

**UNIVERSITY OF TENNESSEE  
COLLEGE OF SOCIAL WORK**

**SW-521: Clinical Social Work Practice with Individuals**

Course Outline

Fall 2004

Thursday Class (section 02172)

**Professor:** Shan Sanders-Wooley

**Day:** Thursdays, 9:00am-11:50

**Contact:** 373-3487 (home)

**Office Hours:** After Class

351-0588 (work)

**Required Texts**

Beck, A., T. (1987). Cognitive therapy of depression. New York: Guildford Press (paperback)

Goldstein, E. G. (1995). Ego psychology and social work practice. New York: the Free Press

**COURSE REQUIREMENTS/GRADING**

The course grade will be based on student participation, a mid-term assignment, a presentation and a final paper. Students are expected to read the assigned articles/chapters thoughtfully and to come to class prepared to ask questions, make comments and add to the overall discussion. The guidelines for the presentation and paper are outlined in a separate hand-out. The description of the mid-term assignment is included at the end of this syllabus. The course grade will be computed as follows:

Class participation	10%
Midterm assignment	45%
Presentation/Final paper	45%

**COURSE OUTLINE**

**WEEK #1** Introduction to the Course  
8/19

**WEEK #2** The nature of Social Work Practice - the relationship of theory to practice;  
8/26 Feminist Theory; a feminist approach to practice

**Readings:** Nes, J. & Iadicola, P. (1989). Toward a definition of feminist Social Work: A comparison of liberal, radical, and socialist models. Social Work, Jan., 12-21.

Lundy, M. (1993). Explicitness: the unspoken mandate in feminist social work. Affilia, 8, 184-199.

Walters et al. (1988). Toward a feminist perspective in family therapy. The invisible web. New York: Guilford Press.

Hooks, B. (1984). Black women: Shaping feminist theory. Feminist theory from margin to center. Boston; South End Press.

Atwood, N.C. (2001). Gender bias in families and its clinical implications for women. Social Work, 46, 23-35.

**WEEK #3**  
9/02 Theoretical Models - Theoretical Models - Feminist Theory continued; Introduction to Ego Psychology and the Psychodynamic Model (theoretical background, key concepts)  
Video - “Feminist Therapy with Dr. Laura Brown”

Readings: Goldstein - chapters 3, 4 & 5

**WEEK #4**  
9/09 Theoretical Models - Psychodynamic; key concepts continued; worker/client relationship; assessment

Readings: Goldstein - chapters 7 & 9

**WEEK #5**  
9/16 Theoretical Models - Psychodynamic; treatment techniques and termination  
Video - Therapy with the Experts: Object Relations Therapy

Readings: Goldstein - chapter 8

Lawrence, L. (1992). “Till death do us part: The application of object relations theory to facilitate: mourning in a young widows’ group. Social Work in Health Care, 67-81

**WEEK #6**  
9/23 Theoretical Models - Cognitive Therapy; the cognitive therapy model, principles of CT

Readings: Beck, A. (1979). Cognitive Therapy of Depression - Chapter 1

Freeman, et al. (1990). Clinical applications of Cognitive Therapy. NY: Plenum Press, pp.3-24.

Dia, D. (2001). Cognitive-behavioral therapy with a six-year-old boy with separation anxiety disorder: A case study. Health & Social Work, 26, 125-128.

**WEEK #7**  
9/30 Continued.....

**WEEK #8** Cognitive Therapy - Worker-client relationship; structure of therapy; assessment  
10/07

Readings: Beck, A. - chapters 3, 4, & 5

**WEEK #9** FALL BREAK  
10/14

**WEEK #10** Theoretical Models - Cognitive Therapy; Techniques for intervention; termination  
10/21 and follow-up

*Video* - "Constructivist Cognitive-Behavioral Therapy"

Beck, A. - chapters 6,7, and 8 (\* if you have time, I also recommend reading chapter 12)

MIDTERM ASSIGNMENT DUE

**WEEK #11** Theoretical Models - Brief Therapies overview, Crisis Intervention  
10/28

Readings: Wells, R. (1994). Short-term treatment: Overview and evidence. In R. Wells (ed.). Planned short-term therapy. NY: Free Press, pp. 1-20.

Ell, K. (1996). Crisis theory and social work practice. In F. Turner (ed.). Social Work Treatment. New York: The Free Press, pp. 168-190.

Weiss & Parish (1989). Culturally appropriate crisis counseling: Adapting an American method for use with Indochinese refugees. Social Work, 34, 252-254.

Myer & Hanna. Working in hospital emergency departments: guidelines for crisis intervention workers. In A. Rhodes (ed). Crisis Management & Brief Treatment: Theory, techniques, and applications., pp. 37-59. Chicago: Nelson-Hall

**WEEK #12** Theoretical Models - Brief Therapies continued (Task Centered) ; Student  
11/04 Presentations

**WEEK #13** Case Studies - Student Presentations  
11/11 \*\*Final Papers Due\*\*

**WEEK #14** Case Studies - Student Presentations; Course Evaluations  
11/18

**Week#15** Thanksgiving Week  
11/25

## MIDTERM ASSIGNMENT - Application of Theory to Practice

In this paper you are to utilize a case from field or other practice experience and to examine this case from 1 of the theoretical perspectives we have discussed so far in class. You may choose between the feminist, cognitive, or psychodynamic models.

