**Social Work 544**

**Clinical Social Work Practice with Individuals, Families, & Groups**

**Three Units**

# Instructor: Aimee Odette, DSW Course Day: Wednesday

**E-Mail: aodette@usc.edu**   **Course Time: 4-5:15pm PST (67032)**

 **5:45-7pm PST (67033)**

**Telephone: (941) 720-7955** **Office Hours:** **3-4pm PST Wednesdays**

# I. Course Prerequisites

Clinical Social Work Practice with Individuals, Families, & Groups (SOWK 544) is built upon a liberal arts undergraduate foundation. First-year students are expected to have, and be able to draw upon, basic knowledge and theory found in various social science disciplines including psychology, sociology, anthropology, and biology.

# Catalogue Description

Principles underlying generic social work practice with emphasis on working with individuals, families, and groups.

#  Course Description

Given the complex and diverse urban/rural environments in which social workers practice and the diverse situations in which they intervene, a generalist social work education offers the best foundation for effective social work practice. SOWK 544 is designed to educate and prepare generalist social workers with the knowledge and skills needed to assess the person-in-environment (PIE) configuration and decide which system(s)―individuals, families, groups, communities, and/or organizations―are most appropriate for the focus of work and service provision.

Clinical Social Work Practice with Individuals, Families, & Groups (SOWK 544) introduces generalist social work principles emphasizing a systems perspective, the continuum of service delivery levels and modalities, and a commitment to underserved and vulnerable populations. In addition, knowledge of professional identity, the profession’s ethical standards, and the ethical dilemmas that occur as social work values and professional ethics are operationalized in practice.

The course takes a sequenced approach to teaching basic practice skills; students are exposed simultaneously to the theory, research and necessary skills required to work with individuals, families and groups in the engagement, assessment, intervention, termination, and evaluation phases of treatment. The person-in-environment and systems approach to practice are emphasized, highlighting the necessity for multilevel intervention. The importance of research to social work practice is introduced as it applies to the understanding of client problems and the choice and effectiveness of interventions.

# Course Objectives

Clinical Social Work Practice with Individuals, Families, & Groups (SOWK 544) will:

| **Objective #** | **Objectives** |
| --- | --- |
| 1 | Teach professional identity and ethical standards and practices of professional social work. Provide an environment that encourages students to explore how their particular gender identity, age, religion, ethnicity, social class, and sexual orientation (sexual identity) influence their ethics and how these variables may affect their understanding, empathy, and ethical decision making in practice. |
| 2 | Provide opportunities for students to increase awareness of individual needs that diverse populations (gender, race, sexual orientation, social class, religion, and vulnerable and oppressed groups) present and which require appropriately matched effective services.  |
| 3 | Demonstrate the importance of the role of theory, empirical research, and evidence-based intervention as they apply to social work practice. The principles of evidence-based practice will be presented and students will have opportunity to apply the principles to clinical case studies. |
| 4 | Present foundation materials on the complex nature and scope of generalist social work practice, including the varied tasks and roles that social workers undertake as effective change agents. Emphasis will be placed on the importance of a systems paradigm and person-in-environment framework, both of which show the interaction among the biological, psychological, social, and cultural systems.  |
| 5 | Demonstrate major concepts to support the treatment process (engagement, assessment, planning and contracting, implementation, and termination/evaluation phases). Provide students with commonly applied models of practice and experiential activities to practice clinical skills. |

# Course Format/Instructional Methods

The format of the course will consist of didactic instruction and experiential exercises. Case vignettes, videos, and role plays will also be used to facilitate the students’ learning. These exercises may include the use of videotapes, role-play, or structured small-group exercises. Material from the field will be used to illustrate class content and to provide integration between class and field. Confidentiality of material shared in class will be maintained. As class discussion is an integral part of the learning process, students are expected to come to class ready to discuss required reading and its application to theory, research, and practice.

# Student Learning Outcomes

The following table lists the nine Social Work core competencies as defined by the Council on Social Work Education’s 2015 Educational Policy and Accreditation Standards:

|  |
| --- |
| **Social Work Core Competencies** |
| 1 | **Demonstrate Ethical and Professional Behavior\*** |
| 2 | **Engage in Diversity and Difference in Practice\*** |
| 3 | **Advance Human Rights and Social, Economic, and Environmental Justice** |
| 4 | **Engage in Practice-informed Research and Research-informed Practice** |
| 5 | **Engage in Policy Practice** |
| 6 | **Engage with Individuals, Families, Groups, Organizations, and Communities\*** |
| 7 | **Assess Individuals, Families, Groups, Organizations, and Communities\*** |
| 8 | **Intervene with Individuals, Families, Groups, Organizations, and Communities\*** |
| 9 | **Evaluate Practice with Individuals, Families, Groups, Organizations and Communities** |

