I. COURSE PURPOSE

This course introduces students to assessment and treatment of clients through a family systems perspective with an emphasis on family resilience and supporting motivation for growth and change. The course introduces students to some of the major traditional perspectives in family assessment and treatment through the works of Bowen, Minuchin, and Haley. The exploration of the work of these family therapy pioneers will reveal the essential paradigm shifts involved in moving from an individual perspective to viewing the family as the unit of treatment. This class will explore the evolution of family therapy and the development of the post-modern approaches to include solution-focused and narrative family therapy models. Students will become familiar with practice theories and models consistent with a social constructionist paradigm and the strengths and ecological perspectives. They will learn to work with families to mobilize internal strengths and organize external resources to meet their own needs and solve their own problems. Through lecture, experiential exercises and work with case material, students will learn to apply theoretical concepts to promote change in thinking and interactional patterns as well as to mobilize environmental support.
II. COMPETENCIES AND PRACTICE BEHAVIORS

Practice behaviors that are covered this class are indicated by **bold**. Practice behaviors that are not covered in this class are indicated by **grey**.

1. Professional Identity:
*Identify as a professional social worker & conduct oneself accordingly.*

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<tr>
<th>Practice Behaviors</th>
<th>Clinical</th>
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<tbody>
<tr>
<td>1.1 Social workers demonstrate professional use of self across all practice settings.</td>
<td>1.1 Social workers demonstrate professional use of self across all practice settings.</td>
<td>1.1 Social workers demonstrate professional use of self across all practice settings.</td>
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</tr>
<tr>
<td>1.2 Develop, manage, and maintain therapeutic relationships with clients within the person-in-environment and strengths perspectives.</td>
<td>1.2 Develop, manage, and maintain therapeutic and professional relationships with clients within the person-in-environment and strengths perspectives.</td>
<td>1.2 Develop, manage, and maintain professional relationships with clients within the person-in-environment and strengths perspectives.</td>
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2. Ethical Practice
*Apply social work ethical principles to guide advanced practice.*

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<tr>
<td>2.1 Social workers recognize and manage personal biases in practice settings.</td>
<td>2.1 Social workers recognize and manage personal biases in practice settings.</td>
<td>2.1 Social workers recognize and manage personal biases in practice settings.</td>
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<td>2.2 Social workers recognize and negotiate the complexities that can arise when organizational policies/procedures interact with competing professional standards for ethical social</td>
<td>2.2 Social workers recognize and negotiate the complexities that can arise when organizational policies/procedures interact with competing professional standards for ethical social</td>
<td>2.2 Social workers recognize and negotiate the complexities that can arise when organizational policies/procedures interact with competing professional standards for ethical social</td>
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work practice.

2.3 Social workers apply ethical principles through the use of an ethical decision making model that helps in the resolution of an ethical dilemma.

3. Critical Thinking

*Apply critical thinking to inform and communicate professional judgments.*

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<tr>
<td>3.1 Social workers engage in reflective practice.</td>
<td>3.1 Social workers engage in reflective practice.</td>
<td>3.1 Social workers engage in reflective practice.</td>
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<tr>
<td>3.2 Social workers evaluate the strengths and weaknesses of multiple theoretical perspectives and differentially apply them to client situations.</td>
<td>3.2 Social workers evaluate the strengths and weaknesses of multiple theoretical perspectives and differentially apply them to client situations.</td>
<td>3.2 Social workers evaluate the strengths and weaknesses of multiple theoretical perspectives and differentially apply them to client situations.</td>
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4. Diversity in Practice

*Engage diversity and demonstrate awareness of the complexities regarding identity differences and how they impact practice.*

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<tr>
<td>4.1 Social workers use their self-awareness to understand the influence of their personal biases and values in working with others.</td>
<td>4.1 Social workers use their self-awareness to understand the influence of their personal biases and values in working with others.</td>
<td>4.1 Social workers use their self-awareness to understand the influence of their personal biases and values in working with others.</td>
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</table>
4.2 Social workers practice within the context of difference in shaping the life experiences of clients, themselves, and the working alliance.

