## RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY SCHOOL OF SOCIAL WORK COURSE OUTLINE

## Social Work 19:910:588 Direct Practice Theories and Models

## I. Course Description

This elective course seeks to introduce students to the ways that theory and evidence are used to guide intervention with individuals, families, and groups. The focus of this course is on the ways that effective direct practice intervention must integrate different sources of knowledge: evidence (what has worked in the past with people with similar problems); theory (frames of reference for understanding how problems are generated and solved); clinical wisdom, and client preferences. Students will learn straightforward rubrics for locating and evaluating research evidence that may be used to generate intervention possibilities. Second, students will study and critique several key intervention theories and models (psychodynamic, cognitive, behavioral, family systems, group work) and apply them to case materials. Finally, the class will explore processes and problems that cut across direct practice models, such as the enhancement of change motivation.

## II. Place of Course in the Program

The course serves as a bridge between Social Work Practice I, which introduces students to the fundamental values, conceptual bases, and skills of direct social work practice; and the direct practice concentration courses, which provide a more focused and in-depth treatment of clinical theory and technique. This elective may only be taken by students during the foundation year of the program.

## **III.** Course Objectives

- 1. Students will learn to use research evidence to inform direct practice intervention decisions.
  - a. Students will learn to formulate research questions from their own practice situations.
  - b. Students will learn to locate research evidence relevant to questions that arise in their practice.
  - c. Students will learn to evaluate the quality of practice-related research evidence and use it to inform the intervention plans they develop in collaboration with their clients.
- 2. Students will learn to use theory to inform direct practice intervention.
  - a. Students will acquire a beginning understanding the history, fundamental approach, and relevant intervention techniques for a range of direct practice theories and models.
  - b. Students will apply a range of direct practice theories and models to case material.

- c. Students will learn to distinguish elements of each unique theoretical approach.
- d. Students will learn to integrate research evidence and theory in the analysis of practice situations.

## IV. Required texts:

Stanley B. Messer and Alan G. Gurman (eds.) (2011). *Essential psychotherapies: Principles and practice*. New York: Guilford Press. Available for purchase at the Rutgers Bookstore.

Additional readings: available electronically on course site at sakai.rutgers.edu

## V. Course Requirements and Expectations:

## Attendance Policy:

It is expected that students will attend all class sessions and that they will be fully prepared for discussion and assigned activities. In order for a student to be considered present for class, the student must attend all of the class. Students who arrive late or leave during the break, unless negotiated with the instructor in advance, will be marked as absent for that class. Appropriate absences (e.g., religious observance) are allowed with prior permission from the instructor. All other absences will deduct a percentage point from your participation grade, and missing more than five classes (regardless of whether they are excused absences) will result in a failing grade for the course.

The use of cell phones (including text messaging), blackberries, PDA's, or any similar type of electronic device is not permitted in class, nor is using a laptop computer to check email or surf the internet, etc.. Receiving phone calls during class, while occasionally necessary in case of emergency, is disrespectful to your instructor and classmates. If there is an emergency and you need to leave your cell phone on, please turn it to vibrate and attend to the call in the hallway so that you will not disturb your colleagues.

## Receiving Course Messages through Email:

Students are expected to regularly check their RU email account for course messages. If students prefer to use a non-university email account, they are responsible for setting up account preferences such that mail sent to their Rutgers account is automatically forwarded to their non-university account.

## **Course Assignments**

## A. Midterm Examination [due date]

The midterm examination will be a take-home assignment which asks students to apply practice theories learned in class to a common case vignette provided by the instructor.

## B. Case Analysis and Intervention Plan [due date]

This assignment requires you to apply course teachings about theories and models to a specific case from your field placement. Please **choose a client** whom you are working with currently or have worked with over the course of the year. Ideally, this should be a client with whom you have had significant interaction and for whom you have access to assessments or other case records.

For your case, please **select one problem area** on which to focus. This problem area should be a key area of importance in the client's situation, and should represent a substantive topic on which you are interested in learning more. In other words, use this as an opportunity to read and consider a problem (e.g., truancy, impaired parenting skills, improvement of job readiness, medication adherence, etc.) in greater depth.

In your paper, you should begin with by describing your client and briefly detailing his or her presenting problem, relevant history, the nature of referral to your agency, and your role in his or her treatment. Next, provide a **description of the problem** you plan to address or have been addressing with your client. Be specific in defining the problem (frequency, duration, and social context), drawing from any assessments or case records, observations of the client by yourself and your colleagues, and the perspective of your client and/or any significant others/family members. In other words, you are to prepare an in-depth assessment of a particular problem area.

Second, you are asked to examine possible interventions for this problem area from an **evidence-based perspective**. This requires that you conduct a literature search to identify various appropriate treatments, applying skills learned in this class as well as in your research course. In your paper, describe any treatments you uncovered in your search, and discuss the evidence in support of their effectiveness. Is there are particular intervention or treatment modality which is considered most effective for this problem area?