 \* Highlighted in this course

The following table shows the competencies highlighted in this course, the related course objectives, student learning outcomes, and dimensions of each competency measured. The final column provides the location of course content related to the competency.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| **Competency 1**: **Demonstrate Ethical and Professional Behavior**Social workers understand the value base of the profession and its ethical standards, as well as relevant laws and regulations that may impact practice at the micro, mezzo, and macro levels. Social workers understand frameworks of ethical decision-making and how to apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize personal values and the distinction between personal and professional values. They also understand how their personal experiences and affective reactions influence their professional judgment and behavior. Social workers understand the profession’s history, its mission, and the roles and responsibilities of the profession. Social Workers also understand the role of other professions when engaged in inter-professional teams. Social workers recognize the importance of life-long learning and are committed to continually updating their skills to ensure they are relevant and effective. Social workers also understand emerging forms of technology and the ethical use of technology in social work practice. | **1.** Teach professional identity and ethical standards and practices of professional social work. Provide an environment that encourages students to explore how their particular gender identity, age, religion, ethnicity, social class, and sexual orientation (sexual identity) influence their ethics and how these variables may affect their understanding, empathy, and ethical decision making in practice. | **1a.** Makes ethical decisions by applying the standards of the NASW Code of Ethics, relevant laws and regulations, models for ethical decision-making, ethical conduct of research, and additional codes of ethics as appropriate to context.**1b.** Uses reflection and self-regulation to manage personal values and maintain professionalism in practice situations.**1e.** Uses supervision and consultation to guide professional judgment and behavior. | Values, Cognitive and Affective Processes | **Unit 1:** Overview of Social Work Profession, Professional Identity, Values and Ethics, and Social Diversity.**Unit 4:** Biopsychosocial Assessment: Overview and Essential Components**Unit 5:** Assessment with Individuals**Unit 15:** Termination, Evaluation, and follow up**Assignment 1:** Engagement Strategy**Assignment 2**: Family of Origin Assessment**Assignment 3:** Understanding and Applying Evidence Based Interventions **Class Participation** |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| **Competency 2**: **Engage Diversity and Difference in Practice**Social workers understand how diversity and difference characterize and shape the human experience and are critical to the formation of identity. The dimensions of diversity are understood as the intersectionality of multiple factors including but not limited to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. Social workers understand that, as a consequence of difference, a person’s life experiences may include oppression, poverty, marginalization, and alienation as well as privilege, power, and acclaim. Social workers also understand the forms and mechanisms of oppression and discrimination and recognize the extent to which a culture’s structures and values, including social, economic, political, and cultural exclusions, may oppress, marginalize, alienate, or create privilege and power. | **2.** Provide opportunities for students to increase awareness of individual needs that diverse populations (gender, race, sexual orientation, social class, religion, and vulnerable and oppressed groups) present and which require appropriately matched effective services. | **2b.** Presents her/himself as a learner and engages clients and constituencies as experts of their own experiences. | Skills | **Unit 1:** Overview of Social Work Profession, Professional Identity, Values and Ethics, and Social Diversity**Unit 2:** Understanding Individuals: Diversity, Adversity, and Empathy**Unit 4:** Assessment: Biopsychosocial Assessment – Overview and Essential Components**Unit 12:** Practice with Groups and Stages of Development**Unit 13:** Facilitation Strategies and Leadership Roles in Groups**Assignment 1:** Engagement Strategy**Assignment 2:** Family of Origin Assessment**Assignment 3:** Understanding and Applying Evidence Based Interventions **Class Participation** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| **Competency 6**: **Engage with Individuals, Families, Groups, Organizations, and Communities**Social workers understand that engagement is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers value the importance of human relationships. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand strategies to engage diverse clients and constituencies to advance practice effectiveness. Social workers understand how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies. Social workers value principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals as appropriate. | **3.** Demonstrate the importance of the role of theory, empirical research, and evidence-based intervention as they apply to social work practice. The principles of evidence-based practice will be presented and students will have opportunity to apply the principles to clinical case studies. | **6b.** Uses empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies. | Cognitive and Affective Processes | **Unit 2:** Understanding Individuals: Diversity, Adversity, and Empathy**Unit 3:** Initial Phase of Treatment: Engagement and Rapport Building with Individuals and Families**Unit 4:** Assessment: Biopsychosocial Assessment – Overview and Essential Components**Unit 5:** Assessment with Individuals**Unit 6:** Assessment with Families**Unit 7:** Assessment with High-Risk Clients**Unit 8:** Treatment Planning**Unit 9:** Solution-Focused Therapy with Individuals and Families**Unit 10:** Introduction to Evidence-Based Short-Term Treatment Models**Unit 11:** Introduction to Group Treatment**Unit 12:** Practice with Groups and Stages of Development**Unit 13:** Facilitation Strategies and Leadership Roles in Groups**Unit 14:** Group Types**Unit 15:** Termination and Evaluation**Assignment 1:** Engagement Strategy Paper**Assignment 2:** Family of Origin Assessment**Assignment 3:** Understanding and Applying Evidence Based Interventions **Class Participation** |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| **Competency 7**: **Assess Individuals, Families, Groups, Organizations, and Communities**Social workers understand that assessment is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the assessment of diverse clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand methods of assessment with diverse clients and constituencies to advance practice effectiveness. Social workers recognize the implications of the larger practice context in the assessment process and value the importance of inter-professional collaboration in this process. Social workers understand how their personal experiences and affective reactions may affect their assessment and decision-making. | **4.** Present foundation materials on the complex nature and scope of generalist social work practice, including the varied tasks and roles that social workers undertake as effective change agents. Emphasis will be placed on the importance of a systems paradigm and person-in-environment framework, both of which show the interaction among the biological, psychological, social, and cultural systems. | **7c.** Develops mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies. | Skills, Cognitive and Affective Processes | **Unit 4:** Assessment: Biopsychosocial Assessment – Overview and Essential Components**Unit 5:** Assessment with Individuals**Unit 6:** Assessment with Families**Unit 7:** Assessment with High-Risk Clients**Unit 8:** Treatment Planning**Unit 9:** Solution-Focused Therapy with Individuals and Families**Unit 10:** Introduction to Evidence-Based Short-Term Treatment Models**Unit 11:** Introduction to Group Treatment**Unit 12:** Practice with Groups and Stages of Development**Assignment 1:** Engagement Strategy**Assignment 2:** Family of Origin Assessment**Assignment 3:** Understanding and Applying Evidence Based Interventions**Class Participation** |
| **7d.** Selects appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies. | Knowledge, Cognitive and Affective Processes |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| **Competency 8**: **Intervene with Individuals, Families, Groups, Organizations, and Communities**Social workers understand that intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers are knowledgeable about evidence-informed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to effectively intervene with clients and constituencies. Social workers understand methods of identifying, analyzing and implementing evidence-informed interventions to achieve client and constituency goals. Social workers value the importance of inter-professional teamwork and communication in interventions, recognizing that beneficial outcomes may require interdisciplinary, inter-professional, and inter-organizational collaboration. | **5.** Demonstrate major concepts to support the treatment process (engagement, assessment, planning and contracting, implementation, and termination/evaluation phases). Provide students with commonly applied models of practice and experiential activities to practice clinical skills. | **8a.** Critically chooses and implements interventions to achieve practice goals and enhances capacities of clients and constituencies. | Knowledge, Skills, Cognitive and Affective Processes | **Unit 8:** Treatment Planning**Unit 9:** Solution-Focused Therapy with Individuals and Families**Unit 10:** Introduction to Evidence-Based Short-Term Treatment Models**Unit 11:** Introduction to Group Treatment**Unit 12:** Practice with Groups and Stages of Development**Unit 13:** Facilitation Strategies and Leadership Roles in Groups**Unit 14:** Group Types**Unit 15:** Termination and Evaluation**Assignment 3:** Understanding and Applying Evidence Based Interventions**Class Participation** |
| **8e.** Facilitates effective transitions and endings that advance mutually agreed-on goals | Skills |

# Course Assignments, Due Dates, and Grading

| **Assignment** | **Due Date** | **% of Final Grade** |
| --- | --- | --- |
| **Assignment 1: Engagement Strategy** | Unit 5 | 25% |
| **Assignment 2: Family of Origin Assessment** | Unit 9 |  35% |
| **Assignment 3: Understand & Apply EBIs** | Unit 15 |  30% |
| **Participation** | All semester |  10% |

A brief description of each assignment is next, full assignment details are located toward the end of the syllabus.

## Assignment 1: Engagement Strategy Paper. Due: the day of live session for Unit 5.

## This assignment will focus on examining engagement strategies with clients. Each student will prepare engagement strategies in response to one of the two vignettes provided. Students will be graded on their ability to describe appropriate engagement strategies focusing on cultural values, beliefs, and behaviors that are described in the literature as related to the vignettes. Concepts must be supported by professional literature. The vignettes will be provided by your professor and are separate from the Acevedo vignette and the VFP case of Mario. A follow-up reflective paper is also part of this assignment. (see assignment details). *This assignment relates to student learning outcomes 1, 2, 6.*

## Assignment 2: Family of Origin Assessment. Due: the day of Unit 9.

## The family assignment for this course will consist of a paper where you will apply theoretical and empirical knowledge to your family of origin. There are three parts to this assignment: Genogram, Family of Origin Paper, and an Infographic. This assignment will require you to: develop an analysis of your family that includes intergenerational patterns and family structure as described in the Hepworth reading (see assignment instructions section).

