

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

**SW 530: Cognitive Behavioral Therapy (3 credits)**

**Prerequisite(s):** 510, 512, 513, 517, 519, 520, 522, 537, 538, 539.

**Instructor**

Sandra J. Gonzalez, M.S.S.W, L.C.S.W

Class time: Thursday, 3:00 – 4:50 p.m.

Office hours: Thursday, 12:00 – 1:00 or by appt.

Phone: (615) 782-6157

Email: [sgonzale@utk.edu](mailto:sgonzale@utk.edu)

Office: Room 276

**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.utk.csw.edu](http://www.utk.csw.edu))

**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*, 2008).

**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 2227 Dunford Hall (865) 974-6087. This will ensure that you are properly registered for services.

**Course Description**

This is an advanced elective course. This course focuses on empirically validated treatment approach, cognitive behavioral therapy. It covers the theory, concepts, and techniques of cognitive behavioral therapies, with a particular emphasis on intervention methods that may be used by the social worker to help clients with specific problems or conditions.

**Course Rationale**

Social workers are the largest group of mental health providers. Coupled with the rapid growth and empirical validation of cognitive behavioral therapy, methods, and techniques, and the increasing utilization of these approaches in social work practice, make this course a useful elective for social worker students studying to become direct service social workers. Many of the cognitive behavioral methods are considered 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 and are appropriate for use with diverse populations.

## Course Competencies

By the completion of this course, the students are expected to be able to demonstrate (through course activities, assignments, and/or exams):

1. Describe the evidence-based, theoretical model that underlies cognitive behavioral therapy. (CT/EBP-C.1, C.2; HBSE-C.2; Practice-C.1, C.2; Policy C.2). *(content: steps in evidence based practice, theoretical models and concepts, theory driven practice, neurobiology, developmental, mental health policy )*.
2. Identify the components of an evidence-based, functional behavioral assessment. (Practice-C.1, C.2, C.3). *(content : case scenarios, professional use of self, steps in conducting FBA – define behaviors, baseline data, observation strategies, therapeutic relationship, antecedents-behavior-consequences; evidenced based assessment tools, information technology, diagnosis, dimensional assessment vs. categorical, psychosocial assessment, collection of data from multiple sources, takes into account culture, race, socioeconomic class, gender, sexual orientation, stage of development, spiritual needs and perspectives, and physical and mental functioning)*.
3. Identify the components for a cognitive behavioral conceptualization for a variety of disorders. (Practice-C.1, C.2, C.3). *(content: components of conceptualization, case scenarios, downward arrow technique, core beliefs, schema, automatic thought, takes into account culture, race, socioeconomic class, gender, sexual orientation, stage of development, spiritual needs and perspectives, and physical and mental functioning)*.
4. Describe the components for a cognitive behavioral treatment plan. (Practice-C.1, C.2, C.3). *(content: design and implement evidenced based practice, case scenarios, identification of problems and goals, ways to break goals into pieces, to make observable and measurable, etc., interventions linked to conceptualization, treatment techniques and strategies)*.
5. Describe the major evidence-based, cognitive behavioral techniques/interventions for different problems or syndromes. (Practice-C.1, C.2, C.3). *(content: case scenarios, disorder specific techniques and strategies for individuals, families and groups – cognitive restructuring, daily thought records, role plays, pleasant event scheduling, cognitive distortions, breathing retraining, psychoeducation, Socratic questioning, guided discovery, cognitive rehearsal, coping cards, electronic resources, etc.)*.
6. Identify and critically analyze the evidence-bases for CBT. (Diversity-C.1, C.2, C.3; CT/EBP-C.1, C.3, C.4; HBSE-C.1, C.2; Practice-C.3). *(content: ethnicity, race, culture, risk and resilience, age, gender, components of critical thinking, information technology and electronic resources, steps in evidence based practice)*.
7. Apply knowledge of approach to assist individual with a specific problem(s) or syndrome(s). (CT/EBT-C.1; Practice-C.1, C.2, C.3). *(content: theories, case scenarios, conceptualization, problem identification, goal development, critical thinking, treatment strategies, skills and strategies for working with individuals with multiple problems, steps in evidenced based practice)*.
8. Describe ethical dilemmas that a social worker could encounter with using cognitive behavioral therapy (CT/EBT-C.1, Practice-C.1; Diversity-C.2; Value & Ethics-C.1, C.2,

C.3; Social Justice-C.2). (content: NASW code of ethics, framework for resolving ethical dilemmas, case scenarios, maintain appropriate boundaries, ethnicity, race, culture, age and gender, advocacy and social change strategies with and on behalf of client systems).

### **Required texts**

Ledley, D. R., P.Marx, B., & Heimberg, R. G. (2005). *Making Cognitive-Behavioral Therapy Work: Clinical Process for New Practitioners*. New York: The Guilford Press.