1. Briefly describe the case (about 1 page). **10 points**
2. State which theory you will use to conceptualize the case/problem situation and the **reasons** you have chosen this model - what about this model do you think will be especially helpful to you in conceptualizing this case? (1-2 paragraphs) **5 points**
3. Describe the theory you have chosen, i.e. what are its major concepts (describe/explain the concepts, do not just list them) - you will need references for this section **35 points**
4. Apply the major concepts of the theory you've chosen to your case theory. Give examples to demonstrate. **35 points**  
*For example:* if you chose CBT as your model you would need to examine your client's cognitions, his/her underlying assumptions, and the feelings/behaviors that these lead to. What types of cognitive distortions is your client making? Give an example of these. What are the client's underlying assumptions? Give examples. How are these related to the client's feelings/behaviors? Give examples.
5. Discuss any ethical dilemmas that were present in your work with your client up through the assessment phase. If you were to apply your chosen model to treatment with your client, do you foresee any ethical conflicts that might arise? If no ethical dilemmas were present and/or after thoughtful consideration you can not foresee any ethical conflict that may be present in the application of the treatment to the client, *you must state this clearly.* (1 paragraph) **5 points**
6. Discuss what you found to be the strengths and limitations of this model in helping you to understand and assess the client and his/her situation. (1-2 paragraphs) **10 points**

In using case material, permission should be obtained from your field instructor. Also be sure to maintain confidentiality by disguising information that would identify the client and agency.

Grades will be based on the clarity with which you are able to describe and apply the chosen models to your case, the depth of your analysis, and the quality of your writing (i.e. organization, clarity, spelling, and grammar).

**Papers must be typed, double-spaced**

**Length Maximum: 7 pages (excluding references)**

**Use APA (5<sup>th</sup> edition) style**

**\*\*\*Papers that are turned in late without prior approval of the \*\*\*  
instructor will not be accepted**

## FINAL ASSIGNMENT

As a clinical social worker, there is a body of knowledge and a range of skills that you are expected to have in order to engage in responsible and effective practice. The following assignment is intended to help you to continue to develop this knowledge and skill.

Select a clinical problem (or a problem in living) about which you would like to develop some expertise as a clinical social worker. This expertise should reflect itself in knowledge of the nature of the problem, characteristics of the problem, the impact of the problem (i.e. biopsychosocial factors) and ethical considerations that should be taken when treating clients with this problem. Then decide on a practice model that you will use in order to conceptualize the case, complete an assessment, and plan intervention strategies. You must use one of the models discussed in class. You may also use an integrated model (i.e. combine 2 of the practices models discussed in class). However, if you do so, you must clearly state which models you are using and your rationale for combining these particular models for use with the identified clinical problem.

With your group members research the problem and discuss appropriate interventions with individuals with this problem.. Find a case vignette around which you can discuss the above components of the treatment process. In other words, develop an assessment and a treatment plan, decide on techniques to be used and why (i.e. what are you hoping to accomplish with each technique). Finally, present a plan for evaluation of outcomes.

This work will result in a final presentation by your group to the class.

Objectives of this assignment - students should:

1. Demonstrate a thorough knowledge of the selected problem and ethical considerations in the treatment of clients with this type of problem/situation
2. Demonstrate a thorough understanding of the practice model and an ability to *apply* practice theory to assessment, goal development and development of intervention strategies
3. Demonstrate an ability to creatively apply elements of the treatment process to work with clients with this problem
4. Demonstrate evidence of familiarity with the literature
5. Present a plan for outcome evaluation

For your group presentation

1. Spend a short period of time (about 5 minutes) describing the clinical problem or problem in living
2. Clearly state which practice model(s) you will be using and why
3. *Briefly* present the case to the class
  
4. Demonstrate assessment and intervention techniques - be creative! You may use live roleplays, videotaped roleplays, present the case at a mock staff meeting, etc.

You may also use overheads, posters, power point whatever you think will help you *clearly* present the material in an *engaging* manner

5. You will have 45 minutes for your presentation - this is to include about 5 minutes for question/answer and discussion period
6. Use **hand-outs** to highlight the main aspects of your presentation

NOTE WELL:

1. You may use one of your field practice cases for this assignment in lieu of a “canned” case situation
2. On week #7 your group is to turn in to the instructor a **brief** description of your presentation including who will be responsible for which aspects and how you are thinking of presenting this material to the class
3. Your work should be a collaborative effort - should be well integrated and demonstrate a sense of continuity or wholeness. Work that gives evidence of having been pieced together will not be viewed positively
4. Presentations will be graded based upon the degree to which the above objectives have been met. Presentation grades will also be based upon the creativity used to convey ideas/demonstrate techniques. **Presentations that are dry and uncreative or that consist of group members reading to the class from their notes will be marked down by ½ to 1 full letter grade.** Group members should not read from their notes. Use of overheads, flip charts, etc. and a thorough knowledge of your own material should eliminate the need to read from notes.