## *This assignment relates to student learning outcomes 1, 2, 6, and 7.*

## Assignment 3: Understanding and Applying Evidence Based Interventions (EBI) Due: the day of live session for Unit 15.

## This is a group assignment and will have two parts. Section one includes the identification and discussion of an issue or theme and the research related to the chosen issue. Section two will include a discussion of an evidence based intervention appropriate to treat those who are experiencing the identified issue or theme. *This assignment relates to student learning outcomes 1, 2, 3, 4, 6, and 7.*

**Class Participation (10% of Course Grade)**

It is expected that students will attend class regularly, participate in the class discussions, and submit work promptly. Failure to meet these expectations may result in reduction in grades. Your involvement in this class is considered essential to your growth as a practitioner. You will be asked to discuss the material assigned, participate in role-playing, exercises, etc. Knowing the "right" answers is not nearly as important as being willing to risk, explore your ideas, and be open to new information and ideas. Your presence in class along with preparation by having read and considered the assignments, and participation in discussion is essential. Participation on a course website, if developed, also constitutes meaningful class participation.

## Guidelines for Evaluating Class Participation

**10: Outstanding Contributor:** Contributions in class reflect exceptional preparation and participation is substantial. Ideas offered are always substantive, provides one or more major insights as well as direction for the class. Application to cases held is on target and on topic. Challenges are well substantiated, persuasively presented, and presented with excellent comportment. If this person were not a member of the class, the quality of discussion would be diminished markedly. Exemplary behavior in experiential exercises demonstrating on target behavior in role plays, small-group discussions, and other activities.

**9: Very Good Contributor:** Contributions in class reflect thorough preparation and frequency in participation is high. Ideas offered are usually substantive, provide good insights and sometimes direction for the class. Application to cases held is usually on target and on topic. Challenges are well substantiated, often persuasive, and presented with excellent comportment. If this person were not a member of the class, the quality of discussion would be diminished. Good activity in experiential exercises demonstrating behavior that is usually on target in role plays, small-group discussions, and other activities.

**8: Good Contributor:** Contributions in class reflect solid preparation. Ideas offered are usually substantive and participation is very regular, provides generally useful insights but seldom offer a new direction for the discussion. Sometimes provides application of class material to cases held. Challenges are sometimes presented, fairly well substantiated, and are sometimes persuasive with good comportment. If this person were not a member of the class, the quality of discussion would be diminished somewhat. Behavior in experiential exercises demonstrates good understanding of methods in role plays, small-group discussions, and other activities.

**7: Adequate Contributor:** Contributions in class reflect some preparation. Ideas offered are somewhat substantive, provides some insights but seldom offers a new direction for the discussion. Participation is somewhat regular. Challenges are sometimes presented, and are sometimes persuasive with adequate comportment. If this person were not a member of the class, the quality of discussion would be diminished slightly. Occasionally applies class content to cases. Behavior in experiential exercises is occasionally sporadically on target demonstrating uneven understanding of methods in role plays, small-group discussions, and other activities.

**6: Inadequate:** This person says little in class. Hence, there is not an adequate basis for evaluation. If this person were not a member of the class, the quality of discussion would not be changed. Does not participate actively in exercises but sits almost silently and does not ever present material to the class from exercises. Does not appear to be engaged.

**5: Nonparticipant:** Attends class only.

**0: Unsatisfactory Contributor:** Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive; provides few if any insights and never a constructive direction for the class. Integrative comments and effective challenges are absent. Comportment is negative. If this person were not a member of the class, valuable air-time would be saved. Is unable to perform exercises and detracts from the experience.

Class grades will be based on the following:

| **Class Grades** | **Final Grade** |
| --- | --- |
| 3.85–4.00 | A |  93–100 | A |
| 3.60–3.84 | A– | 90–92 | A– |
| 3.25–3.59 | B+ | 87–89 | B+ |
| 2.90–3.24 | B | 83–86 | B |
| 2.60–2.89 | B– | 80–82 | B– |
| 2.25–2.59 | C+ | 77–79 | C+ |
| 1.90–2.24 | C | 73–76 | C |
|   |   | 70–72 | C– |

Within the USC Suzanne Dworak-Peck School of Social Work, grades are determined in each class based on the following standards which have been established by the faculty of the School: (1) Grades of A or A- are reserved for student work which not only demonstrates very good mastery of content but which also shows that the student has undertaken a complex task, has applied critical thinking skills to the assignment, and/or has demonstrated creativity in her or his approach to the assignment.  The difference between these two grades would be determined by the degree to which these skills have been demonstrated by the student.  (2)  A grade of B+ will be given to work which is judged to be very good.  This grade denotes that a student has demonstrated a more-than-competent understanding of the material being tested in the assignment.  (3)  A grade of B will be given to student work which meets the basic requirements of the assignment.  It denotes that the student has done adequate work on the assignment and meets basic course expectations.  (4)  A grade of B- will denote that a student’s performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations.  (5) A grade of C would reflect a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement.  (6)  Grades between C- and F will be applied to denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student’s performance on the assignment.

As a professional school, class attendance and participation is an essential part of your professional training and development at the USC Suzanne Dworak-Peck School of Social Work. You are expected to attend all classes and meaningfully participate. For Ground courses,having more than 2 unexcused absences in class may result in the lowering of your grade by a half grade.  Additional absences can result in additional deductions. For VAC courses, meaningful participation requires active engagement in class discussions and maintaining an active screen. Having more than two unexcused absences in class may result in the lowering of your grade by a half grade. Additional absences in the live class can result in additional deductions. Furthermore, unless directed by your course instructor, you are expected to complete all asynchronous content and activities prior to the scheduled live class discussion. Failure to complete two asynchronous units before the live class without prior permission may also lower your final grade by a half grade. Not completing additional units can result in additional deductions.

To support your learning as a graduate writer, this course offers one time re-writes for a paper that receives a 79% or less. The re-write option is only available one time per semester, and your instructor must be notified within one week of returning paper grades for the assignment you wish you rewrite. If a student requests a rewrite, the instructor will decide the new deadline (often to be re-submitted within one week). All rewrites will be regraded, with the best possible score being 82%.

# Required and Supplementary Instructional Materials and Resources

## On Reserve

All required readings are available online through electronic reserve (ARES) (**under instructor name David Bringhurst**).

***DSM-5*:** The DSM-5 is available online through the library’s subscription using the link below.

 **URL:** <https://libproxy.usc.edu/login?url=http://www.psychiatryonline.org/>

You’ll be asked to log in using your USC ID and password. Once you’re on the page, click on the link titled “Explore the new edition” to access the content.

