

**SIMMONS COLLEGE SCHOOL OF SOCIAL WORK
FALL 2010**

421: Social Work Practice I

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Materials for the Course

Course syllabus and materials are available on the course website on WebCT Vista. Go to <http://learning.simmons.edu>. Click Simmons College, then click the appropriate course number and section. Your user name is your Simmons Username and your password is your Simmons ID number. All journal articles and some book chapters can be accessed electronically through the library reserve link on WebCT Vista. Books are on reserve in the library and can only be accessed by going there. For difficulties with e-learning retrieval please contact jennifer.warner@simmons.edu or ext. 2779.

Required Texts

- Hooks, bell (2000). *Where We Stand: Class Matters*. New York: Routledge. (This book will be summer reading for students taking Social Work Practice in the fall.) [**This you were expected to read prior to coming to the first class.**]
- Madsen, W. C. (2007). *Collaborative Therapy with Multi-stressed Families*. Second Edition. New York: Guilford Press. (This book offers an approach that focuses on practice with families. We will use it in the first and second semesters.)
- Miley, K., O'Melia, M. & DuBois, B. (2011) *Generalist social work practice: An empowering approach* (Updated Sixth edition). Boston: Allyn & Bacon. (This book emphasizes a generalist empowerment-oriented approach to social work practice, with practice strategies and techniques for working with all levels of human systems.)
 - *MySocialworkhelpinglab* access. This is an online site that provides you with real live examples of various aspects of clinical work and a wealth of other resources. It is provided to you as a supplement and will be used in classes and for homework assignments.

If you purchase this textbook (Miley et al.) elsewhere and not in the book store you will need to purchase the website at an additional \$35.00

- Sommers-Flanagan, J. & Sommers-Flanagan, R. (2009). *Clinical Interviewing. Fourth Edition*, Hoboken, NJ: John Wiley & Sons, Inc.

Course Description

This year long course will focus on the action, reflection and **skills** of generalist social work practice. We will consider the basic processes of social work practice: engagement, assessment, contracting, intervention, evaluation and termination and their application to a wide range of issues and problems. We will look at various levels of intervention (intra-psychically, interpersonally and inter-systemically), various practice settings, social work practice roles and theoretical perspectives.

In the first semester, particular attention is given to the multidimensional approach to assessment and intervention, interviewing skills and the development of the professional identity of the social worker and the professional relationship with client(s)/client systems. Generalist social work practice is rooted in the ecological/ecosystems framework. Theories of empowerment and strengths-based perspectives are emphasized. Social work practice as framed and contextualized by professional codes of ethics, legal precedence, agency and organizational dynamics, neighborhoods and communities will be studied and analyzed.

In the second semester, we will continue to deepen knowledge and skills in assessment and intervention, explore the differential use of self, and specific approaches to practice with particular populations. Additional practice approaches will be introduced – psychodynamic, cognitive-behavioral, solution-focused, narrative and collaborative approaches with multi-stressed families, which incorporates a solution focused modality and narrative perspective. We will explore the use of evidenced-based (or informed) practice. Ways of evaluating practice and using the professional literature, as an aid to practice choices will also be discussed.

While all sections of the course share a common outline for the syllabus, books, readings and written assignments, each professor will shape her/his section to meet the specific needs of the classroom. As a result there may be some slight variation in articles assigned and exercises expected to be completed. Students have access to the entire bibliography for the course and not every reading will be assigned. It is provided to you to pursue your own interest or needs. Instructors will use a variety of mini-lectures, role-play, case presentations, process-recordings, videos, and standardized cases to demonstrate different models and see the ways that different social and behavioral theories lead to particular ways of intervening. Given the changing demographics of U.S. society there is a particular emphasis on cross cultural understanding and on work with clients across the age spectrum.

Council on Social Work Education (CSWE) Core Competencies:

In keeping with CSWE accreditation expectations this semester will primarily address four of the ten CSWE competencies. While the course focuses on these four, you will be exposed to the other six competencies and in the spring semester there will be a focus on four different ones. The Miley, K., O'Melia, M. & DuBois, B. (2011) textbook provides a complete list of the ten core competencies. This semester's foci are:

- 2.1.1.:** Identify as a professional social worker and conduct one's self accordingly.

2.1.2: Apply social work ethical principles to guide professional practice.

2.1.4: Engage diversity and differences in practice.

2.1.10: Engage, assess, intervene and evaluate with individuals, families, groups, organizations and communities.

Course Learning Objectives and Outcomes

At the completion of this semester students will, demonstrate foundational knowledge of core concepts involved in generalist social work practice. They will demonstrate beginning mastery of the practice skills involved in delivering social work services to a variety of client(s)/client systems, clinical and social conditions and in multiple settings. Critical thinking will be demonstrated by the ability to identify concepts and apply them to case situations and provide a justification for these choices. These objectives concretize the CSWE Core Competencies. Students will demonstrate the capacity to:

Professional Identity

- Ability to identify one's own ideas, assumptions, and biases regarding people's psychosocial challenges, the ways change occurs, and how they make use of professional help. Demonstrating through reflection how these biases, assumptions and ideas may affect the student's clinical work.
- Identify and work with the structural, economic, and political aspects of various service delivery systems and the effects of organizational arrangements on clients and professional social workers.
- Identify and apply core concepts of social identity theory and the challenges of functioning in multicultural contexts with clients who represent multiple social identities.
- Identify and reflect on one's own social identities and how these differences that the social worker brings to the professional encounter impacts the professional relationship
- Demonstrate in behavior, appearance and communication professional demeanor.