5. Human Rights & Justice
*Advance human rights through understanding how social and economic justice factors impact practice*

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<tr>
<td>5.1 Social workers practice with the understanding that societal structures and values may oppress, marginalize, and alienate, or create, enhance, and privilege different cultural groups within a society.</td>
<td>5.1 Social workers practice with the understanding that societal structures and values may oppress, marginalize, and alienate, or create, enhance, and privilege different cultural groups within a society.</td>
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<td>5.1 Social workers practice with the understanding that societal structures and values may oppress, marginalize, and alienate, or create, enhance, and privilege different cultural groups within a society.</td>
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<tr>
<td>5.2 Social workers advocate at multiple levels for the human rights of marginalized populations.</td>
<td>5.2 Social workers advocate at multiple levels for the human rights of marginalized populations.</td>
<td>5.2 Social workers advocate at multiple levels for the human rights of marginalized populations.</td>
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6. Research Based Practice
*Engage in research-informed practice and practice-informed research*

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<tr>
<td>6.1 Social workers critically evaluate and utilize theoretical models and empirical research methods for the purpose of informing and evaluating social work practice and programs.</td>
<td>6.1 Social workers critically evaluate and utilize theoretical models and empirical research methods for the purpose of informing and evaluating social work practice and programs.</td>
<td>6.1 Social workers critically evaluate and utilize theoretical models and empirical research methods for the purpose of informing and evaluating social work practice and programs.</td>
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### 7. Human Behavior
*Apply knowledge of human behavior and the social environment*

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<th>Social Change</th>
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<tr>
<td><strong>7.1 Social workers differentially apply theories of human behavior that address the bio-psycho-social-spiritual nature of clients and the social environment to guide social work practice.</strong></td>
<td>7.1 Social workers differentially apply theories of human behavior that address the bio-psycho-social-spiritual nature of clients and the social environment to guide social work practice.</td>
<td>7.1 Social workers differentially apply theories of human behavior that address the bio-psycho-social-spiritual nature of clients and the social environment to guide social work practice.</td>
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### 8. Policy Practice
*Engage in policy practice to advance social and economic well-being and to deliver effective social work services.*

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<tr>
<td><strong>8.1 Advocate with and inform administrators and legislators to influence policies that affect clients and services.</strong></td>
<td>8.1 Advocate with and inform administrators and legislators to influence policies that affect clients and services.</td>
<td>8.1 Advocate with and inform administrators and legislators to influence policies that affect clients and services.</td>
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### 9. Practice Contexts
*Respond to contexts that shape advanced social work practice.*

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<tr>
<td><strong>9.1 Social workers assess the current political, economic, social, and cultural climate as it affects the most vulnerable members of society.</strong></td>
<td>9.1 Social workers assess the current political, economic, social, and cultural climate as it affects the most vulnerable members of society.</td>
<td>9.1 Social workers assess the current political, economic, social, and cultural climate as it affects the most vulnerable members of society.</td>
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</table>
9.2 Social workers intervene through advocacy to serve the most vulnerable persons within the political, economic, social, and cultural contexts.