Here’s a screenshot of what the page looks like: <http://screencast.com/t/cPoq2jSd>

**USC Suzanne Dworak-Peck School of Social Work *Student Caucuses and Interest Groups:*** <https://dworakpeck.usc.edu/student-life/student-organization/student-caucuses-and-interest-groups>

**544 Course Overview-Wednesdays (67032 & 67033)**

| **Unit** | **Topics** |
| --- | --- |
| **1****(8/26)** | * **Overview of Social Work Profession, Professional Identity, Values and Ethics, and Social Diversity**
 |
| **2****(9/2)** | * **Understanding and Engaging Individuals: Diversity, Adversity, and Empathy**
 |
| **3****(9/9)** | * **Initial Phase of Treatment: Engagement and Rapport Building with Individuals and Families**
 |
| **4****(9/16)** | * **Assessment: Bio-psycho-social Assessment – Overview and Essential Components**
 |
| **5****(9/23)** | * **Assessment Individuals (Assignment #1 Due)**
 |
| **6****(9/30)** | * **Assessment Families**
 |
| **7****(10/7)** | * **Assessment with High Risk Clients**
 |
| **8****(10/14)** | * **Treatment Planning**
 |
| **9****(10/21)** | * **Solution Focused Therapy w/ Individuals & Families (Assignment 2 Due)**
 |
| **10****(10/28)** | * **Short Term Evidence-Based Interventions**
 |
| **11****(11/4)** | * **Introduction to Group Treatment**
 |
| **12****(11/11)** | * **The pre-group interview and Stages of Group Dynamics**
 |
| **13****(11/18)** | * **Facilitation Strategies and Leadership Roles in Groups**
 |
| **14****(11/25)** | * **Working Phases of Group and Group Types**
 |
| **15****(12/2)** | * **Termination, Evaluation, and Follow-up (Assignment 3 Due)**
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**Course Schedule―Detailed Description**

| **Unit 1: Overview of Social Work Profession, Professional Identity, and Values and Ethics, and Social Diversity** |  |
| --- | --- |
| **Topics**  |
| * Overview of social work practice: a generalist social work model
* Roles of social workers
* Overview of engagement, assessment, intervention, and evaluation
* The value and ethics of the profession (including the NASW Code of Ethics); a focus on diversity and acceptance
 |

**REQUIRED:**

Cameron, M. & King Keegan, E. (2010). The common factors model: Implications for transtheoretical clinical social work practice. *Social Work, 55*, 63-73.

National Association of Social Workers (NASW). (n.d.). *Code of ethics*. Retrieved from <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>\*\*\*CROSSOVER READING\*\*\*

Reamer, F. G. (2013). Social work values. In F. G. Reamer *Social work values and ethics, 4th ed.* (pp. 1-12). Columbia University Press.

**RECOMMENDED:**

Jackson, E., & Samuels, G. (2011). Multiracial competence in social work: Recommendations for culturally attuned work with multiracial people. *Social Work, 56*(3), 235-245.

Ives, N.G. & Thaweiakenrat Loft, M. (2013). Building bridges with indigenous communities through social work education. In Gray, M., Coates, J., Yellow Bird, M., & Hetherington, T (Eds), *Decolonizing Social Work*. (p. 239-255).

| **Unit 2: Understanding Individuals: Diversity, Adversity, and Empathy**  |  |
| --- | --- |
| **Topics** * Race, class, orientation, identity / Racism, discrimination, subjugation, heteronormativity
* Adverse Childhood Experiences (ACEs)
* Engagement
* Empathy
* Confidentiality and mandated reporting: legal and ethical
 |

**REQUIRED:**

Bowleg, L. (2012). The problem with the phrase *women and minorities*: Intersectionality – an important theoretical framework for public health. *American Journal of Public Health, 102*, 1267-1273.

Larkin, H., Felitti, V. J., & Anda, R. F. (2014). Social work and Adverse Childhood Experiences research: Implications for practice and health policy. *Social Work in Public Health, 29*, 1-16.

Reamer, F. G. (2013). Social work in a digital age: Ethical and risk management challenges. *Social Work, 58*(2), 163-172.

**RECOMMENDED:**

Coates, J. (2013). Ecospiritual approaches: A path to decolonizing social work. In M. Gray, J. Coates, M. Yellow Bird, & T. Hetherington (Eds), *Decolonizing Social Work* (pp. 63-86). Routledge

| **Unit 3: Initial Phase of Treatment: Engagement and Rapport Building**  |  |
| --- | --- |
| **Topics**  |
| * Critical understanding of engagement, assessment, treatment, intervention through a person-in-environment perspective
* Building the relationship: engagement, exploration, empathy, acceptance
* Overcoming barriers
* Transference and countertransference
* Transtheoretical Model/Stages of Change
 |

**REQUIRED:**

Birkenmaier, J., Berg-Weger, M., & Dewees, M. P. (2013). Individual engagement. *The practice of generalist social work, 3rd ed.* (pp. 67- 97). Routledge.

Gerdes, K., & Segal, E. (2011). Importance of empathy for social work practice: integrating new science. *Social Work, 56*(2), 141-148. \*\*\*CROSSOVER READING\*\*\*

Bodenheimer, D. (2015, November 2). *Becoming a clinical social worker: Interview with Dr. Danna Bodenheimer* [Audio podcast]. Retrieved from http://socialworkpodcast.blogspot.com/2015/11/Bodenheimer.html

### RECOMMENDED:

Miller, W. R. & Rolnick, S. (2009). Ten things that motivational interviewing is not. *Behavioural and Cognitive Psychotherapy, 37*, 129-140.

Staudt, M., Lodato, G., & Hickman, C.R. (2012). Therapists talk about the engagement process. *Community Mental Health*, 48, 212-218.

| **Unit 4: Biopsychosocial Assessment: Overview and Essential Components**  |  |
| --- | --- |
| **Topics** |
| * What is assessment?
* Overview of Biopsychosocial assessment tools
 |

**REQUIRED:**

Milner, J., Myers, S., & O'Byrne, P. (2015). Assessment in the 21st century. In *Assessment in social work* (pp. 3-21). Palgrave Macmillan.

Southwick, S., & Charney, D. (2012). Chapter 1: What is resilience?. In *Resilience: The science of mastering life's greatest challenges* (pp. 1-20). Cambridge University Press. doi:10.1017/CBO9781139013857

**RECOMMENDED:**

Evans-Campbell, T. (2008). Historical trauma in American Indian/Native Alaska communities: A multilevel framework for exploring impacts on individuals, families, and communities. *Journal of Interpersonal Violence*, 23(3), 316-338. <http://dx.doi.org/>10.1177/0886260507312290

| **Unit 5: Assessment with Individuals** | **ASSIGNMENT #1 DUE** |
| --- | --- |
| **Topics**  |
| * Strengths-based perspective and assessment
* Life span perspective assessment
* Ecomaps
 |

**REQUIRED:**

Graybeal, C. (2001). Strengths-based social work assessment: Transforming the dominant paradigm.*Families in Society, 82*(3), 233-242. Retrieved from http://libproxy.usc.edu/login?url=http://search.proquest.com/docview/230159365?accountid=14749

Singer, J. B. (Host). (2009, October 10). Prochaska and DiClemente's Stages of Change Model for social workers [Episode 53]. Social Work Podcast. Podcast Retrieved <http://socialworkpodcast.com/2009/10/prochaska-and-diclementes-stages-of.html>

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2013). An overview of the interview process. In *Clinical interviewing, 5th ed.* (pp.171-205). John Wiley & Sons Inc.

**RECOMMENDED:**

Hodge, D. R. (2005). Spiritual Ecograms: A new assessment instrument for identifying clients’ strengths in space and across time. *Families in Society, 86*(2), 287-296.

Graybeal, C. (2001). Strengths-based social work assessment: Transforming the dominant paradigm. *Families in Society, 82*(3), 233-242.