Professional Values

- Demonstrate understanding of the NASW Code of Ethics and ability to apply ethical reasoning to make ethical decisions in keeping with the NASW Code.
- Identify the importance of professional roles and boundaries.
- Ability to translate knowledge and values affirming cultural diversity, inclusion and social justice into direct practice and social action.

Professional Skills

- Understand the components of and acquire skills in developing effective professional relationships with individuals and families, and with community and organizational institutions and networks they interface with.
- Demonstrate foundational listening and interviewing skills.
- Have the ability to assess client needs, challenges, strengths, and resources and consider these in formulations and intervention plans using an ecological framework.
- Demonstrate the ability to conduct a risk management assessment of clients in crisis situations (suicide, homicidal ideation and psychiatric decomposition) and develop appropriate crisis interventions.
- Ability to conceptualize, identify and describe possible interventions with various sized systems: individuals, families, and social systems clients interface with, based on biological, psychological, psychodynamic, family systems, socio-cultural, and organizational factors.
- Identify the components of Evidence-based (informed) practice the rationale for, and basic tools necessary for making practice choices and evaluating practice efforts.
- Deliver in writing a well organized coherent bio-psycho-social assessment with a sound formulation and initial achievable treatment goals.

Evaluation of Student Performance

Students are responsible for class preparation (readings) and participation (discussion and exercises). **Students are expected to demonstrate their knowledge of the readings through participation in class discussions and in all written assignments.** There are three graded papers. Instructions and due dates for each paper will be given to you by your individual professor

Grading of students' performance will be based on:

- Class participation 20% (Includes demonstrating an understanding of reading assignments.)
- Three Papers: first papers 20% each, final two papers 30% each.

Attendance is an expectation in graduate school. More than one absence will influence the evaluation of a student's performance and grade. Students are expected to let their faculty know when they are unable to be in class. Punctuality is part of your professional behavior. Please inform your instructor if you may be late and when late enter the class quietly and with minimal disruption.

Statement on Disabilities

Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning, and psychiatric disabilities. If you have a disability and anticipate that you will need a reasonable accommodation in this class contact Timothy Rodgers, associate director in the Academic Support Center at ext-2470 or timothy.rodger@simmons.edu at the

beginning of the semester. Students requesting accommodation must do so **each** semester. Students with disabilities receiving accommodations are also encouraged to contact their instructors within the first 2 weeks of the semester to discuss their individual needs for accommodation and to inform their advisor.

Citations for References Used in Written Work

All citations for references used in written work and all reference lists must follow the American Psychological Association Manual, Sixth Edition (2009). Failure to cite a reference or follow the APA guidelines will affect your grade. **For convenience** students may wish to purchase the APA Manual which is also on reserve in the Beatley Library. If you have any questions about what should be cited or how to format the citation, please contact your faculty. There is also a course handout, References to Literature Cited in text that is included in the course materials on the WEB. For electronic citations you can also refer to the Website--
<http://www.apastyle.org/electref.html>.

Statement On Plagiarism

Plagiarizing is defined as intentionally or unintentionally using someone else's words or thoughts without giving proper credit. When a source is not cited, it is assumed that the words thoughts and ideas are the sole product of the student. When a student uses material from another source, the extent and nature of the borrowing must, to avoid the charge of dishonesty, be fully and explicitly noted in the text or footnotes. Direct quotations must be differentiated from the text by using quotation marks or by indenting or single spacing and be accompanied by appropriate APA citation. It is the responsibility of the student to learn the proper forms of citation. The use of papers or other work obtained from commercial or other services is a clear case of plagiarism and is specifically prohibited. Handing in as one's own work a paper on which a student has received extensive help without acknowledging that help is plagiarism. Students, who for whatever reason, submit work not their own are subject to disciplinary action.

HIPAA Guidelines/Client Confidentiality

All social workers are required to adhere to HIPAA (Health Insurance Portability and Accountability Act of 1996, Public Law 104-191) regulations regarding the privacy of client information outside of the agency setting. Confidentiality must be strictly maintained when discussing clients in the classroom and writing about clients in course assignments. Ensuring client confidentiality includes not stating the name of the agency, **using the actual name or initials of clients and actual dates of services.** For example you would use "community health center" and not "Fenway Health Center or Upham's Corner Health Center" etc; "urban public school" and not the "Tobin Elementary School"; "larger urban teaching hospital" and not "Mass General". In terms of dates use terms such in the "past Fall" and not "October....,2010". Or "presenting complaint began about eight years ago when client was 10" and not "2002".

Some general tips

- Because students in this course are placed in a diverse range of practice settings and work with a variety of client populations and needs, we encourage you to explore resources relevant to your placement experience that lie beyond the scope of this syllabus. Many resources are available on-line through the Simmons College Library. The fall workshops

on use of library resources will help you search these out, and your instructor may also be able to offer specific suggestions for supplementary readings.