10. Engage, Assess, Intervene, Evaluate

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

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<td><strong>Engagement:</strong></td>
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<td>Social workers:</td>
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<tr>
<td>• 10.1.1 Use empathy, active listening, and other clinical skills to establish rapport in order to set treatment goals with clients.</td>
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<tr>
<td>• 10.1.2 Develop culturally responsive therapeutic relationships.</td>
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<tr>
<td>• 10.1.3 Attend to the interpersonal dynamics and contextual factors that both strengthen and potentially threaten the therapeutic alliance.</td>
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<tr>
<td></td>
<td>• 10.1.1 Use empathy, active listening, and other clinical skills to establish rapport in order to set treatment goals with clients.</td>
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<td>10.1.1 Effectively use interpersonal skills to establish collaboration between multiple stakeholders involved in enhancing organizational, community, and social well-being.</td>
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<td>• 10.1.2 Develop culturally responsive therapeutic relationships.</td>
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<td>• 10.1.3 Attend to the interpersonal dynamics and contextual factors that both strengthen and potentially threaten the therapeutic alliance.</td>
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<td></td>
<td>• 10.1.4 Effectively use interpersonal skills to establish collaboration between multiple stakeholders involved in enhancing organizational, community, and social well-being.</td>
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<td><strong>Social workers:</strong></td>
<td><strong>Social workers:</strong></td>
<td><strong>Social workers:</strong></td>
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<tr>
<td>• 10.2.1 Use multi-dimensional assessment tools that include bio-psycho-social-spiritual data to assess client’s strengths, capacities, and readiness for change.</td>
<td>• 10.2.1 Use multi-dimensional assessment tools that include bio-psycho-social-spiritual data to assess client’s strengths, capacities, and readiness for change.</td>
<td>• 10.2.1 Assess organizations, communities, and policy environments using relevant theories and models.</td>
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<tr>
<td>• 10.2.2 Use differential diagnostic processes.</td>
<td>• 10.2.2 Use differential diagnostic processes.</td>
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<tr>
<td>• 10.2.3 Assess organizations, communities, and policy environments using relevant theories and models.</td>
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<td><strong>Social workers:</strong></td>
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<tr>
<td>• 10.3.1 Develop, with clients, an intervention plan that incorporates client strengths, capacities, and protective factors.</td>
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<td>• 10.3.1 Develop, with clients, an intervention plan that incorporates client strengths, capacities, and protective factors.</td>
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<tr>
<td>• 10.3.2 Use culturally appropriate clinical techniques for a range of presenting concerns identified in the assessment.</td>
<td>• 10.3.2 Use culturally appropriate clinical techniques for a range of presenting concerns identified in the assessment.</td>
<td>• 10.3.2 Use appropriate and collaborative interventions to affect organizational, community, and societal change.</td>
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<tr>
<td>• 10.3.3 Adapt appropriate intervention strategies based on continuous clinical assessment.</td>
<td>• 10.3.3 Adapt appropriate intervention strategies based on continuous clinical assessment.</td>
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<td>• 10.3.4 Use appropriate and collaborative interventions to affect organizational, community, and</td>
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<tr>
<td>• 10.4.1 Critically analyze, monitor, and evaluate interventions and program implementation and outcomes.</td>
<td>• 10.4.1 Critically analyze, monitor, and evaluate interventions and program implementation and outcomes.</td>
<td>• 10.4.1 Critically analyze, monitor, and evaluate interventions and program implementation and outcomes.</td>
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<tr>
<td>• 10.4.2 Revise intervention and program implementation plans based on ongoing process and outcome evaluation.</td>
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<td>• 10.4.2 Revise intervention and program implementation plans based on ongoing process and outcome evaluation.</td>
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III. FURTHER EDUCATIONAL OBJECTIVES

Upon completion of this course, students will be able to:

1. Re-conceptualize the assessment process using the family system as the unit of treatment.
2. Understand and use systems concepts such as circular causality and triangulation to translate the presenting issue from an “identified patient” construct to a systems / relational dynamic.
3. Be able to assess and map the structure of a family system as a map for intervention.
4. Implement clinical techniques associated with each family therapy model presented in practice with families.
5. Grasp the critical differences between traditional and post-modern family therapy approaches.

IV. COURSE REQUIREMENTS

A. Required Texts and Readings:


B. Recommended Readings


**C. Other Recommended Resources and Media:**

- [www.thebowencenter.org](http://www.thebowencenter.org)
- [www.yourmindfulcompass.com](http://www.yourmindfulcompass.com)
- [www.minuchincenter.org](http://www.minuchincenter.org)
- [www.harryjaponte.com](http://www.harryjaponte.com)
- [http://philafamily.com](http://philafamily.com)
- [http://www.psychotherapy.net/video/minuchin-family-therapy](http://www.psychotherapy.net/video/minuchin-family-therapy)
- [http://www.mri.org](http://www.mri.org)
- [http://www.jay-haley-on-therapy.com/index.html](http://www.jay-haley-on-therapy.com/index.html)
- [http://www.familytherapyinstitute.net](http://www.familytherapyinstitute.net)

**D. Course Assignments:**

* Please see detailed outline for final assignment at the end of the syllabus.