Lee, M. Y., Chan, C. & Ng, S-M. (2009). Systematic assessment: Everything is connected. In *Integrative social work practice* (pp. 51-82). Oxford University Press.

Prochaska, J. O., Norcross, J. C., DiClemente, C. C. (2013). Applying stages of change. *Psychotherapy in Australia*, *19*(2), 10-15.

| **Unit 6: Assessment with Families** |  |
| --- | --- |
| **Topics**  |
| * Family Assessment
* Intergenerational Assessment―Genogram
 |

**REQUIRED:**

Barker, P. & Chang, J. (2013). The family diagnostic interview. In *Basic family therapy* (6th ed., pp. 70-79). John Wiley & Sons.

Collins, D., Jordan, C., & Coleman, H. (2012). Chapter 3: Family systems. In *An introduction to family social work*, *4th edition* (pp. 68-99). Brooks/Cole.

Hepworth, D. H., Rooney, R. H., Dewberry Rooney, G., & Strom-Gottfried, K. (2010). Assessing family functioning in diverse family and cultural contexts. In *Direct social work practice, 9th edition* (pp. 251-292).Brooks Cole.

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2013). Interviewing in a diverse and multicultural world. In *Clinical interviewing, 5th ed.* (pp.365-397). John Wiley & Sons Inc.

**RECOMMENDED:**

Balaguer Dunn, A., & Levin, M. M. (2000). The Genogram: From diagnostics to mutual collaboration. *The Family Journal, 8*(3), 236-244.

Chavis, M. A. (2004). Genograms and African American families: Employing family strengths of spirituality, religion, and extended family network. *Michigan Family Review, 10*, 30-36.

Weiss, E. L., Coll, J. E., Gerbauer J. D., Simley,K., & Carillo, E. (2010). The military genogram: A Solution-Focused approach for resiliency building in service members and their families. *The Family Journal*, *18*(4), 395-406.

| **Unit 7: Assessment with High Risk Clients** |  |
| --- | --- |
| **Topics** |
| * Self-Injury
* Suicide, Homicide, Intimate Partner Violence, Child Abuse, and Elder Abuse
 |

**REQUIRED:**

Eastland, E. & Hess, S. (2015). Intimate Partner Violence. In E. M. P. Schott, & E. L. Weiss (Eds.), *Transformative social work practice* (pp. 271-282). Sage.

Singer, J. B. (2012, August 10). Non-suicidal self-injury (NSSI): Interview with Jennifer Muehlenkamp, Ph.D. [Episode 73]. Social Work Podcast. Podcast retrieved [http://www.socialworkpodcast.com/2012/08/non-suicidal-self-injury-nssi-interview.html](http://socialworkpodcast.blogspot.com/2012/08/non-suicidal-self-injury-nssi-interview.html)

Stone, F. (2015). The suicidal military client. In E.M.P. Schott, & E. L. Weiss (Eds.), *Transformative social work practice* (pp. 413-426). Sage.

| **Unit 8: Treatment Planning**  |  |
| --- | --- |
| **Topics**  |
| * Choosing intervention targets
* Worker’s intervention plan: outline
* The process of evidence-based practice
* Goals and contracting
* Case management
 |

**REQUIRED:**

Barker, P. & Chang, J. (2013). Establishing treatment goals. In *Basic family therapy, 6th ed.* (pp. 88-94). John Wiley & Sons.

Drisko, J. W. & Grady, M. D. (2012). The steps of evidence-based practice in clinical practice: An overview. In *Evidence-based practice in clinical social work* (pp. 31-53). Springer. \*\*\*CROSSOVER READING\*\*\*

Drisko, J. W. & Grady, M. D. (2012). Shared decision making with the client. In *Evidence-Based Practice in Clinical Social Work* (pp. 155-164). Springer.

| **Unit 9: Solution Focused Therapy with Individuals and Families** | **ASSIGNMENT #2 DUE** |
| --- | --- |
| **Topics**  |
| * Use of SFT with individuals
* Use of SFT with families
 |

**REQUIRED:**

Bannink, F. P. (2007). Solution-focused brief therapy. *Journal of Contemporary Psychotherapy, 37*, 87-94.

Boyd-Franklin, C. (2015). An update on strengths-based, solutions-focused brief therapy. *Health & Social Work*, *40*(2), 73-76.

Stith, M, Miller, M. S., Boyle, J., Swinton, J., Ratcliffe, G., & McCollum, E. (2012). Making a difference in making miracles: Common roadblocks to miracle question effectiveness. *Journal of Marital and Family Therapy*, *38*, 380-393.

| **Unit 10: Introduction to Evidence Based Short Term Treatment Models** |  |
| --- | --- |
| **Topics**  |
| * Introduction to brief therapies
* Examples of brief therapies (crisis intervention and mindfulness)
 |

**REQUIRED:**

Myer, R. A., & Conte, C. (2006). Assessment for crisis intervention. *Journal of Clinical Psychology: In Session, 62*, 959-970.

Turner, K. (2009). Mindfulness: The present moment in clinical social work. *Clinical Social Work Journal, 37*, 95-103.

| **Unit 11: Introduction to Group Treatment**  |  |
| --- | --- |
| **Topics**  |
| * Definitions of a group
* History of Group Psychotherapy in Social Work Practice
* Types of Groups: Homogenous vs. heterogeneous; open vs. closed
* Determining the need for a group
* Settings: Outpatient vs. Inpatient group therapy
 |

**REQUIRED:**

Birkenmaier, J., Berg-Weger, M., & Dewees, M. P. (2013). Social work practice with Groups: Engagement, assessment and planning. *The practice of generalist social work* (3rd ed., pp. 344- 354). Routledge.

MacNair-Semands, R. (2010). Preparing members to fully participate in group therapy. In MacNair-Semands (Ed.), *101 Interventions in group psychotherapy* (pp. 403-408). Routledge.

| **Unit 12: Practice with groups and stages of development** |  |
| --- | --- |
| **Topics**  |
| * Group composition: screening
* Assessing readiness for group
* Preparing group members
* Building rapport & Creating norms
* Setting the agenda
* Informed consent & Confidentiality
* Stages of group development
 |

**REQUIRED:**

Brown, A. & Mistry, T. (2005). Group work with ‘mixed membership’ groups: Issues of race and gender. *Social Work with Groups, 28*(3/4), 133-148. Originally published (1994) *Social Work with Groups, 17*(3), 5-21.

Olivier, C. (2009). Enhancing confidentiality within small groups: The experiences of AIDS service organizations. *Social Work with Groups*, *32*(4), 274-287

Tuckman, B. W., & Jensen, M. A. C. (1977). Stages of small-group development revisited. *Group & Organization Management*, *2*(4), 419-427. (Classic article)

| **Unit 13: Facilitation Strategies and Leadership Roles in Groups** |  |
| --- | --- |
| **Topics**  |
| * Leadership
* Multicultural Perspective in Group Work
* Dealing with conflict
* Therapeutic Factors in Group
* Mutual aid
 |

**REQUIRED:**

Chen, E. C., Kakkad, D., & Balzano, J. (2008). Multicultural competence and evidence‐based practice in group therapy. *Journal of Clinical Psychology*, *64*, 1261-1278.