- A note on class participation: Students should come prepared to discuss assigned readings. Your instructor may ask you to think about specific questions in preparation for each week's readings. You may find it helpful to give some thought to the following questions each week:

“How does what I am reading fit (or not fit) with how I think and what I am doing? What do I identify as the important “take-away” ideas from this reading? What new thoughts or questions does this reading raise for me?” It may be helpful to write a brief paragraph on at least two of the readings, responding to these questions, so as to be better prepared to discuss your ideas. These papers maybe collected intermittently according to professors' preferences. Ability to apply and integrate the professional literature to your practice is a critical aspect of your professional competency.

This syllabus is not a contract. The instructor reserves the right to alter the course requirements and/or assignments based on new materials, class discussions, or other legitimate pedagogical objectives.

COURSE OUTLINE

Key: (e) = electronic reserve (available on-line)
(l) = library reserve (not available on-line)

Class 1 (09/08) : Introduction to Social Work Practice I

In this first class we will introduce ourselves to each other and preview the syllabus and the ways the class will operate. We begin with an orientation to the meaning of socio-economic class (bell hooks), the importance of standpoint (Freire) and the workings of power in this country. We introduce a Freirian framework which underlies our view of what it means to become a “clinician activist.” We define and discuss the meaning of generalist practice, multiculturalism and social work values – themes to be developed in greater detail in subsequent classes.

Required Readings:

(l) Cournoyer, B. R. (2004). Chapter 1. In *The Evidenced-based Social Work Practice Skills Book*. (pp 1-21). Boston: Allyn & Bacon.

(l) hooks, bell (2000) *Where We Stand: Class Matters*. New York: Routledge. (This book will be summer reading for students taking Social Work Practice in the fall and is available in the bookstore.)

(l) Miley, K., O'Melia, M. & DuBois, B. (2011). Chapter 1: Generalist social work practice. In *Generalist Social Work Practice: An Empowering Approach. Updated Sixth Edition*. (pp. 1-19). Boston: Allyn & Bacon.

(e) Martinez, D. B (2004). *Therapy for liberation: The Paulo Freire methodology*. (unpublished)

Class 2 (09/15) . Frameworks for Social Work Practice

We consider the knowledge base for social work beginning with the ecosystems perspective and its applications. We will note what is shared by the Freire and ecosystems approach to gathering and assessing information. We will also consider ways of analyzing and critiquing the perspectives we use.

Readings:

(e) Germain, C. B. & Gitterman, A. (1996). *The Life Model of Social Work Practice*. Chapter 1: The ecological perspective (pp.5-24). New York: Columbia University Press.

(l) Miley, K., O'Melia, M. & DuBois, B. (2011). Chapter 2, Human systems perspective. In *Generalist Social Work Practice: An Empowering Approach. Updated Sixth Edition*. (pp.21-45). Boston: Allyn & Bacon.

Class 3 (09/23). Social Work as an Ethical Practice

A characteristic of a profession is having a code of ethics that is recognized by the public and sets the standard of professional practice. In this session we present ethical frameworks for our work including two contrasting Codes of Ethics. We will examine the distinction between legal, ethical and personal moral beliefs. While they often overlap they are distinct frameworks often with clashing expectations of behavior. Please note that all state licensing laws require adherence to the NASW Code of Ethics.

Readings

(e) Freud, S. & Krug, S. (2002). Beyond the Code of Ethics, Part 1: Complexities of ethical decision making in MSW practice. *Families in Society*, 83:5/6, 474-482.

(l). Prillelensky, I., Dorkecki, P. Friedan, G. & Wang, V. O. (2007) Counseling for wellness and Justice: Foundations and Ethical Dilemmas. In Aldarondo, E. (Ed.) *Advancing Social Justice in Clinical Practice*. (p.p. 19-42).Mathwah, NJ: Lawrence Erlbaum Associates

Please read the NASW Code of Ethics accessed at the following Internet address:
www.socialworkers.org/pubs/code/code.asp

Please read the Code of Ethics of the National Association of Black Social Workers accessed at the following internet address <http://www.nabsw.org/mserver/CodeofEthics.aspx>

(e) New Zealand Association of Social Workers Incorporated (1993). Code of Ethics. Dunhedin, Anteroa New Zealand.

Note how the New Zealand code is responsive to the Maori and Pacific Islander people in New Zealand whereas the NASW code has one set of standards for all. Consider the historical context of the NABSW and its continuation. Compare and consider the priorities of these different codes.

For your own interest, available on your instructor's web page are two additional codes of ethics: The Radical Social Workers Code of Ethics and Ethical Guidelines for Feminist Therapists. Again all state licensing laws require adherence to the NASW Code of Ethics.

Paper One Due

Class 4 (09/29) . Organizational, and Legal, Contexts of Social Work Practice

Social work practice occurs within a legal framework, and organizational context. In this session we will look at these contexts and consider ways of influencing and changing organizations in which we and our clients function.

Readings:

(e) Fleck-Henderson, A. (2001). *A Typology of Value Orientations in Human Service Agencies*. Unpublished manuscript, Simmons School of Social Work, Boston.

