropriate credit. To avoid plagiarism, a student must identify every direct quotation using quotation marks or appropriate indentation and cite both direct quotation and paraphrasing 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, regardless of the nature of the assignment
- Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources, regardless of format, without proper attribution."

"Cheating: Cheating is the use or possession of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results or reports, analyses, and other textual or visual material and media as one's own work when others prepared them. Some common examples are: Prohibited collaboration: receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted; Copying another student's work or answers on a quiz or examination; Using or having access to books, notes, calculators, cell phones, technology, or other prohibited devices or materials during a quiz or examination; Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved**;** Preprogramming a calculator or other device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.; Acquiring a copy of an examination from an unauthorized source before the examination; Having a substitute take an examination in one's place; Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement; Submitting as one's own work a term paper or other assignment prepared, in whole or in part, by someone else."

Any faculty member or academic administrator who becomes aware of a possible academic integrity violation must initiate a formal complaint with the Office of Student Conduct and the SSW's Academic Integrity Facilitator (Laura Curran at lacurran@ssw.rutgers.edu). The AIF deciding the case (the "adjudicator") shall notify the accused student of the allegation in writing or by electronic communication within fifteen working days of the time the faculty member becomes aware of 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, see RU Academic Integrity Policy and Procedures for Adjudicating Academic Integrity Violations

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and major course assignments submitted for grading: ***On my honor, I have neither received nor given any unauthorized assistance on this examination/assignment***

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.

XVII. DIVERSITY STATEMENT

The RU SSW supports an inclusive learning environment where diversity, individual differences and identities (including race, gender, class, sexuality, religion, ability, etc.) are respected and recognized as a source of strength. Students and faculty are expected to respect differences and contribute to a learning environment that allows for a diversity of thought and worldviews. Please feel free to speak with me if you experience any concerns in this area.

Revised December 2021