Kotlyar, I., & Karakowsky, L. (2006). Leading conflict? Linkages between leader behaviors and group conflict. *Small Group Research*, *37*(4), 377-403.

| **Unit 14: Group Types** |  |
| --- | --- |
| **Topics**  |
| * What kind of group? Psychoeducation, Support, Therapeutic, Task.
 |

**REQUIRED:**

Yalom, I. & Lescz, M. (2005). The composition of therapy groups. *The theory and practice of group psychotherapy, 5th ed.* (pp. 259-280). Basic Books.

Zorzella, K. P. M., Muller, R. T., & Classen, C. C. (2014). Trauma group therapy: The role of attachment and therapeutic alliance. *International Journal of Group Psychotherapy, 64*(1), 25-47.

| **Unit 15: Termination, Evaluation, and Follow-Up** |  |
| --- | --- |
| **Topics**  |
| * Dealing with different forms of termination (planned, forced, premature)
* General Tasks of Termination
* Referral
* Efficacy of our work and outcome measurement
* Evaluating practice
* Ethical Issues in Evaluation
 |

**REQUIRED:**

Baker, L. R., Stephens, F., & Hitchcock, L. (2010). Social work practitioners and practice evaluation: How are we doing? *Journal of Human Behavior in the Social Environment*, *20*(8), 963-973.

Cameron, M. & King Keegan, E. (2010). The common factors model: Implications for transtheoretical clinical social work practice. *Social Work, 55*, 63-73. \*repeat of Unit #1\*

Knox, S., Adrians, N., Everson, E., Hess, S., Hill, C., & Crook-Lyon, R. (2011). Clients’ perspectives on therapy termination. *Psychotherapy Research*, *21*(2), 154-167.

**RECOMMENDED:**

Fieldsteel, N. D. (2005). When the therapist says goodbye. *International Journal of Group Psychotherapy*, *55*(2), 245-279.

Mangione, L., Forti, R., Iacuzzi, C. (2007). Ethics and endings in group psychotherapy: Saying Goodbye and saying it well. *International Journal of Group Psychotherapy, 57*(1), 25-40.

Patterson, J., Williams, L. Edwards, T.M., Chamow, L., Grauf-Grounds, C., Sprenkle, D.H. (2009). Getting Unstuck in Therapy. In *Essential Skills in Family Therapy (2nd ed.)* (pp. 217-240). Guilford.

Patterson, J., Williams, L. Edwards, T.M., Chamow, L., Grauf-Grounds, C., Sprenkle, D.H. (2009). Termination. In *Essential Skills in Family Therapy (2nd ed.)* (pp. 241-250). Guilford.

**Assignment #1: Engagement Strategy**

**(25% of final grade)**

This assignment is designed for you to apply culturally appropriate strategies to engage and build rapport with a challenging client case. Select one of the vignettes (to be provided by your professor) and then consider how you (whom the client is meeting for the very first time) will develop an engagement strategy. Support your engagement strategy with the assigned reading material in the syllabus.

When reading the vignette, think about the unique strengths and challenges the client presents and how you can use that knowledge to build rapport. Consider the cultural, spiritual, religious, filial, and intersectionality identities and characteristics that the client in the vignette displays, and apply your reading to understand the unique considerations for the case. **The strategy should focus on *engagement not interventions.***

**Please answer the following questions in your engagement strategies:**

1. What are the client’s strengths?
2. What are the major obstacle(s) to the client’s engagement in the intervention process?
3. What is your clinical countertransference in working with this client? Please use the first person tense for this section.
4. What does the literature/research say about engagement for a client like this?
5. Considering all your answers above, what are some specific things you will consider and do to give the client the best chance to engage in the treatment process?

**Academic Paper Guidelines**

Select **one** of the vignettes. The paper should be 4-6 pages in length (not counting the title page or reference list), double-spaced, with 1-inch margins on all sides, with 12 point Times New Roman font. Insert page numbers with the title page. Use subheadings (in bold font) to organize your paper. See APA Manual p. 62 for *levels of headings*. Do not restate the vignette or the questions in your paper, though you can identify the client as a heading, if desired. Throughout the paper, please provide conceptual and empirical evidence to support your intervention, **referencing a minimum of 4 scholarly works (at least 1 of those must be found outside of the 544 syllabus)**. The references found outside the syllabus should be bolded on the reference page. Use editorial referencing styles as specified in the APA Publication Manual 6th Edition (<http://apastyle.apa.org/>).

The title page should be formatted as follows:

 See next page

ENGAGEMENT STRATEGY 1

SOWK 544

Assignment #1: Engagement Strategy

[Student Name]

[Date]

[Course Instructor]

[University Name]

The evaluation of the paper will be based on whether you addressed all aspects of the assignment, the quality of your written work (graduate level writing, organization, flow, clarity, depth, mechanics of writing such as grammar, spelling, etc.), and the correct application of APA style. Avoid citing from only one source to support entire sections of your paper. Proofread and edit your work.

It is expected that students will be responsible for submitting their own work and not the work of other students. If you study with other students, be conscious of shaping and writing your own work, and not relying on a “group” consensus of what should go in the paper. Refer to the university guidelines on academic integrity and plagiarism if you have any doubts.

**Due: The day of Unit 5 class by 11:59 pm, through Blackboard (for campus students) or the Assessment section for Assignment #1 (for VAC Students).** *This assignment relates to student learning outcomes 1, 2 and 6.*

**Late submissions without prior permission from the instructor will have 1 point deducted for each day late**. Extensions are only granted under extreme circumstances and are at the instructor’s discretion.

**Assignment #2: Family of Origin Assessment**

**(35% of final grade)**

**Purpose of this assignment:** This assignment has become a ‘classic’ assignment in the USC Suzanne Dworak-Peck School of Social Work program. Understanding family functioning and familial patterns will be an important foundation in your ability to help your clients work through family problems. In order for you to help your clients better understand their familial patterns, you will evaluate and assess family systems on a personal level. By understanding your family and who you are within the family context based on family systems concepts, you will be better prepared to identify countertransference reactions you might experience with your clients, which is an ethical responsibility for competent social work practice. Therefore, by exploring and reflecting on your own experiences, including factors of resilience and risk, this assignment will highlight ways in which you can be more empathetic towards yourself and others.

Please note that this assignment is not a replacement for personal psychotherapy, but it may offer some insights into who you are, and how you can help your clients live more fulfilling lives.  If this assignment brings up unresolved personal conflict, the USC School of Social Work has free psychotherapy provided to students. The contact number for psychotherapeutic support for campus students is (213) 740-1771;<http://engemannshc.usc.edu/counseling>. For VAC students Perspectives, Ltd. counselors provide students and families free short-term confidential assistance. Perspectives can be found at http://www.perspectivesltd.com. The Username is VAC500 and the Password: perspectives. Students may also call directly at 800-456-6327. Available 24/7.

**General instructions:** This assignment requires you to apply the concepts and theories that are discussed in your SOWK 544 classes along with the concepts and theories that are found in the required readings.

**Instructions for organizing the assignment:**

**Part one: Genogram (10% of final grade) (one page):** Produce a detailed genogram of your family of origin covering at least three generations.  Please include first names and ages (or Date of Birth) with each symbol. The genogram must include a key. It should also include sub-systems and alliances between family members. Strength of interpersonal relationships for the index client (yourself) should be depicted, Also depict mental illness and medical issue across the generations. Submit in the Assessments Genogram section for Assignment #2.