Third, discuss the role of **theory** in the selection of an appropriate intervention for this problem area. If you have already undertaken an intervention with the client, discuss the theoretical basis (if known) for this intervention. Elaborate at least two theoretical models of change that are plausible given the nature of your client's problems, even if they do not form the basis of the intervention you have been using (you may draw upon the theories we have covered in class, but you are not limited to these theories). How would each theoretical perspective point to a different path of intervention for clients experiencing this problem? In your discussion, please reflect upon the degree to which you find yourself drawn to particular theoretical perspectives for addressing this type of problem. Do you find particular theoretical models more compelling than others, and if so, in what way(s)?

Fourth, please provide a **progress report** regarding any interventions you (or your agency) have already undertaken for the problem, if applicable. How is the intervention working/how did it work? Have you seen evidence of change? Do you think this represents the optimal method for addressing your client's problem? Why or why not?

Based on your literature review and reflection upon theories, **propose an intervention strategy** you think would be most appropriate for your client's situation. Be sure to take into account the applicability of the intervention to a) your particular client and b) the particular agency context in which you and he/she are embedded. Would your client be

likely to consider this treatment? Are there possible obstacles to change that should be considered (e.g., resource limitations, organizational factors, situational constraints, motivational impediments)? In other words, try to strike a balance between the "ideal" depicted by the research literature and the reality of your situation in formulating an intervention strategy.

Finally, conclude with a **specific (hypothetical) intervention plan** for this problem area for your client, including goals (and if relevant, subgoals) and the specific methods to be used to attain these goals. Importantly, your goals and interventions must be written with enough specificity to enable others (e.g., your actual or hypothetical co-workers) to be able to implement the interventions in your absence and to evaluate their success. Where relevant, please attend to issues to maintenance and generalization of gains.

## VI. Grading: course assignments will contribute to your grade as follows.

Midterm	45%
Final Paper	45%
Attendance and class participation	10%

## VII. Academic Integrity Policy

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 citation style of the American Psychological Association..

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 in a 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 along with any and all other violations of academic integrity by graduate and professional students will normally be penalized more severely than violations by first-year 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 Judicial Affairs. The AIF that you should contact is Antoinette Y. Farmer, 732.932.2621. 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/integrity.shtml

#### VIII. Disability Accommodation

Please Note: Any student who believes that s/he may need an accommodation in this class due to a disability should contact the designated Coordinator for the Concerns of Students with Disabilities at the School of Social Work, Arlene Hunter, Assistant Dean for Student Services and Director of Admissions (amhunter@rci.rutgers.edu) for a letter of accommodation. Students must have a letter of accommodation from the Coordinator in order to receive accommodations. (Undergraduate New Brunswick students should contact the Coordinator for Students with Disabilities for their College.) Any student who has already received a letter of accommodation, should contact the instructor privately to discuss implementation of his/her accommodations immediately. Failure to discuss implementation of accommodations with the instructor promptly may result in denial of your accommodations.

#### **Course Schedule and Required Readings**

Note: the Messer and Gurman text is denoted as MG

## Week 1: Topic: Orientation to course material and expectations

*MG*: Chapter 1: Contemporary issues in the theory and practice of psychotherapy: a framework for comparative study

## Weeks 2 and 3: Topic: Psychodynamic models of practice

*MG*: Chapters 2 and 3

Wachtel, P. (1993). *Therapeutic communication: principles and effective practice*. New York: Guilford Press, pp. 16-62.

Chapter 2: Cyclical psychodynamics I: Vicious circles Chapter 3: Cyclical psychodynamics II: The centrality of anxiety Chapter 4: Cyclical psychodynamics III: Insight, the therapeutic relationship and the world outside

Borden, W. (2008). Contemporary object relations psychology and psychosocial intervention. In A. R. Roberts (Ed). *Social Workers' Desk Reference*. New York: Oxford University Press.

Gelman, C.R. (2004). Toward a better understanding of the use of psychodynamicallyinformed treatment with Latinos: Findings from clinician experience. *Clinical Social Work Journal*, 32(1), 61-77.

## Weeks 4 and 5: Topics: Behavioral models of practice

*MG*: Chapters 4 and 6

Reid, W.J. (2004). Contribution of operant theory to social work practice and research. In H. Briggs & T. Rzepnicki (Eds.), *Using Evidence in Social Work Practice* (pp. 36-53). Chicago: Lyceum.

Mattaini, MA., & Moore, S.K. (2004). Ecobehavioral social work. In Briggs & Rzepnicki (Eds.), Using Evidence in Social Work Practice (pp. 55-73). Chicago: Lyceum.

Otto, M.W., & Hinton, D.E. (2006). Modifying exposure-based CBT for Cambodian refugees with posttraumatic stress disorder. *Cognitive and Behavioral Practice*, 13, 261-270.