**1. Attendance and Class Presence/Participation**

Students are expected to complete all assigned readings, arrive to class on time, and be fully prepared to actively participate in all class exercises and discussions. All clinical content in discussions must be kept confidential, in keeping with the Student Confidentiality Agreement.
Missing more than two class sessions will result in a significantly reduced grade. The only exceptions are student illness (with doctor’s note), illness of immediate family member, accident/hospitalization, or death of immediate family member. Arriving to class late or leaving early (30 minutes or more) will be considered an absence. Class participation requires the student to have reviewed the readings in advance, and be fully present and engaged in the material for the entire class meeting. When in class, all pagers, cell phones, and other electronic devices should be turned off or set to silent operation. Computers or tablets should be used in class to further learning only, and not for other purposes.

Students may be called upon to facilitate class discussions, role-plays and other activities as part of their participation grade. There may be other videos and short assignments required throughout the course.

2. Application of Theory Writing Exercise (Due Class #8)

This assignment will consist of an in-class writing exercise. Students will develop answers to short essay questions based on the film: “The Squid and The Whale*. The film will be viewed outside of class. This exercise will require students to actively apply family systems theoretical constructs to the family in the film. Students should be prepared to develop a treatment plan and intervention for the family in the film based on the models studied in class. The exercise will consist of 10 short essay questions and will be open book / open note.

* This film was chosen for its excellent portrayal of family system dynamics. However, it is rated R for ‘strong sexual content’ and ‘graphic dialogue and language.’ For those students sensitive to this content, please see instructor for alternate film options.

3. Family Clinical Interview (Due Class #12)

Students will compose a portion of a clinical interview in the style of a process recording based on a case provided by the instructor. Students will develop a therapist / family dialogue based on the provided case material in order to demonstrate engagement and intervention with a given family system. In the context of the session narrative, students will identify and label 6 different clinical intervention techniques. Students will describe each technique and give a rationale for its use in the context of their interview. Students will provide analysis regarding why this particular technique may be appropriate and effective. This is a take-home assignment and students can use any notes or materials from the class.

4. Student Choice: Family Theory Application Paper or Family Therapy Video Role Play (Due Class #14)

Option #1: Scholarly Paper: Students will develop and write a 12-page scholarly paper analyzing the family system from The Namesake by Jhumpa Lahiri. Students will present a description of the presenting problem(s). Who are the family members who present for treatment and what is their storyline? Students will identify a family theory or model to apply to work with this family. The family will be assessed using at least three concepts from the chosen theory or
model. Students will name and define each concept and explain how it will be applied to this family. Assessment will include, wherever it is applicable, a discussion of values and ethics, social and cultural diversity, parenting issues, boundaries, hierarchy, power, marital issues, social and economic justice and the quality of social work services. Finally, students will apply at least three techniques from their chosen theory or model of practice. Techniques will be defined and actively applied to the family system.

* Students may choose another novel to use for this assignment upon approval of the instructor.

**Option #2: Family Therapy Video Role Play:** This assignment is designed to give students practice in engaging in various family therapy modalities, and to learn to apply modalities to actual practice situations.

Students choosing this assignment will be divided into groups of 4-5. Each group will be assigned a particular family and a case study vignette. Each student is responsible for leading a 10-15 minute family session in which he/she demonstrates mastery of one of the therapy approaches discussed in the class. Students are responsible for deciding which approaches each individual worker in the role-play will take. The others are responsible for acting as members of the family. The ‘sessions’ should be run as if the assessment had already been completed so that the family and worker are now entering the implementation and use of the actual intervention(s). Each social worker is to provide a three paragraph written summary of the intervention: Goals of the therapy session, theory you were referencing, what techniques you were utilizing and why this theory was chosen.

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<td>Assignment 2</td>
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<td>Assignment 3</td>
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<td>Assignment 4</td>
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**E. Grading Policy:** The university grading system will be utilized (see policy in bulletin). The grade will be based upon the extent to which the student meets the course objectives as demonstrated by class participation and the two NCSSS required papers.

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**F. Attendance and Participation**

1. Students are expected to attend all class sessions, to arrive at classes on time, and to conduct themselves in an ethical and scholarly fashion. In the event that it is necessary for a participant to miss a class session or come late, s/he is expected to notify the
instructor in advance. Students are responsible for obtaining any class notes or other materials distributed when they are absent. Unexcused or multiple absences may result in a reduction of the final grade.