**Part two: Family of Origin Paper (10% of final grade) (2-3 pages): Write and discuss a brief illustration from a time in your childhood which exemplifies how your family system typically operated.** Issues you may cover include (choose 3 of these):

1. Boundaries (within the family as well as between the family and the world)
2. Hierarchies
3. Subsystems
4. Alliances
5. Rules (spoken and unspoken)
6. Feedback loops
7. Communication style and patterns
8. Resources/ resiliency factors
9. Intergenerational patterns

You must give specific behavioral examples to back up your analysis. For example, it is not sufficient to state that there were poor communication patterns, rather, you should discuss the specific behaviors that demonstrated how those communications played out and what type of communication it most closely represents. (The Hepworth et al. and Collins et al. articles from unit 6 are important guides for this section).

In completing this section, you will need to cite at least three scholarly articles, chapters, and/or books (**from outside of this syllabus**) that address the concepts you are discussing. Submit in the Assessments Family of Origin Paper section for Assignment #2.

**Part three: Infographic (10% of final grade) (one page): Construct a one page infographic and post it to Blackboard (for campus students) or the VAC classroom wall (for VAC students) for your classmates to learn from. “Infographics are graphic visual representations of information, data, or knowledge intended to present information quickly and clearly. They can improve cognition by utilizing graphics to enhance the human visual system's ability to see patterns and trends” (**[**Wikipedia**](https://en.wikipedia.org/wiki/Infographic)**).** Select an underlying theme that emerged from the analysis of your family which has influenced your way of thinking about social work practice.  Research this theme and discuss how it impacts families in general. You must support your conclusions using statistics and psychological findings from research articles. You may create your own theme or select from the following list:

1. The effects of alcoholism or addiction on the family.
2. Gay and lesbian families, Blended family issues, Single-parent family.
3. The effects of violence or abuse.
4. Poverty and the family.
5. Family secrets.
6. Legacies of loss.
7. The role of ritual in the family.
8. Birth order.
9. Cultural themes.
10. The effects of mental or physical illness on the family.
11. Gender roles within the family.
12. Family stories and the construction of meaning.
13. Models of marriage.

In completing this section, you will need to reference at least three additional sources that address the data and research related to the theme you are discussing. Place the references at the bottom of the infographic. Free infographic programs are available online. <https://www.canva.com/create/infographics/> or <https://piktochart.com/> are examples of many more. Submit in the Assessments Infographic section for Assignment #2.

**Due: the day of class for Unit 9 by 11:59 pm.**All papers must be submitted on Blackboard (for campus students) or via the Assessments section (for VAC students). **Upload the assignment within Blackboard for on ground students and within the Assessment section for VAC students. Late submissions without prior permission from the instructor will have 1 point deducted for each day late**. Extensions are only granted under extreme circumstances and are at the instructor’s discretion.

**Assignment #3: Understanding and Applying Evidence Based Interventions**

**(Sections 1 & 2 = 30% of final grade)**

**General instructions**

This is a group assignment, groups will be comprised of 2-4 students.  The assignment has two parts. Section one includes the identification and discussion of an issue or theme and the research related to the chosen issue. Section two will include a discussion of an evidence based intervention appropriate to treat those who are experiencing the identified issue or theme. Sections one and two will be written and submitted as a group. The paper 4-6 pages (with 8 references minimum). **All students in a group will receive the same grade on this assignment.**

**Section 1 Chosen Issue and Related Research (2-3 pages)**

This section requires your group to choose an issue or theme noticed from your personal reflections during the first two reflective assignments earlier in the semester. Only one theme/issue should be chosen, and it is okay to choose a theme or an issue even if one group member did not significantly experience the theme or issue. Once your group chooses the theme/issue please speak with or email your professor to get approval. A few general areas of consideration include (but are not limited to):

* Family experiences impacting professional identity
* Trauma experiences impacting professional identity
* Historical experiences impacting professional identity
* Personal and Life experiences impacting professional identity
* Stress management affecting academic ability
* Anxiety management affecting academic ability or professional identity

Once an issue or theme is chosen your group will research the literature and data to clarify how this issue is experienced within the general population. Using the assigned readings, in-class discussions, and other research literature, provide a detailed description of the following elements:

* The issue/population you have identified. This should include statistics about the issue/population, incidence and/or prevalence of the issues or needs, outcomes for the issue/population if not intervened with (negative outcomes of the issue if untreated).
* Significant socio-cultural dimensions of the problem: e.g., socioeconomic status, race, gender, culture, spiritual/religious beliefs etc.

**Section 2 Evidence Based Intervention to Treat the Issue (2-3 pages)**

In this section the group will choose one Evidence Based Intervention (EBI) and research its use in group treatment with those who experience the specific issue/theme your group has selected. Below are some examples of EBIs for specific populations to help you understand what you are trying to accomplish in this section:

* Cognitive Processing Therapy for adult survivors of sexual trauma
* Dialectical Behavioral Therapy for suicidal college students
* Acceptance and Commitment Therapy for military veterans who have experienced combat trauma.
* Cognitive Behavioral Therapy for Anxiety Management
* Mindfulness Based Stress Reduction for Stress Management

Describe the evidence based intervention you have selected and how to apply this intervention to the issue/population selected, include:

* What is the purpose of the group?
* What type of group (open or closed) will work best for this issue/population?
* Elements of the proposed group intervention (theoretical foundation, number of sessions, topic and activities of group sessions)
* What evidence is there that this group therapy works? Is there any controversy about its effectiveness?
* Is there any research on use of this intervention with the issue/population selected? If there is, what is it? If there is no research related to using this intervention with the chosen issue/population, discuss why it would be a good choice for the issue/population chosen?
* Does the research show that this group intervention is effective with more than one population? Briefly discuss.
* Are there any benefits or drawbacks to using this treatment in a group setting?
* What are the unique needs those with this issue for which the EBP would work well? Are there any drawbacks? Would there be any modifications needed?
* Where might this intervention best be delivered (i.e. schools, community based organizations, churches, etc.)?

Papers should be no more than 5-7 pages in length (not counting the title page or reference list), double-spaced, with 1-inch margins on all sides, with 12 point Times New Roman font. Insert page numbers starting with the title page. Use subheadings (in bold font) to organize your paper. See APA Manual for *levels of headings*. Throughout the paper, provide reference citations using a **minimum of 8 scholarly works** (at least 4 of which must be outside sources = not on the 544 syllabus). Use editorial and referencing styles as specified in the APA Publication Manual 7th Edition (<http://apastyle.apa.org/>).

Papers will be evaluated on the thoroughness of the assignment, the theoretical justification of content, integration of empirical evidenced-based content, and the quality of the written work.

**Due: The day of Unit 15 class,** only one person in the partnership should submit the final version of their groups assignment with all group member names on the title page. Submit via Blackboard (for on campus students) or through the Assessment upload areas for assignments (for VAC students). This assignment relates to student learning outcomes 1, 2, 3, 4, 6, and 7.

**No late submissions or extensions will not be allowed.** Exceptions are only granted under extreme circumstances and are at the instructor’s discretion.