Ronen, T., & Freeman, A. (Eds.). (2007). *Cognitive Behavior Therapy in Clinical Social Work Practice*. New York: Springer.

### **Course Policies**

Students are expected to arrive on time, come to class prepared to discuss the assigned readings, and remain in class until the class period concludes. Regular attendance is essential given the purpose and design of this course. Class participation is expected and the instructor reserves the right to give some weight, positive or negative to classroom participation. In the case of a medical or personal emergency, the student is to make every effort to contact the instructor or the main office prior to missing a scheduled class meeting. I may be reached at any time via e-mail or a message left at my office should this situation occur.

Incompletes will be given only according to the rules specified in the University of Tennessee Catalog. Please refer to the catalog for additional information.

University policy regarding religious holidays will be observed. As stated in the UT student handbook, any student may request to be excused from class to observe a religious day according to her/his faith.

### **Course Requirements and Grading**

The course grade will be determined on the basis of grades earned in 8 online quizzes, a written functional behavioral assessment, class participation, and a personal change project.

Quizzes	30%
Case conceptualization	10%
Personal change project	30%
Class participation	10%
Functional Behavioral Assessment	20%

*Quiz #1:* This quiz covers the theoretical basis of cognitive behavioral therapy, its empirical roots, and the basic components of a CBT assessment.

*Quiz #2:* This quiz covers the development of case conceptualizations and functional behavioral assessments.

*Quiz #3:* The quiz focuses on the structure of the therapy session and cognitive techniques, such as cognitive restructuring, to identify, elicit and restructure automatic thoughts.

*Quiz #4:* This quiz focuses on intermediate and core beliefs.

*Quiz #5:* The quiz focuses on behavioral interventions that can be delivered to clients to address such mental health concerns as panic and phobias. This quiz also addresses social work ethics in applying CBT.

*Quiz #6:* This quiz focuses on the CBT treatment package for anger.

*Quiz #7:* This quiz focuses on the development and application of treatment plans through the use of the evidence-based practice process.

*Quiz #8:* This quiz focuses on the CBT treatment package for depressive disorders and anxiety disorders.

*Case conceptualization:* As emphasized in the early meetings of this course, the ability to form an accurate and comprehensive case conceptualization is critical to conducting good cognitive-behavioral therapy. Using the methods described in the first few classes, please select one of your current or past clinical cases and write up your conceptualization of this case. In general, this short paper will answer the following question: What do you think is going on with this person, and why? If you have not seen any clients yet, you may see me for a sample case, or you may choose a sample case from fiction (e.g., TV show, movie, book) or nonfiction (e.g., news story) sources.

*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.

*Class Participation:* Most class sessions will be divided into a lecture/discussion and laboratory component. Each week students will have the opportunity to strengthen their therapeutic skills utilizing CBT techniques with their classmates. Peer feedback is strongly encouraged. The laboratory component will consist of role-plays, reenactments, in-vivo supervision, and class discussions. All students are expected to participate fully in the laboratory experience.

*Functional Behavioral Assessment:* Students will be provided with a case study describing a student who has been identified as having emotional disturbances in the public school system. Students will integrate critical thinking skills, the EBP process, and the ecological model to develop a multidimensional assessment that will assist in the collaborative development of an effective plan of action.

## **Grading**

A = (95-100) Outstanding/Superior. Exceptional performance. Consistently exceeds expectations.

B+ = (90-94) Very Good. Student consistently meets, and occasionally exceeds, normal expectations for the course.

B = (85-89) Good. Student consistently meets normal expectations for the course.

C+ = (80-84) Average. There is unevenness in grasping course content. Student is inconsistent in meeting normal expectations for the course.

C = (70-76) Poor. There is lack of understanding of course content. Student does not meet course expectations.

F = (69-Below) Very Poor. There is a lack of attendance or incomplete assignments. Course expectations are not met.

## **Course Outline**

<b>Date</b>	<b>Topic/Assigned readings</b>
-------------	--------------------------------

1/8	Introduction to the course Overview of Cognitive Behavioral Theory
-----	---

1/15	Introduction to Cognitive Behavioral Therapy <i>Readings:</i> Ledley, Marx & Heimberg Chapter 1: Introducing Cognitive-Behavioral Process Ronen & Freeman Part I, Chapter 1: Clinical Social Work and Its Commonalities with Cognitive Behavior Therapy
------	---

1/22	Functional Behavioral Assessment (FBA) <i>Readings:</i> Ledley, Marx & Heimberg Chapters 2-3: Initial Interactions with Clients; The Process of Assessment Ronen & Freeman Part I, Chapter 4: Critical Thinking, Evidence-based Practice, and Cognitive Behavior Therapy: Choices Ahead Ronen & Freeman Part III, Chapter 12: Social Work Practice in the Schools
------	--