**GRADING:** The group will receive a grade for the overall presentation. Each group member will receive an individual grade for their contribution to the presentation project. Each student’s final grade for the presentation will be calculated by averaging their group and their individual grades.

## FINAL PAPER OPTION

\* A student may choose to do a final paper instead of participating in a group presentation. Students who choose this option usually do so because a) they are interested in a topic that was not selected by the class as a group presentation topic; or b) their schedule makes participation in a group project very difficult or impossible.

### Final Paper Guidelines

As a clinical social worker, there is a body of knowledge and a range of skills that you are expected to have in order to engage in responsible and effective practice. The following assignment is intended to help you to continue to develop this knowledge and skill.

Select a clinical problem (or a problem in living) about which you would like to develop some expertise as a clinical social worker. This expertise should reflect itself in knowledge of the nature of the problem, characteristics of the problem, and the impact of the problem (i.e. biopsychosocial factors). Then select **two** theories of social work practice and apply these theories to the problem that you have selected. The paper is compare the two theories including their key assumptions, goals, and key methods, and describe how each would intervene to treat the problem.

In the paper you should:

1. Succinctly demonstrate a thorough knowledge of the selected problem (2 pages)
2. Name the 2 theories you will be using and present a clear rationale for using these 2 theories - look in the literature to see which approaches have strong theoretical and/or empirical support for treating the problem you have selected (1 page)
3. Compare the 2 theories - key assumptions/concepts, goals, key methods ( 4 pages)
4. Describe how each theory would guide you to approach assessment and treatment of someone with the problem you selected (4 pages)
5. Your critique - how helpful do you believe each of these theories would be in guiding your assessment and treatment of someone with the problem you selected, i.e. - based upon your critique would you use one or both of these theories to guide your treatment of a client with this problem? If you would use one or both - how would you use them? Is one particularly helpful for assessment purposes and other for the actual treatment? Or is one model more helpful with a certain aspect of the problem and another model more helpful with a different aspect? (1page)

The paper should not exceed 12 pages in length, excluding references. The paper is to be well referenced. Grades will be based on the clarity with which you are able to clearly and succinctly describe the problem, describe and apply the chosen models to you're the problem you selected, the depth of your analysis, and the quality of your writing (i.e. organization, clarity, spelling, and grammar). Use APA (5<sup>th</sup> edition) style through-out the paper. Papers are due November 16<sup>th</sup>.

**Papers that are turned in late without prior approval of the instructor will not be accepted**

## Group Presentation Evaluation

The degree to which the group presentation fulfilled the following objectives:

1= poor      2=fair      3=adequate      4=well      5=excellent

1. Succinct and clear discussion of the nature of the clinical problem/problem in living

1      2      3      4      5

2. Succinct and clear discussion of ethical considerations in the treatment of clients with this type of problem/situation

1      2      3      4      5

3. Clear statement of and rationale for using the clinical model(s) used given the nature of the problem

1      2      3      4      5

4. Succinct and clear case presentation

1      2      3      4      5

5. Application of clinical model(s) to assessment

1      2      3      4      5

6. Application of clinical model(s) to goal development and intervention strategies

1      2      3      4      5

7. Evidence of planning and coordination among group members

1      2      3      4      5

8. Presentation carried out in a creative and engaging manner

1      2      3      4      5

## SW 521: Bibliography

- Cipriano, L.A. (1991). Psychoanalytic perspectives on substance abuse: implications for treatment, program planning and social policy. Social Work in Health Care. 15(3): 9-46.
- Gilbar, O. (1991). Model for crisis intervention through group therapy for women with breast cancer. Clinical Social Work Journal. 19(3): 293-304.
- Lorber, J. (1994). Paradoxes of gender. New Haven: Yale University Press.
- McCarthy, B.W. (1998). Treatment of incest families: A cognitive-behavioral model. Journal of Sex Education & Therapy, 16(2), 101-114.
- Michelson, L., Marchione, K., Greenwald, M., Glanz, L., Testa, S., Marchione, N. (1990). Panic disorder: Cognitive-behavioral treatment. Behaviour Research and Therapy. 28(2): 141-52.
- Newhill, C.E. (1993). Short-term treatment of a severely suicidal Japanese American client with schizoaffective disorder. Families in Society, 74(8): 503-507.
- Peveler, R.C. & Fiarburn, C.G. (1989). Anorexia nervosa in association with diabetes mellitus—a cognitive-behavioral approach to treatment. Behaviour Research and Therapy. 27(1), 95-99.
- Reinecke, M., Dattilio, F., & Freeman, A (1996). Cognitive therapy with children and adolescents.  
New York: Guilford Press.
- Scharlach, A.E. (1985). Social group work with institutionalized elders: A task-centered approach. Social Work with Groups. 8(3): 33-47.