University Policies and Guidelines begin on the next page

**University Policies and Guidelines**

# Attendance Policy

The USC Suzanne Dworak-Peck School of Social Work is a professional school, class attendance and participation is an essential part of your professional training and development. You are expected to attend all classes and meaningfully participate. More than 2 unexcused absences from class may result in the lowering of your grade by a half grade. Additional absences can result in additional deductions. For VAC students, attendance requires maintaining an active presence during live sessions with clear and reliable video and audio. Unless otherwise directed by your instructor, VAC students are expected to complete all asynchronous content and activities prior to the scheduled live session. Failure to complete two asynchronous units prior to the scheduled live session will result in the lowering of your final course grade by one grade segment. Not completing additional asychronous units will result in further grade deductions.

University of Southern California policy permits students to be excused from class for the observance of religious holy days. This policy also covers scheduled final examinations which conflict with students’ observance of a holy day. Students must make arrangements in advance to complete class work which will be missed, or to reschedule an examination, due to holy days observance.

Please refer to Scampus and to the USC School of Social Work Student Handbook for additional information on attendance policies.

# Academic Conduct

Plagiarism – presenting someone else’s ideas as your own, either verbatim or recast in your own words – is a serious academic offense with serious consequences. Please familiarize yourself with the discussion of plagiarism in *SCampus* in Part B, Section 11, “Behavior Violating University Standards” <https://policy.usc.edu/scampus-part-b/>.  Other forms of academic dishonesty are equally unacceptable.  See additional information in *SCampus*and university policies on scientific misconduct, [http://policy.usc.edu/scientific-misconduct](http://policy.usc.edu/scientific-misconduct/).

# Support Systems

*Student Counseling Services (SCS) – (213) 740-7711 – 24/7 on call*

Free and confidential mental health treatment for students, including short-term psychotherapy, group counseling, stress fitness workshops, and crisis intervention. [engemannshc.usc.edu/counseling](https://engemannshc.usc.edu/counseling)

*National Suicide Prevention Lifeline – 1 (800) 273-8255*

Provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org/)

*Relationship and Sexual Violence Prevention Services (RSVP) – (213) 740-4900 – 24/7 on call*

Free and confidential therapy services, workshops, and training for situations related to gender-based harm. [engemannshc.usc.edu/rsvp](https://engemannshc.usc.edu/rsvp/)

*Sexual Assault Resource Center*

For more information about how to get help or help a survivor, rights, reporting options, and additional resources, visit the website: <https://studenthealth.usc.edu/sexual-assault/>

*Office of Equity and Diversity (OED)/Title IX Compliance – (213) 740-5086*

Works with faculty, staff, visitors, applicants, and students around issues of protected class. [equity.usc.edu](http://equity.usc.edu/)

*USC Policy Reporting to Title IX:*<https://policy.usc.edu/reporting-to-title-ix-student-misconduct/>

*Bias Assessment Response and Support*

Incidents of bias, hate crimes and micro aggressions need to be reported allowing for appropriate investigation and response. [studentaffairs.usc.edu/bias-assessment-response-support](https://studentaffairs.usc.edu/bias-assessment-response-support/)

*The Office of Disability Services and Programs*

Provides certification for students with disabilities and helps arrange relevant accommodations. [dsp.usc.edu](http://dsp.usc.edu/)

*USC Support and Advocacy (USCSA) – (213) 821-4710*

Assists students and families in resolving complex issues adversely affecting their success as a student EX: personal, financial, and academic. [studentaffairs.usc.edu/ssa](https://studentaffairs.usc.edu/ssa/)

*Diversity at USC*

Information on events, programs and training, the Diversity Task Force (including representatives for each school), chronology, participation, and various resources for students. [diversity.usc.edu](https://diversity.usc.edu/)

*USC Emergency Information*

Provides safety and other updates, including ways in which instruction will be continued if an officially declared emergency makes travel to campus infeasible. [emergency.usc.edu](http://emergency.usc.edu)

*USC Department of Public Safety – UPC: (213) 740-4321 – HSC: (323) 442-1000 – 24-hour emergency or to report a crime.* Provides overall safety to USC community. [dps.usc.edu](http://dps.usc.edu/)

# Additional Resources

Students enrolled in the Virtual Academic Center can access support services for themselves and their families by contacting Perspectives, Ltd., an independent student assistance program offering crisis services, short-term counseling, and referral 24/7.  To access Perspectives, Ltd., call 800-456-6327.

# Statement about Incompletes

The Grade of Incomplete (IN) can be assigned only if there is work not completed because of a documented illness or some other emergency occurring after the 12th week of the semester. Students must NOT assume that the instructor will agree to the grade of IN. Removal of the grade of IN must be instituted by the student and agreed to be the instructor and reported on the official “Incomplete Completion Form.”

# Policy on Late or Make-Up Work

Papers are due on the day and time specified. Extensions will be granted only for extenuating circumstances. If the paper is late without permission, the grade will be affected.

# Policy on Changes to the Syllabus and/or Course Requirements

It may be necessary to make some adjustments in the syllabus during the semester in order to respond to unforeseen or extenuating circumstances. Adjustments that are made will be communicated to students both verbally and in writing.

# Code of Ethics of the National Association of Social Workers (Optional)

*Approved by the 1996 NASW Delegate Assembly and revised by the 2017 NASW Delegate Assembly* [*https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English*](https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English)

## Preamble

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession's focus on individual well-being in a social context and the well-being of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living.

Social workers promote social justice and social change with and on behalf of clients. "Clients" is used inclusively to refer to individuals, families, groups, organizations, and communities. .Social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice. These activities may be in the form of direct practice, community organizing, supervision, consultation**,** administration, advocacy, social and political action, policy development and implementation, education, and research and evaluation. Social workers seek to enhance the capacity of people to address their own needs. Social workers also seek to promote the responsiveness of organizations, communities, and other social institutions to individuals' needs and social problems.

The mission of the social work profession is rooted in a set of core values. These core values, embraced by social workers throughout the profession's history, are the foundation of social work's unique purpose and perspective:

Service

Social justice

Dignity and worth of the person

Importance of human relationships

Integrity

Competence

This constellation of core values reflects what is unique to the social work profession. Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience.

# Academic Dishonesty Sanction Guidelines

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# Complaints

Please direct any concerns about the course with the instructor first.  If you are unable to discuss your concerns with the instructor, please contact the faculty course lead.  Any concerns unresolved with the course instructor or faculty course lead may be directed to the student’s advisor and/or the Chair of your program.

1. **Tips for Maximizing Your Learning Experience in this Course (Optional)**
* Be mindful of getting proper nutrition, exercise, rest and sleep!
* Come to class.
* Complete required readings and assignments BEFORE coming to class.
* BEFORE coming to class, review the materials from the previous Unit AND the current Unit, AND scan the topics to be covered in the next Unit.
* Come to class prepared to ask any questions you might have.
* Participate in class discussions.
* AFTER you leave class, review the materials assigned for that Unit again, along with your notes from that Unit.
* If you don't understand something, ask questions! Ask questions in class, during office hours, and/or through email!
* Keep up with the assigned readings.

*Don’t procrastinate or postpone working on assignments.*