(e) Germain, C, B. & Gitterman, A. (1996) *The Life Model of Social Work Practice*. Chapter 11: Influencing the practitioner's organization. (pp.366-395). New York: Columbia University Press.

(l) McDaniel, M. (2006). In the eye of the beholder: The role of reporters in bringing families to the attention of child protective services. *Children and Youth Services Review*. 28, 306-324.

(e) Ungar, M., Manuel, S., Mealey, S. Thomas, G. and Campbell, C. (2004). A study of community guides: Lessons for professionals practicing with and in communities. *Social Work*, 49:4, 550-561.

Here is the website for Massachusetts General Law Protecting Children, Chapter 119 - which pertains to all issues related to child and protection matters in the commonwealth.

<http://www.mass.gov/legis/laws/mgl/gl-119-toc.htm> the following is specific to chapter 119, section 51A: <http://www.mass.gov/legis/laws/mgl/119-51a.htm> section 51B:<http://www.mass.gov/legis/laws/mgl/119-51b.htm>

Students can scroll down from this homepage to sections 51A-F which governs mandated reporting, child abuse investigations, placement and custody hearings, and the central registry of offenders

What other categories of vulnerable populations require mandated reporting?

Class 5 (10/6). Values and Multicultural sensitivity - getting started with individuals and families

Social work values, personal values and cultural sensitivity intersect as we meet classmates, colleagues and clients from many backgrounds and diverse situations. In this class we discuss ways of developing self-awareness and openness to the ways of people from whom we are different. We also look at ways of getting started with groups and individuals that include being sensitive to differences.

Readings:

(e) Boyd-Franklin, N. (2003). *Black Families in Therapy*. Second Edition. Chapter 9, Therapist's use of self and value conflicts. (pp. 177-203). New York: Guilford Press.

(e) Dean, R.G. (2001). The myth of cross-cultural competence. *Families in Society*, 82(6), 623-630.

(l) Miley, K., O'Melia, M. & DuBois, B. (2011). Chapter 3: Values and multicultural Competence. In *Generalist Social Work Practice: An Empowering Approach. Updated Sixth Edition*. (pp.47-70). Boston: Allyn & Bacon.

(l) Miley, K., O'Melia, M. & DuBois, B. (2011). Chapter 6:Forming Partnerships. In *Generalist Social Work Practice: An Empowering Approach. Updated Sixth Edition*. (pp.125-151). Boston: Allyn & Bacon.

Class 6 (10/13). Building Professional and Therapeutic Relationships

Relationship is central to the social work process. Current practice promotes empowering and collaborative relationships. In this and the next session we will discuss various aspects of building relationships with diverse clients.

This class falls during Sexual Diversity Week [10/06-10/13] at SSW, a time when all classes direct attention to issues relevant to sexual diversity. In practice classes we begin to consider issues related to practice with members of the gay, lesbian, bisexual, and transsexual communities or practice issues for social workers who are gay, lesbian, bisexual or transsexual.

Readings

Sexual diversity:

(e) Ciro, D. et al. (2005). Lesbian, gay, bisexual, sexual-orientation questioning adolescents seeking mental health services: Risk factors, worries and desire to talk about them. *Social Work in Mental Health*. 3(3), 213-234.

(e) Crisp, C. (2006).The gay affirmative practice scale (GAP): A new measure for assessing cultural competence with gay and lesbian clients. *Social Work*, 51 (2), 115-126.

(l) Green, R. (2007). Gay and Lesbian Couples in therapy. In Aldarondo, E. (Ed.) (2007). *Advancing Social Justice in Clinical Practice*. (p.p. 119-150), Mathwah, NJ: Lawrence Erlbaum Associates

(e) Morrow, D. F. (2004) Social Work Practice with Gay, Lesbian, Bisexual and Transgender Adolescents. *Families in Society*, 85(1).

Recommended/ Optional

(e) O'Dell, S. (2000). Psychotherapy with gay and lesbian families: Opportunities for cultural inclusion and clinical challenge. *Clinical Social Work Journal* 28(2),171-182.

For your own interest please see your instructors web page for an updated bibliography that covers a wide range of social identity groups.

Class 7 (10/19). Strengths and Empowerment.

As we learn empowerment practices we will study the work of Freire. All students will be expected to attend a lecture on Freire .Time and place to be announced.

Readings:

(e) Chazin, R., Kaplan, S. and Terio, S. (2000). The strengths perspective in brief treatment with culturally diverse clients. *Crisis intervention*. 6:1, 41-50.

(e) Lee, J. A. B. (2001). *The Empowerment Approach to Social Work Practice: Building the Beloved Community*. Chapter 3: Empowerment method: the how to (pp. 56-93). New York: Columbia University Press.

(e) Martinez, D. B (2004). Therapy for Liberation: The Paulo Freire Methodology. (unpublished) **Review from week one.**

(e) Williams, A. B. et al. (2005). Kitchen table wisdom: A Freirian approach to medication adherence. *Journal of the Association of Nurses in AIDS Care*, 16:1, 3-12. (This article show in detail a way of using a Freirian approach in a health context.)