2. The use of laptops or other devices should be used in such a manner that they do not disturb or distract other students. Recording devices should only be used with the permission of the instructor and should be turned off at the request of the instructor or class participants when requested in the event that personal or confidential information is being discussed.

3. Students are expected to read all required readings for each class session and be prepared to participate in classroom discussions and exercises.

4. The course combines the formats of didactic lectures and participatory seminars. Students and the instructor will endeavor to draw on their own experience including professional practice experience, relevant literature and analytic thinking about the course content. Each student is expected to participate actively in class discussions and to come prepared to share current knowledge, ideas, and relevant experiences as appropriate. Students and the instructor will view each other as resource persons.

G. **Course and Instructor Evaluation:**

NCSSS requires electronic evaluation of this course and the instructor. At the end of the semester, the evaluation form may be accessed at [http://evaluations.cua.edu/evaluations](http://evaluations.cua.edu/evaluations) using your CUA username and password. Additional informal written or verbal feedback to the instructor during the semester is encouraged and attempts will be made to respond to special requests. These evaluations will serve as a basis for ongoing course revisions.

V. **CLASS EXPECTATIONS**

**Scholastic Expectations:**

Please refer to NCSSS Announcements, or appropriate Program Handbook for Academic Requirements, including scholastic and behavioral requirements. All written work should demonstrate communication ability consistent with graduate level performance, reflect the original thinking of the writer, cite references where material is quoted or adapted from existing sources, adhere to APA format, and be carefully proofread by the student before submission to the instructor for grading.

**Academic Honesty:**

Joining the community of scholars at CUA entails accepting the standards, living by those standards, and upholding them. Please refer to University Policy and Appropriate Program Handbooks.

**Accommodations:**
Students with physical, learning, psychological or other challenges wishing to request accommodations must identify themselves with the Disability Support Services (DSS) and submit documentation of a disability. Once you have documented a disability, DSS will establish whether any accommodations or academic adjustments are required. If so, please arrange a meeting with the instructor as soon as possible to discuss these accommodations.
CLASS SCHEDULE

Topics and Readings

Class 1  Course Introduction: Evolution of Family Therapy and Understanding Systems Thinking

- History and Evolution of Family-Centered Practice
- Changing Contexts and Definitions of Family
- Discussion of Settings; Social Work Roles in Family Engagement
- Creating Opportunity for Family Interventions
- Differences Between Family and Individual Interventions
- Systems Theory: Feedback, Circular Causality, Homeostasis

Required Reading:


Recommended Readings:


Class 2  Engaging with the Family as the Unit of Treatment

- Informed Consent and Confidentiality Issues
- Joining and Accommodation with the Family
- Rapport Building Vs. Information Gathering
- Contracting for Change with the Family
- When Family Therapy is Contra-indicated
- Family Boundaries and Engagement
Initial Interventions – Changing Emotional Climate and Building Hope for Change

**Required Reading:**


**Recommended Reading:**


**Class 3:**  
**Family Assessment**

Overview of Family Assessment  
Assessing Family Dynamics  
Assessing Strengths / Resilience  
Identification of Stressors / Maladaptive Patterns  
Family Developmental Perspective / Life Cycle Issues
Ecomap / Genogram / Ecological Assessment Use in Practice
Organizational Issues in Assessment and Theory Application

**Required Reading:**

Graybeal, C. (2001). Strengths-based social work assessment: Transforming the

Lebow, J. & Stroud, B. (2012). Assessment of effective couple and family functioning:
Prevailing models and instruments. In F. Walsh (Ed.) *Normal family processes:
Growing diversity and complexity* (pp. 501-528). New York, NY: The Guilford
Press.

approach.* Chapter 3 (pp. 64-108).


**Recommended Reading:**

(Ed.), *Family therapy in transition* (pp. 125-171). Boston, MA: Little, Brown
and Company.

Robinson, P. (2002). The cultural genogram: Experiences from within a marriage
and family therapy training program. *Journal of Marital and Family Therapy,
28*(20), 165-178.

**Class 4:** Multigenerational / Bowenian Family Therapy (Assessment)

Bowenian Family Therapy History and Development
Multigenerational Transmission Process
Relationship Triangles
Differentiation of Self
Emotional Cutoff
Sibling Position
Nuclear Family Emotional Process

**Required Reading:**

Georgetown Family Center. pp 1-43.