Hopko, D.R., Lejuez, C.W., Ruggiero, K.J., & Eifert, G.H. (2003). Contemporary behavioral activation treatments for depression: Procedures, principles, and progress. *Clinical Psychology Review*, 23, 699-717.

## Weeks 6 and 7: Topic: Cognitive Models of Practice

MG: Chapter 5

Muroff, J. (2007). Cultural diversity and cognitive behavior therapy. In T. Ronen & A. Freeman (Eds.), *Cognitive behavior therapy in clinical social work practice*. (pp. 109-146). New York, NY, US: Springer Publishing Co.

Berlin, S. *Clinical social work practice: A cognitive-integrative perspective.*Chapter 1: Basic assumptions and basic ingredients
Chapter 6: The fundamentals of personal change
Chapter 7: Assessing, engaging, and formulating

## Week 8: In-Class Midterm Exam

## Week 9: The EBP Process Library Searching Evaluating evidence in support of intervention decisions

Nelson, T.D., Steele, R.G., & Mize, J.A. (2006). Practitioner attitudes toward evidence-based practice: Themes and challenges. *Administration and Policy in Mental Health and Mental Health Services Research*, 33(3), 398-409.

Gibbs, L.E. (2003). Evidence based practice for the helping professions. Chapter 3-5

Thomas, C.R. (2005). Evidence-based practice for conduct disorder symptoms. *American Academy of Child and Adolescent Psychiatry*, 45, 109-114.

Marlow, C. (2004) The evidence-based practitioner: Assessing the cultural responsiveness of research. In H.E. Briggs & T.L. Rzepnicki (Eds.), *Using Evidence in Social Work Practice: Behavioral Perspectives* (pp. 257-272). Chicago: Lyceum.

## Weeks 10 and 11 Topic: Family systems models

MG Chapters 9 and 10

McGoldrick, M. (1998). Re-visioning family therapy through a cultural lens. In, M. McGoldrick (Ed.), *Re-visioning Family Therapy: Race, Culture and Gender in Clinical Practice* (pp. 3-19). New York, NY: Guilford Press.

LaSala, M.C. (2000). Lesbians, gay men, and their parents: Family therapy for the comingout crisis. *Family Process*, 39(1), 67-81. Nelson, R.H., Mitrani, V.B., & Szapocznik, J. (2000). Applying a family-ecosystemic model to reunite a family separated due to child abuse: A case study. *Contemporary Family Therapy*, 22(2), 125-146.

McCracken, S. & Rzepnicki, T. (2009). The role of theory in conducting evidence based clinical practice. In W. Borden (ed.), *Reshaping Theory in Contemporary Social Work Practice: Toward a Critical Pluralism*, New York: Columbia University Press.

# Week 12Topic:Common Factors and Integrative Therapies

MG, Chapter 12.

Messer, S. & Wampold, B. (2002). Let's face it: Common factors are more potent than specific therapy ingredients. *Clinical Psychology: Science and Practice*, 9, 21-25.

van der Kolk, B.A. The assessment and treatment of complex PTSD. Draft copy of chapter published in R. Yehuda (ed.), Traumatic Stress. Washington, DC: American Psychological Association. http://www.traumacenter.org/products/pdf\_files/Complex\_PTSD.pdf

## Week 13: Topic: Group work models of practice

MG, Chapter 13

Lukens, E., & Thorning, H. (1998). Psychoeducation and severe mental illness: Implications for social work practice and research. In J.B.W. Williams and K. Ell (eds.), *Advances in Mental Health Research: Implications for Practice.* Washington, DC: NASW.

Malekoff, A. (2004). *Group work with adolescents: Principles and practice*. Selected chapters (4, 5, and 6)

Smokowski, P.R., Rose, S., Todar, T., & Reardon, K. (1999). Postgroup-casualty status, group events, and leader behavior: An early look into the dynamics of damaging group experiences. *Research on Social Work Practice*, 9, 555 - 574.

Waldram, J.B. (2008). The narrative challenge to cognitive behavioral treatment of sexual offenders. *Culture, Medicine and Psychiatry*, 32(3), 421-439.

## Week 14: Topic: Approaching change obstacles and resistance Motivational enhancement

Prochaska, J. & Prochaska, J. (1999). Why don't continents move? Why don't people change? *Journal of Psychotherapy Integration*, 9(1), 83-102.

Reid, W. (1992). *Task Strategies*. New York: Columbia. Chapter 5: Identifying and resolving obstacles, pp. 36-72.

Miller, W.R., & Rollnick, S. (2002, 2<sup>nd</sup> ed.). *Motivational Interviewing: Preparing People for Change.* New York: Guilford. Chapter 4: What is Motivational Interviewing? and Chapter 11: A Practical Case Example

Añez, L.M., Silva, M.A., Paris, M., & Bendregal, L.E. (2008). Engaging Latinos through the integration of cultural values and motivational interviewing principles. *Professional Psychology: Research and Practice*, 39, 153-159.

Week 15:Topics:Synthesis of course themes and controversies

Readings: TBA