Second paper Due

Class 8 (10/27). Engaging with Involuntary Clients: The role of Motivational Interviewing

At the beginning of this class, you may want some time to discuss the paper students have just turned in before moving on to today's topic of "engagement." When clients have not sought services on their own but are referred or mandated for service, the process of relationship building can present different challenges. We consider traditional ideas about "resistance" and current ideas that view resistance as transactional

Readings:

(e) De Jong, P. & Berg, I.K., (2001). Co-constructing cooperation with mandated clients. *Social Work*, 46(4), 361-381. **A video of the interview discussed in this reading, available through the library demonstrates this process very well.**

(l) Madsen, W. C. (2007). Chapter 1: Working with multi-stressed families: Recognizing the importance of relational stance. In *Collaborative Therapy with Multi-stressed Families*. 2nd. Ed. (pp. 15--45). New York: Guilford Press

(l) Madsen, W. C. (2007). Chapter 3: Collaboration is a two way street: Engaging reluctant families. In *Collaborative Therapy with Multi-stressed Families* 2nd. Ed. (pp. 87-124). New York: Guilford Press

Recommended:

(e) Rollnick, S., Miller, W. R. & Butler, C. C. (2008). Chapter 1: Motivational interviewing: Principles and evidence. In *Motivational Interviewing In Health Care*.

(pp3-10). NYC: Guilford Press.

(l). Sommers-Flanagan, J &. Sommers-Flanagan, R. (2009). Chapter 11: Challenging clients and demanding situations. In *Clinical Interviewing, 4th Ed.* (pp113-140). Hoboken, NJ: John Wiley & Sons.

Class 9 (11/3). Exploration, Assessment.

Prior to intervention of any level as through an assessment as possible needs to occur. An adequate assessment suggest the evidenced-based practice you will choose and the interventions you develop. There are many ways of proceeding to explore a client(s) situation and developing ideas about that situation. There are also various ways of presenting material that help illuminate patterns – e.g. geno-grams and eco-maps. These are important tools of the assessment process. Your HBSE course will also be exposing you to these assessment tools.

Readings:

(l) Madsen, W. C. (2007). Chapter 2: What we see is what we get: Re-examining our assessment process. In *Collaborative Therapy with Multi-stressed Families, 2nd Ed.* (pp. 46-86). New York: Guilford Press

(l) Miley, K., O'Melia, M. & DuBois, B. (2011). Chapter 10, Assessing Resource Capabilities. *Generalist Social Work Practice: An Empowering Approach.* Updated 6th ed. (pp. 235-271). Boston: Allyn & Bacon.

(l). Sommers-Flanagan, J &. Sommers-Flanagan, R. (2009). Chapter 3: Basic Attending, Listening and Action Skills. In *Clinical Interviewing, 4th Ed.* (pp. 53-82). Hoboken, NJ: John Wiley & Sons.

(e) Walton, E. & Smith, C. (1999). The genogram: A tool for assessment and Intervention in child welfare. Journal of Family Social Work, 3 (3), 3-20.

Class 10 (11/10). Assessment of Crisis Situation-Acute Psychiatric Situations: Using mental status examinations.

In crisis situations, the interview process changes. Some situations require action prior to developing a mutual purpose. Acute psychiatric episodes, inter-personal violence and addiction interfere with the ability to establish a working relationship. Safety and stabilization become primary concerns. A primary assessment tool the MSE is based on a traditional medical model of assessment.

(e)Gil, D. (1996). Preventing violence in a structurally violent society” Mission impossible. *American Journal of Orthopsychiatry*, 66:1, 77-84.

(l) Goldstein, E. G. (1995). Chapter 3: The ego and its functions. In *Ego Psychology and Social Work Practice* , 2nd Ed. (pp.53-71.) NYC: The Free Press.

(l) Goldstein, E. G. (1995). Chapter 4: The ego and its defenses. In *Ego Psychology and Social work Practice* , 2nd Ed. (pp. 72-85.) NYC: The Free Press.

(l). Sommers-Flanagan, J &. Sommers-Flanagan, R. (2009). Chapter 8: The mental status examination.. In *Clinical Interviewing, 4th Ed.* (pp. 213-243). Hoboken, NJ: John Wiley & Sons.

Class 11 (11/17) . Assessment and Interviewing in Crisis Situations: Suicidal and Homicidal Ideation.

Suicidal and homicidal ideation is anxiety provoking for social work practitioners The assessment process becomes more specific and focused and has a sense of urgency attached to it. Guidelines on suicide assessment are offered; it is expected that these will provide a model for considering ways of assessing other crisis situations.

Readings

(e) Bryan, C. J. & Rudd, M. D. (2006). Advances in the assessment of suicide risk. *Journal of clinical psychology: In session*, 62:2, 185-200.

(e) D'Augelli, et al (2005) Predicting the suicide attempts of Lesbian, Gay and Bisexual Youth. *Suicide and Life-Threatening Behavior* 35(6).

(e) Jacobs, D. G. & Brewer, M. L. (2006). Application of the APA Practice Guidelines on Suicide to clinical Practice, *CNS spectator*, 11:6, 447-454.

(l). Sommers-Flanagan, J &. Sommers-Flanagan, R. (2009). Chapter 9: Suicide assessment. In *Clinical Interviewing, 4th Ed.* (pp. 245-278). Hoboken, NJ: John Wiley & Sons.