### **Quiz # 1**

1/29	Case conceptualization <i>Readings:</i> Ledley, Marx & Heimberg Chapters 4-5: Conceptualizing the Case and Planning Treatment; Giving Feedback to Clients and Writing the Assessment Report Ronen & Freeman Part II: Cultural Diversity and Cognitive Behavior Therapy
------	--

### **Quiz #2/Functional Behavioral Assessment due**

2/5 Treatment plans

*Readings:* Ledley, Marx & Heimberg Chapters 6-7: Starting the Cognitive-Behavioral Treatment Process; Dealing with Initial Challenges in Cognitive-Behavioral Therapy  
Ronen & Freeman Part I, Chapter 5: Developmental Factors for Consideration in Assessment and Treatment

### **Case conceptualization due**

2/12 Identifying, evaluating, and responding to automatic thoughts

*Readings:* Ledley, Marx & Heimberg Chapters 8-9: The Next Sessions: Teaching the Core Techniques; Managing Client Noncompliance in Cognitive-Behavioral Therapy  
Beck, J. S. (1995). *Cognitive Therapy: Basics and Beyond*. New York: The Guilford Press.

### **Quiz # 3**

2/19 Identifying and Modifying Intermediate and Core Beliefs

*Readings:* Ledley, Marx & Heimberg Chapters 10-11: Terminating Therapy; The Process of Supervision  
Beck, J. S. (1995). *Cognitive Therapy: Basics and Beyond*. New York: The Guilford Press.

### **Quiz # 4**

2/26 The behavioral component: Classical conditioning, Operant conditioning, and Modeling/Observational learning

### **Quiz #5**

3/5 A CBT intervention for anger

*Readings:* Beck, R., & Fernandez, E. (1998). Cognitive-Behavioral Therapy in the Treatment of Anger: A Meta-Analysis. *Cognitive Therapy and Research*, 22(1), 63-74.  
L.Taylor, J. (2002). Cognitive-Behavioural Treatment of Anger Intensity among Offenders with Intellectual Disabilities. *Journal of Applied Research in Intellectual Disabilities*, 15, 151-165.

3/12 Suicide risk assessment (ONLINE class meeting)

*Readings:* Ronen & Freeman Part V, Chapter 19: Treatment of Suicidal Behavior

### **Quiz #6**

3/19 Spring Break – No Class

3/26 The Cognitive/Behavioral treatment of depression

*Readings:* Ronen & Freeman Part V, Chapter 18: Depression and Suicidal Behavior: A Cognitive Behavior Therapy Approach for Social Workers  
Carrington, C. H. (2006). Clinical Depression in African American Women: Diagnoses, Treatment, and Research. *Journal of Clinical Psychology, 62*(7), 779-791.  
Persons, J. B., Burns, D. D., Perloff, J. M., & Miranda, J. (1993). Relationships Between Symptoms of Depression and Anxiety and Dysfunctional Beliefs About Achievement and Attachment. *Journal of Abnormal Psychology, 102*(4), 518-524.

### **Quiz #7**

4/2                    The Cognitive/Behavioral treatment of anxiety disorders  
*Readings:* Lam, R. (2006, September). Challenges in the treatment of anxiety disorders: beyond guidelines. *International Journal of Psychiatry in Clinical Practice, 10*, 18-24.  
Ronen & Freeman Part V, Chapter 17: Cognitive Behavior Therapy for Anxiety Disorders

4/9                    The Cognitive/Behavioral treatment of anxiety disorders  
*Readings:* Wenzel, A., Sharp, I., Brown, G., Greenberg, R., & Beck, A. (2006, June). Dysfunctional beliefs in panic disorder: The Panic Belief Inventory. *Behaviour Research & Therapy, 44*(6), 819-833.  
Walser, R. D., Rusek, J. I., Naugle, A. E., Padesky, C., Ronell, D. M., & Ruggiero, K. (2004). Disaster and Terrorism: Cognitive-Behavioral Interventions. *Prehospital and Disaster Medicine, 19*(1), 54-63.

### **Quiz #8**

4/16                    The Cognitive/Behavioral treatment of challenging diagnoses  
*Readings:* Ronen & Freeman Part V, Chapter 24: Eating Disorders  
Swales, M., Heard, H. L., & Williams, J. M. G. (2000). Linehan's Dialectical Behaviour Therapy (DBT) for borderline personality disorder: Overview and Adaptation. *Journal of Mental Health, 9*(1), 7-23.  
Kelly, P. J., Deane, F. P., Kazantzis, N., & Crowe, T. P. (2007). Case Managers' Attitudes Toward the Use of Homework for People Diagnosed With a Severe Psychiatric Disability. *Rehabilitation Counseling Bulletin, 51*(1), 34-43.

### **Personal Change Projects Due**

4/23                    The Cognitive/Behavioral treatment for insomnia