**Recommended Reading:**


**Class 5: Multigenerational / Bowenian Family Therapy (Treatment)**

Application of Bowenian Concepts to Case Material  
Interventions – Decreasing Emotional Reactivity  
Family Projection Process  
Use of Genogram in Clinical Interventions  
Process of De-Triangulation  
Increasing Differentiation within a Family System  
Critiques of the Bowenian Therapy Lens through Feminist, Cultural, and Relational Perspectives

**Required Reading:**


**Recommended Reading:**


**Class 6:** Structural Family Therapy (Assessment)

- Psychosomatic Families
- Rigid vs. Enmeshed Boundaries
- Family Subsystems
- Family Hierarchy: Alignment, Power, and Coalitions
- Relationship Complementarity

**Required Reading:**


**Recommended Reading:**


**Class 7:** Structural Family Therapy (Treatment)

- Application of Structural Concepts to Case Material
- Intervention in Structural Family Therapy
- The Re-Structuring of a Family System
- Enactments as a Therapeutic Tool
- Therapist Engagement and Reframing
- Directive Therapist Vs. Active Therapist
- Reinforcing Positive Structural Elements
- Critiques of Structural Methods

**Required Reading:**


**Recommended Reading:**


**Class 8:** Strategic Family Therapy (Assessment and Treatment)

- The Meaning of Symptoms
- MRI Approach
- Positive and Negative Feedback Loops
- Report and Command Communication
- Paradoxical Interventions
- First and Second Order Change
- Assignments, Directives and Tasks
- The Milan Model

**Required Reading:**


**Recommended Reading:**


**Class 9:** Solution-Focused Family Therapy (Assessment)
The Family’s Theory of Change
Circles of Care Ecomaps
Questioning to Guide Solution-Focused Assessment
Scaling
The Miracle Question
Post-Modern Collaborative Approaches

**Required Reading:**


**Recommended Reading:**


**Class 10: Solution-Focused Family Therapy (Treatment)**

Application of Solution-Focused Concept to Case Material
Questions as Intervention
Brief Therapeutic Interventions
Cognitive Envisioning and Behavioral Activation
Relationship Questioning
What’s Better?
Structure of a Solution-Focused Session

**Required Reading:**


**Recommended Reading:**


**Class 11: Narrative Family Therapy (Assessment)**

Co-Authoring Experience  
Supporting the Family in Telling Their Story  
Process of Externalization  
Viewing the Problem as a “Being” (belief, practice, feeling, attitude)  
Deconstruction and Plot Thickening  
Framing the New Narrative

**Required Reading:**  


**Recommended Reading:**  


**Class 12: Narrative Family Therapy (Treatment)**

Application of Narrative Concepts to Case Material  
Use of Narrative Questioning Techniques: Circular Questioning  
Opening Space and Preference Questions  
Story Development and Meaning Questions  
Plotting the Family Story in the Landscape of Consciousness
Plotting the Family Story in the Landscape of Action
Process of Co-Construction with Families

**Required Reading:**


**Recommended Reading:**


**Class 13:**  
**Family Therapy Interventions with Mandated Clients**

Motivation and the Concept of Resistance through a Solution-Focused Lens
Parallels of Motivational Interviewing and Solution-Focused Work
Stages of Change in a Family System
Techniques for Working with Mandated Clients
Trauma through a Strengths-Based Lens
Organizational Issues Impacting Use of Solution-Focused Approach

**Required Reading:**


**Recommended Reading:**


**Class 14: Working with Parenting / Child Issues: Focus on Attachment**

Increasing Positive Attachment
Working with Parents on Validation and Attunement
Issues Related to Attachment Disturbance
Filial Therapy
Supporting Parents with Positive Behavioral Interventions