Recommended/Optional :

(e) Ciffone, J. (2007). Suicide prevention: An analysis and replication of a curriculum-based high school program. *Social Work*, 52:1, 41-59.

(e) Joe, S. & Niedermeier, D. (2006). Preventing suicide: A neglected social work research agenda. *British Journal of Social Work*. Advanced Access, 11/81/06. doi: 10.1093/bjsw/bc1353, pp. 1-24.

Class 12 (12/01). Intervention; Further thoughts about facilitating and evaluating change – evidence based practice.

The next two classes continue the introduction of some ways of thinking about facilitating change and evaluating progress. These approaches will be elaborated on in the second semester and other ways of approaching change will be introduced. How do we work collaboratively with clients to transform assessment information into strategies for change, prioritize goals, translate goals into objectives, construct action plans, and recognize situations demanding immediate action? How do we make decisions about modalities – working with individuals, families or groups? How do we think about community building and interventions on a community level? How do we use professional literature to find evidence based interventions and fit these to practice situations.

(e) Kluger, M.P., Rivera, N., & Mormile-Mehler, M. (2001). Defining and measuring program effectiveness at a mental health/social services agency. *Families in Society*,

82(6), p. 549-553.

(e) Introduction to evidence-based practices. Chapter 1 in *Turning knowledge into practice: A manual for behavioral health administrators and practitioners about understanding and implementing evidence-based practices.* This material can be accessed at the following website: www.tacing.org or www.acmha.org

(e) McNeil, T. (2006). Evidence –based practice in an age of relativism: Toward a model for practice. *Social Work*, 51 (2), 147-156.

(l). Sommers-Flanagan, J &. Sommers-Flanagan, R. (2009). Chapter 5: Theoretically-supported and evidenced-based relationships in clinical interviewing. In *Clinical Interviewing, 4th Ed.* (pp113-140). Hoboken, NJ: John Wiley & Sons.

[No Class 11/24. School closed from 11/24 through 11/29 for the Thanksgiving Holiday]

Class 13 (12/08). Intervention; Further thoughts about facilitating and evaluating change – evidence based practice.

Setting mutually agreed upon goals and plans for evaluating progress are important aspects of the clinical process. How do we balance an understanding of strengths and challenges, and identify strengths and resources at multiple system levels, prioritize goals and translate goals into objects?

Readings:

(l) Cournoyer, B. R. (2004). Chapter 3: Analyzing. In *The Evidenced-based Social Work Practice Skills Book.* (p.p. 118-178) Boston: Allyn & Bacon.

(l) Madsen, W. C. (2007). Chapter 5: Collaborative inquiry: An anthropological approach to ‘Intervening’ with Families. In *Collaborative Therapy with Multi-stressed Families.* (155-186). New York: Guilford Press.

(l) Miley, K., O’Melia, M. & DuBois, B. (2011). Chapter 15: Recognizing success *Generalist Social Work Practice: An Empowering Approach. Updated 6th Ed.* (pp. 384-410). Boston: Allyn & Bacon.

Class 14 (12/15). Goal setting and evaluation

In this session we evaluate our work so far and learn to apply this process to clinical situations. What were our goals for the semester (individual and collective)? Did we achieve them? How do we know? What evidence might we consider to determine this? How might we approach the next semester in ways that would make the evaluation process easier? How does this process apply to your clinical work? How does one make use of professional literature in thinking about approaches to clients?

Readings:

(e) Drisko, J. (2001). How clinical social workers evaluate practice. *Smith College Studies in Social Work*, 71(3), 419-439.

(1) Madsen, W. C. (2007). Chapter 4, Developing a proactive vision to guide clinical work; Collaborative Therapy Contracts. Envisioning New Futures, *Collaborative Therapy with Multi-stressed Families* (125-154. New York: Guilford Press.

Final Paper Due

Course evaluations will also be filled out and plans made for next semester.

Written Assignments for Social Work Practice (421-1)

Paper #1 Due week 3 Please select one of the following topics and write a short essay of 4-6 pages.

Option 1: “How People Change”

As part of your professional identity you will become aware of something called a “*clinician gestalt*”. This refers to the many aspects of self and environment (our ethnic/racial, cultural heritage, gender, class, sexual orientation, family and life experiences) that coalesce into a professional self. This sum total of social identities mediate our assumptions, expectations, beliefs, and behaviors about professional helping

We all come to professional training with implicit theories and ideas about helping, problems and change. In this paper, you are to reflect on the ways your own “clinician gestalt” has shaped the way you think about how people change. The purpose of the paper is to make explicit your beliefs and assumptions about change and professional helping. The paper has two parts:

A. What do you view as necessary or helpful ingredients in the process of change? How have your own ideas (your theories) about what facilitates (or blocks) change developed? What “evidence” from the professional literature and personal experience supports your beliefs about how change occurs? Can you connect the development of these ideas to aspects of your own “clinician gestalt” (e.g. your ethnic, cultural heritage, gender, class, sexual orientation, family and life experience)? Be specific, illustrating your thinking with at least two examples of change drawn from your own life or the life of someone you know. Should you use terms such as “resistance” “motivation” please defined them as you understand them at this point in time.

