

**THE UNIVERSITY OF TENNESSEE  
COLLEGE OF SOCIAL WORK**

**SW 530 Seminar in Clinical Social Work: Cognitive Behavior Therapy**  
Spring 2003

Instructor: William R. Nugent, Ph.D.  
Office: 123 Henson Hall  
Phone: 974-3802 (office)  
992-9434 (home)  
E-mail: [wnugent@utk.edu](mailto:wnugent@utk.edu)

Thursday 3:35 - 6:35  
Room 311 Henson Hall

**Code of Conduct**

It is the student's responsibility to have read the College of Social Work Ethical Academic and Professional Conduct code that is in the College of Social Work MSSW Handbook ([www.csw.utk.edu](http://www.csw.utk.edu))

**The Honor Statement**

An essential feature of The University of Tennessee is a commitment to maintaining an atmosphere of intellectual integrity and academic honesty. As a student of the University, I pledge that I will neither knowingly give nor receive any inappropriate assistance in academic work, thus affirming my own personal commitment to honor and integrity. (*Hilltopics*, 2002).

**Disability**

If you need course adaptations or accommodations because of a documented disability or if you have emergency information to share, please contact the University of Tennessee Office of Disability Services at **191 Hoskins Library (974-6087)**. This will ensure that you are properly registered for services.

**Course Description**

This is a course on the theory, concepts, and techniques of cognitive behavior therapies, with a particular emphasis on intervention methods that may be used by the social worker to help clients with specific problems.

## **Course Rationale**

The rapid growth and empirical validation of cognitive-behavioral theory, methods, and techniques, and the increasing utilization of these approaches in social work practice, make this course a useful elective for social work students studying to become direct service workers. Many cognitive-behavioral methods are what could be called "short-term," making cognitive-behavioral methods, perhaps, of particular value as more and more emphasis is placed on providing clients with short-term courses of intervention. Many of these methods also have impressive outcomes documented through empirical research. The concepts and methods of cognitive-behavioral therapy are also useful in understanding and working with diverse client populations who do not wish, are not appropriate for, or do not respond to more traditional therapeutic approaches.

## **Course Objectives**

By the end of this course students are expected to be able to:

1. Describe major theoretical assumptions and concepts common to all cognitive-behavioral models;
2. Demonstrate an understanding of the potential role of cognitions in the development and maintenance of problematic behavioral and affective states;
3. Discuss the role of research in validating use of clinical techniques that are prescribed in various theoretical models;
4. Apply cognitive-behavioral concepts and techniques to understanding and intervening with self and other helping professionals in self-care, stress management, and prevention of burn-out;
5. Demonstrate beginning competency in use of several cognitive-behavioral assessment procedures;
6. Demonstrate beginning competency in ethically applying cognitive-behavioral techniques to the restructuring of problematic cognitions or belief systems;
7. Apply cognitive-behavioral methods to problems of anger control, social skills, depression, anxiety, and disorders such as panic disorder with, and without agoraphobia, obsessive-compulsive, and social phobia disorders;
8. Conduct both suicide risk assessments and assessments of risk of harm to others;
9. Use single case design methods to evaluate the effect of a cognitive-behavioral intervention on a client's problem;

10. Demonstrate an understanding of the impact of oppression, poverty, learning history and gender, age, race, ethnicity, and sexual orientation characteristics in the development and maintenance of behaviors and cognitions traditionally labeled as "deviant," "problematic," or "dysfunctional."

### Required Text

Beck, J. (1995). *Cognitive Therapy: Basics and Beyond*. New York: Guilford Press.

This book is on sale at the bookstore in The University Center.

The instructor may also require the reading of specific journal articles during the course of the semester. There will also be handouts given out on suicide risk assessment during the course of the semester.

### Grading

Exams (2)	50% (25% each)
Quizzes	20%
Personal change project	20%
Suicide risk assessment exam	<u>10%</u>
	100%

### Exams

There will be two exams, one at approximately mid-term, and the other at the end of the semester. Both exams will be composed of multiple choice, matching, and fill-in-the-blank items. Each exam will account for 25% of your course grade.

### Quizzes

There will be a quiz at the beginning of each class that covers the assigned readings. This quiz will typically be 5 or fewer questions, and will be of the multiple choice type.

### Personal change project

During the semester you will do a personal change project in which you will apply a CBT intervention to a problem that you yourself experience. Doing this project will not only help you to better understand the CBT interventions, it will also help you to develop an empathic understanding for your clients as they implement the intervention components for their own problems. The project will require you to repeatedly measure the problem you want to change and to use a B single case design to monitor your progress (or lack thereof). You will also implement one of the CBT interventions with yourself, and you will evaluate the effects of the intervention with the B single case design. At the end of the semester you will write up and turn in a brief report in which you describe the implementation of the intervention, the effects it had, and what you learned about the intervention from this exercise. You will also include in your write up a brief discussion of the ethical implications of using CBT techniques with clients, and will include a sample informed consent document that you would have used if the intervention you implemented in this assignment had been with an actual client as opposed to yourself. Specific details about this project will be given out in class by the course instructor.

### Suicide risk assessment exam

An exam will be given on suicide risk assessment at the conclusion of this portion of the class. This will be a take home exam. Its purpose is to assist you in learning the critically important material on suicide risk assessment.

## **Tentative Course Outline**

### I. Overview of Cognitive-Behavioral Theory (CBT)

#### A. principles of CBT

#### B. evaluating CBT treatment

#### C. ethics: doing CBT ethically

##### 1. NASW Code of Ethics and evidence based treatment

##### 2. An adequate standard of care, liability, and malpractice

##### 3. Informed consent for treatment

###### a. expected benefits of treatment

###### b. possible negative effects; means of protecting client from potential negative effects

###### c. alternative interventions

#### D. basic cognitive intervention techniques: cognitive restructuring

##### 1. Automatic thought catching

##### 2. Identifying cognitive distortions

##### 3. Challenging automatic thoughts and distorted beliefs

##### 4. The triple column technique

- II. The behavioral component: Classical conditioning
  - A. principles
  - B. interventions based on classical conditioning
  
- III. The behavioral component: Operant conditioning
  - A. principles
  - B. interventions based on operant conditioning
  
- III. The behavioral component: Modeling/Observational learning
  - A. principles
  - B. interventions
  
- IV. A CBT intervention for anger and anxiety problems
  - A. Assessing anger and anxiety problems
  - B. How to implement intervention
  - C. Intervention components
  
- V. The Cognitive/Behavioral treatment of depression
  - A. A CBT model of depression
  - B. Assessing depression
  - C. A CBT intervention for depression
  
- VI. Suicide risk assessment
  - A. An adequate standard of care, legal issues
  - B. Epidemiology of suicide
  - C. Suicide risk indicators
  - D. Suicide risk assessment
  
- VII. The Cognitive/Behavioral treatment of anxiety disorders
  - A. Panic disorder
  - B. Simple phobias
  - C. Agoraphobia
  - D. Social phobia
  - E. Generalized anxiety disorders
  
- VIII. A Cognitive/Behavioral treatment package for aggressive and antisocial youths
  - A. Assessment of aggressive and antisocial behavior
  - B. Aggression replacement training
    - 1. Anger control training
    - 2. Social skills training
    - 3. Moral reasoning education

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