**Required Reading:**


**Recommended Reading:**


## SSS 822 – Class Schedule with Corresponding Dates and Assignments

<table>
<thead>
<tr>
<th>Date</th>
<th>Class Session</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/29</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>9/5</td>
<td>LABOR DAY HOLIDAY – NO CLASS</td>
<td></td>
</tr>
<tr>
<td>9/12</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>9/19</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>9/26</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>10/3</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>10/10</td>
<td>COLUMBUS DAY HOLIDAY – NO CLASS</td>
<td></td>
</tr>
<tr>
<td>10/17</td>
<td>6</td>
<td></td>
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<tr>
<td>10/24</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>10/31</td>
<td>8</td>
<td>Application of Theory Writing Exercise</td>
</tr>
<tr>
<td>11/7</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>11/14</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11/21</td>
<td>11</td>
<td>Family Clinical Interview Handed Out</td>
</tr>
<tr>
<td>11/28</td>
<td>12</td>
<td>Family Clinical Interview Due</td>
</tr>
<tr>
<td>12/5</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>12/12</td>
<td>14</td>
<td>Student Choice Assignment Due</td>
</tr>
</tbody>
</table>
Professional Conduct

Class participation is more than mere attendance. It is arriving on time, reading the assigned material, preparing for class with questions, contributing appropriately to class discussions, doing assignments, and participating in class activities. The class participation grade is a subjective grade given by the professor. The professor will use this matrix to determine the class participation grade (modified from Maznevski, M. (1996). Grading Class Participation. Teaching Concerns. http://www.virginia.edu/~trc/tcgpart.htm).

<table>
<thead>
<tr>
<th>Points</th>
<th>CLASS PARTICIPATION GRADING CRITERIA</th>
<th>(Carpenter-Aeby, 2001)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No effort</td>
<td>Absent</td>
</tr>
<tr>
<td></td>
<td>No effort, disruptive, disrespectful.</td>
<td></td>
</tr>
<tr>
<td>60-70</td>
<td>Infrequent Effort</td>
<td>Present, not disruptive (This means coming in late.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tries to respond when called on but does not offer much.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Demonstrates very infrequent involvement in class.</td>
</tr>
<tr>
<td>70-80</td>
<td>Moderate Effort</td>
<td>Demonstrates adequate preparation: knows basic case or reading facts, but does not show evidence of trying to interpret or analyze them.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Offers straightforward information (e.g. straight from the case or reading), without elaboration or very infrequently (perhaps once a class).</td>
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<tr>
<td></td>
<td></td>
<td>Does not offer to contribute to discussion, but contributes to a moderate degree when called on.</td>
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<tr>
<td></td>
<td></td>
<td>Demonstrates sporadic involvement.</td>
</tr>
<tr>
<td>80-90</td>
<td>Good Effort</td>
<td>Demonstrates good preparation: knows case or reading facts well, has thought through implications of them.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Offers interpretations and analysis of case material (more than just facts) to class.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Contributes well to discussion in an ongoing way: responds to other students’ points, thinks through own points, questions others in a constructive way, offers and supports suggestions that may be counter to the majority opinion.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Demonstrates consistent ongoing involvement.</td>
</tr>
<tr>
<td>90-100</td>
<td>Excellent Effort</td>
<td>Demonstrates excellent preparation: has analyzed case exceptionally well, relating it to readings and other material (e.g., readings, course material, discussions, experiences, etc.).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Offers analysis, synthesis, and evaluation of case material, e.g. puts together pieces of the discussion to develop new approaches that take the class further.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Contributes in a very significant way to ongoing discussion: keeps analysis focused, responds very thoughtfully to other students’ comments, contributes to the cooperative argument-building, suggest alternative ways of approaching material and helps class analyze which approaches were effective.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Demonstrates ongoing very active involvement.</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100 points</td>
<td></td>
</tr>
</tbody>
</table>
SSS 822 Spring 2016

SSS 822: Clinical Social Work with Families
Final Assignment Instructions

Option #1: Video Role-Play

This assignment is designed to give students practice in engaging in various family therapy modalities, and to learn to apply modalities to actual practice situations. It is also hoped that students will gain confidence in working with others, and in having work critiqued by a supervisor.

Students will work in groups of no more than 5 and no fewer than 3. (Students can also find other individuals to be the “actors” in their role-play videos. This is at student discretion). Each student will choose a family to portray in their video. This family system can be one that the student has worked with in field placement or a family the student knows personally. All names should be changed to protect confidentiality. Students should write a one-page brief description of the family and a statement of the presenting issue(s) to be turned in with the video.