B. As any of the readings to date begun to impact your ideas of change? How do you think these ideas about how people change may come up in your work? Reflect on situations where your ideas about change might serve you well and situations where they might be problematic. In other words, for whom are your current ideas about how people change likely to be a “good fit,” and for whom might they be a “poor fit?”

Option 2: “Professional Helping”

All of us have had experiences of receiving help as well as giving it. What are some of your ideas of who needs help and the reasons that people need help? Consider a time when you sought help and it was a dissatisfying disappointing encounter. What were the attributes/ characteristics of the helper that contributed to a less than useful encounter? What did the helper do that you did not want them to do. Likewise consider a situation where you sought help and it was a successful gratifying experience. Again identify the attributes /characteristics that made this helping situation a positive experience. What did the helper do that made it easier to accept help? In

which stance are you more comfortable, the helper or being helped? Why do you prefer the stance that you identified? What are the distinctions between professional and personal helping. In writing and reflecting on this idea of helping what of your own attitudes, assumptions or biases about helping may impact your professional encounters? Are there any readings to date that have begun to impact your ideas of helping?

Option 3: Professional Ethics, Legal precedence and personal values.

All professions are bound by a professional code of ethics. In your regard it is the National Association of Social Workers Code of Ethics 1996. All states that have licensing require that you adhere to the professional ethics as a “standard of practice”.

Likewise professional practice has been impacted by precedence in case law (e. g. duty to warn, confidentiality protection for clinical social workers). At times the law has and will conflict with the professional code of ethics.

Finally we all enter the profession with our own personal values and beliefs that form our own personal codes of conduct. Needless to say these three components can clash.

After reading the NASW code of ethics consider at least one aspect from the code that is confusing to you or may potentially present a challenge to you. You will find that code espouses two “goods” however they have the potential to clash. Discuss these ethical dilemmas and how you might resolve them. Are there areas where the code might conflict with your personal values? In such a situation of ethical dilemma or conflict how would a reasonable person resolve the ethical dilemma? What are the steps in your reasoning that would assist you in considering what you as a professional might need to do?

This paper will be graded **Pass/Fail**. What determines a passing paper is the depth of your self reflection and coherent articulation and organization of your thoughts in this essay. This will serve as a baseline for assessing your own professional growth over time.

Paper # 2 - Due week 7 “Ecoscan”

To assist you in developing skills and methods to internalize a eco-systems approach to assessment and practice, please complete an eco-scan of your practice setting. The purpose of this assignment is to orient and accustom you to thinking about individuals and systems as interdependent and to provide you with a three dimensional lens for viewing clients in their environments. Please complete all sections outlined below.

I. Using one of your clients gather data about the environment in which the client, and systems relevant to your client exists. This section should be 2-4 pages, please include summaries of data, not raw data.

(If you have not yet been assigned a client you might ask your supervisor to share a client with you who is typical of the agency’s clientele or you might just approach the community directly and evaluate it.)

- a. Begin by walking around the neighborhood/community where your client lives and where your agency is located to gather direct observations. (If your client does not live in the agency community you may choose either community to study)**

Content Guidelines:

- What do you observe?
- What is the physical appearance, the noise level, density, appearance of the neighborhood?
- Can you tell anything about the people who live in this neighborhood in terms of race, ethnicity, class, etc. from observing the neighborhood?
- Is your client like the other people in the neighborhood in terms of these identifying characteristics or different?
- What is the experience like for you to walk around this neighborhood?
- Is this neighborhood different or similar to your own? In what ways?

b. Gather structural data about the community using websites along with various informants in the agency or neighborhood. (Strive to adopt a systemic perspective in understanding this data. Take some time to reflect on the notion of micro or individual indicators of well-being, and then consider what meso and macro indicators of well-being would look like.)

Website Guidelines:

Use these websites as tools to become familiar with census-like data such as population.

<http://www.census.gov/population/www/>

<http://www.childstats.gov/americaschildren/> - Childstats.gov America's children

<http://www.childstats.gov/ac2004/summlist.asp> - Summary list of child well-being indicators from childstats.gov

<http://www.census.gov/Press-Release/www/2001/cb01ff03.html> - Census information comparing men and women on a variety of social and economic indicators

Then when you feel you have mastered the flavor of this data, seek out specific websites that are directly related to the community of interest to you (e.g., the communities in which your client lives and in which you practice).

Content Guidelines:

- What is the demographic make up of the community, and what are some community-based indicators of well-being?
- What is the ethnic, racial and cultural make up of the community and the agency in which you are placed? What is the marital demography?
- Are there immigrant subgroups, ethnic neighborhoods, or children bused in from other neighborhoods who represent different groups?
- How many people own their homes or rent in this community?
- How many public schools are there and what is the fiscal budget for public education in this area? How does it compare to budgets of other areas?
- How many private schools are there?
- How many medical centers are there and what percentage of services provided by these medical institutions is associated with free care?
- What groups in the community are being served by it's schools or medical establishments and your agency?
- What is public transportation like? Is it accessible, clean, affordable, timely, etc.?
- What are the attitudes in the community toward particular populations and individuals?