*The student may also choose to be assigned a family case study vignette by the instructor if they do not have a family of their own to use.

Each student is responsible for leading a 10-15 minute family session in which he/she demonstrates application of one of the therapy approaches discussed in the class (e.g., Structural, Narrative, Bowenian, Solution-Focused, Strategic, etc.).

The ‘sessions’ should be run as if the assessment had already been completed so that the family and worker are now entering the implementation phase and use of actual interventions. Note: students will be graded on use of self to include gestures, questions, eye-contact, etc.

Students are expected to record these interviews. You may do this in your home, office, or classroom. The production quality must be adequate so that the instructor can see gestures, facial expressions, etc. Please make every effort to do so in a room that replicates a clinical office. That means that artwork, furniture and surroundings should be relatively innocuous and not distracting.

Each student is to provide a three paragraph written summary of the intervention to include: 1) Goals of the therapy session, 2) theory you were referencing, 3) techniques you were utilizing (at least 3), and 4) rationale for why this theory was chosen. Finally, students will complete the three-question self-assessment form at the end of this assignment.

The final assignment should include all of the following to be turned in:

1) 10-15 minute video presentation
2) 1-page brief description of family and presenting issue
3) 3 paragraph written summary of session as detailed above
4) Self-Assessment
## Video Grading Matrix:

<table>
<thead>
<tr>
<th>Demonstrate professionalism in tone of voice, body language, dress and demeanor.</th>
<th>15 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates ability to implement clinical techniques associated with chosen theory. The session should include at least 3 specific techniques.</td>
<td>30 points</td>
</tr>
<tr>
<td>Demonstrates ability to ensure that all family members are participating and afforded the opportunity to feel safe and respected.</td>
<td>15 points</td>
</tr>
<tr>
<td>Demonstrate an understanding through a written summary the goals, theory and technique used.</td>
<td>20 points</td>
</tr>
<tr>
<td>Demonstrate ability to self-reflect by completing a self-evaluation form.</td>
<td>20 points</td>
</tr>
</tbody>
</table>

### Three-Question Self-Assessment

1. What did you do that you liked? (Not what was good)

2. If you could do it over again what would you change? (Not what was bad)

3. What help/support do you need from_______ (Yourself, supervisor, teachers, friend, etc.) to do it the way you want next time?
Option #2: Family Theory Application Paper

Students will compose a 10-12 page scholarly paper which provides a clinical assessment of the family from The Namesake by Jhumpa Lahiri. Students can choose to assess the family system at any point in time over the course of the novel. Students will write from the perspective of a family systems informed social worker to whom the family has come to for treatment of a specific issue. Students may compose their paper in a 1st person narrative.

*Students may choose a family from a different novel with prior approval from the instructor.

This paper is not a full research paper but should include at least 5 references. At least 3 of the references should be source material not included in the class readings and assignment list.

Students will:

1) Present a description of the presenting problem(s). Who are the family members who present for treatment and what is their storyline? Why have they come to see you at this point in time?

2) Identify the family theory or model you would use with this family. Identify specific goals related to your theory. Assess this family using at least three concepts from your chosen theory or model. Name and define each concept and explain how it will be applied to this family.

3) Apply at least three techniques from your chosen theory or model of practice. Define them and explain how they would be applied to this family. Give examples of how you might intervene with these techniques.

4) Throughout your paper and wherever applicable, provide a discussion of issues related to social and cultural diversity as well as clinical social work values. What issues in these areas impact your choice of treatment model and application of intervention strategies.

Theory Paper Grading Matrix:

<p>| Quality of writing. Includes organized introduction, thesis statement, and conclusion. Minimal grammatical errors. | 20 percent |
| Focused and well-organized use of references and citations. | 10 percent |
| Addresses cultural and ethical issues related to treatment. | 10 percent |
| Reader is oriented to reason for client family seeking treatment. Presenting issues are clearly described. | 10 percent |</p>
<table>
<thead>
<tr>
<th>Logical choice of theory for family in question. Theory is clearly defined and articulated. Clinical rationale for choice of theory is provided.</th>
<th>25 percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment interventions are consistent with theory and goals. Interventions fit needs of family as well as chosen modality.</td>
<td>25 percent</td>
</tr>
</tbody>
</table>