II. Write a brief overview of your general impressions and of the data you collected and how this exercise might impact your work. In addition, be prepared to share some of your findings in a class discussion. This section should be 4-6 pages. Be sure to include references to the readings to support your ideas.

Guidelines:

- Consider what it would be like to live in such a community. What would it mean, for example, to do well in such a community?
- Has your view of the client/community changed based on the data you have collected?
- If you are using the lens of a client, has your perception of the client's problem changed? If so, in what ways?
- Have your ideas about change and interventions for your client evolved, or are they different in any ways? Why or why not?
- Critique your agency and its relationship to the community, its ability to serve the community and its relationship to individual clients.
- If you are focusing on the community itself, have your ideas about community problems and the process of change evolved? If so, in what way?
- How has this exercise potentially impacted the way you will approach your work with clients/communities?

*This is a modified version of an assignment developed by Tien Ung with contributions from other faculty.

Paper #3 Due week 14 8-10 pages “Client Assessment”

Assessment is both an objective and an outcome of initial conversations, as well as an ongoing process. Assessment is a structured (organized and purposeful) approach to gathering and analyzing information about the client, the client's story, and contextual or larger system influences. (One can, of course, also assess families, groups, agencies and communities.) This assignment provides an opportunity for you to practice conceptualizing what you have learned (and are presumably still learning) in your work with a particular client. **Although the assignment uses the term “client” it is understood that some of you may be working with a family. In choosing what information to include – be guided by an idea of what is most relevant to the work you will be doing.** (If you do not yet have clients, see your instructor for options.)

This paper will be in two distinct sections. The first part is the formal bio-psycho-social assessment as it would appear in a case record. This is a “boiler-plate “ example of an assessment. Each agency has distinct ways of organizing and writing their own form of an assessments. In this paper you are expected to use the following format.

Part I:

In 3-4 pages, capture the following psychosocial information. (Use the Headings here to organize your paper.)

Identifying Information

Provide basic demographic information (including race, ethnicity, gender, sexual orientation and marital status) about your client (disguised to protect the person's identity), some physical descriptors of the client , the agency context in which you are conducting the assessment and your role (not social work intern) in that setting.

Referral Source and Presenting Problem or Issue

Why has this person presented or been referred for help at this time? Who is requesting help, and for what, specifically? Do people have differing views of the problem or issue? Please attempt to use the words in quotes of the client who is seeking assistance. Attempt to answer the “why now question” of their seeking services.

Systems and Persons Relevant to the Problem or Situation

Who are the key participants involved and what are the important “large systems” in this situation? (Think about the person-in-context, including family, school, community and other systems.) Who is or should be involved in the assessment process? What stressors, resources/strengths and/or barriers (actual or potential) do they represent?

Relevant History

Summarize what you know of early family or developmental events relevant to the current situation. What further information would you like to know? What else do you need to know? How and from whom can this information be gathered?

Observational Data

Describe the person’s initial appearance, affect, and behavior during the assessment period. Has this changed over time? What have you noticed in your interactions with this person, and their interactions with others?

Formulation

Here is where you “pull together” your own succinct understanding of this person and their situation? Organize this section by briefly re-identifying the client, and reason for referral. Then present your understanding of the issues in an ecological framework addressing intra-psychic, interpersonal and inter-systemic levels. Organize these domains by order of importance according to your interpretation of the information. How do you make meaning to and interpret the information you have gathered above? This section would reflect your beginning underpinning theoretical framework by which you are understanding the dynamics of the situation; e.g. psychodynamic, Frierean, ect. Be sure to consider strengths than the client(s) bring to the situation. Close the formulation by indicating interventions selected and some sense of how the client might progress.

Part II. (Pages 4-6)

In this section you will reflect on your bio-psychosocial assessment and share your thinking, theoretical conceptualization and use of the readings to inform your thinking. Here is where you will present the evidence-based information (e.g. citations from the readings) that supports your intervention choices and understanding of the case.

1. Begin by discussing who you are vis-a-vis the client. Provide some basic demographic information about yourself to show what you bring to this encounter since you and your background are part of the interaction. How has this (your various social identities) shaped the hearing of this clients’ story?
2. What does the client express as his/her expressed goals? What is this person doing well and wanting to sustain or enhance? What issues or problems need to be addressed? Have

you prioritized goals, based on urgency or importance? Can you identify short-term and longer-term goals? Do key players agree on goals? Do goals represent change at intrapersonal, interpersonal, or environmental levels or all? Describe goals as specifically and concretely as possible.

Consider goals that are feasible for the amount of time you have with the client(s).

3. What will your role (s) be in this situation? What are your responsibilities? To which people and systems are you accountable, and in what ways?

4. From the literature both clinical and empirical what intervention options might be useful, in light of identified goals? What social and behavioral theories and practice theories inform and support your thinking about intervention options? Out of the intervention options you present, which intervention(s) have you chosen? What evidence from the literature supports your intervention choice? Where do you see “leverage” for change?

5. What do you identify as potential (or actual) barriers to, your intervention plan? How will you anticipate addressing these issues?

6. How would you describe your relationship with your client? How do you imagine the relationship will develop? Can you identify or anticipate any relational issues that may come up?

How will you evaluate progress toward goals?