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COURSE TITLE/SECTION: SOCW 7318 (25264) Transtheoretical Clinical Social Work
Practice: Cognitive Behavioral Interventions (CBI)

TIME: Tuesdays 1:00pm – 4:00pm **Room:** SW 107B

FACULTY: Dr. Monit Cheung, PhD, LCSW, **OFFICE HOURS:** Tuesdays & Wednesdays 4-6pm,
Professor Office: SW422

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I. Course

A. Catalog Description

Cr. 3(3-0). Prerequisite: Foundation; Prerequisite or Concurrent with SOCW 7324 (Clinical Applications of DSM in Social Work). Provides theoretical content to gain knowledge and develop advanced clinical skills in the application of Motivational Interviewing, Cognitive-Behavioral Theory, and Dialectical Behavior Therapy.

B. Purpose

To expose advanced students to evidence-based clinical social work theories and interventions, emphasis is on the development of clinical social work practice skills in Motivational Interviewing, Cognitive-Behavioral Theory, and Dialectical Behavior Therapy.

II. Course Objectives

Upon completion of this course, students will be able to demonstrate the following objectives:

1. Understand the role of clinical social workers in the development and utilization of theoretical, conceptual and empirical knowledge bases of selected practice theories. (Professional Identity, HBSE)
2. Develop an understanding of the key constructs, concepts, themes, and techniques that characterize the selected theories for transtheoretical applications. (HBSE, Practice)
3. Explore the common factors across the selected theories for practice, including techniques and characteristics for achieving therapeutic outcomes. (Critical Thinking, Practice, Research)
4. Analyze the strengths and limitations associated with selected theories for practice with diverse clients, issues and settings. (Diversity, Practice, Professional Context)
5. Utilize a strengths perspective to select and apply the selected theories with skills and techniques that are used in a culturally competent manner across individual, group, community and societal settings (Diversity, Professional

- Context, Practice)
6. Demonstrate through hands-on practice the selection and application of various skills and techniques from the selected models for clinical practice. (Critical Thinking, Practice)
 7. Identify the potential challenges inherent in the application of selected theories and apply professional and ethical guidelines to address them. (Values & Ethics, Justice, Practice)

III. Course Content

This course will include the following topical (content) areas:

- Motivational Interviewing Theory & Practice
- Cognitive-Behavioral Theory & Practice
- Dialectical Behavior Therapy: Theory & Practice

Motivational Interviewing Theory and Practice

Module Description: Motivational Interviewing (MI) is a person-centered, directional, evidence-based counseling method utilized to elicit and strengthen intrinsic motivation for positive change. Researchers have demonstrated the effectiveness of MI with behaviors such as substance abuse, smoking cessation, diet and exercise, and high risk sexual behaviors. Much of the evidence for MI and adaptations of MI (AMI) comes from randomized control trials. This course will introduce students to the basic underlying spirit, person-centered counseling style, language of change, and processes of MI. Theory, evidence base, and skills of MI will be taught synergistically in an effort to provide an experiential process of learning. Students will be given opportunities to practice skills and will receive continual coaching on their use of skills and embodiment of MI spirit. Because of the brevity of the course, this four week module will focus primarily on evidence based skills used in MI across various settings and populations that are familiar to professional social workers.

Module Objectives: Upon completion of the 4 week module the student will be able to:

1. Understand and demonstrate the basic concepts, spirit and core strategies of MI.
2. Apply basic skills of open ended questions, reflective listening, affirming and summarizing statements.
3. Understand the Transtheoretical Model of Change and how it relates to MI.
4. Understand how MI aligns with social work values and how MI can be applied in social work settings.
5. Critically evaluate the empirical literature on MI.
6. Understand ethical dilemmas of discussing motivation for change in restricted settings or other limiting scenarios.
7. Apply MI in a culturally competent manner.
8. Appreciate the methods and theory of application of Motivational Interviewing in diverse populations and settings.

Cognitive-Behavioral Theory and Practice

Module Description: The Cognitive-Behavioral Therapy (CBT) Module in this advanced clinical practice course will focus on the acquisition and practice of behavioral and cognitive-behavioral skills and techniques as applied to disorders commonly seen by social workers in family clinics, group health clinics, community mental health centers, psychiatric hospitals and other settings where social and emotional problems are treated. Students will gain knowledge of behavioral terminology and principles, and will acquire and practice clinical skills and techniques that form the basis of CBT treatment protocols for mood and anxiety disorders, which have broader applicability to other disorders and conditions. The emphasis is on skill-building, and students will spend the bulk of their time learning and practicing skills and techniques through observation and dyadic role-playing. Students will also learn to evaluate their use-of-self as therapists in these exercises.

Module Objectives: Upon completion of the 4 week module, students will be able to:

1. Articulate the theoretical foundations of behavioral and cognitive-behavioral change strategies.
2. Implement a variety of behavioral and cognitive-behavioral techniques, with a focus on selecting and applying techniques from evidence-based protocols for mood and anxiety disorders; individualizing clinical approach and methods for specific clients; and evaluating the therapist's own use of self in exercises.
3. Discuss issues related to the use of behavioral and cognitive-behavioral therapy techniques with individuals of different races, ethnicities, cultures, classes, genders, sexual orientations, religions, physical and mental abilities, ages and national origins, as well as values and ethics within the context of legal and NASW code guidelines.
4. Recognize and articulate the strengths and limitations of various behavioral and cognitive-behavioral techniques.

Dialectical Behavior Therapy: Theory and Practice

Module Description: The Dialectical Behavior Therapy (DBT) Module in this advanced clinical practice course will focus on the acquisition and practice of DBT skills and techniques as applied to the treatment of chronic suicidality and self-injurious behaviors in clients with Borderline Personality Disorder (BPD) and other related psychiatric diagnoses (e.g., Eating Disorders, Mood and Anxiety Disorders, and Substance Abuse Disorders). Students will learn about the biological, social and psychological characteristics of individuals with BPD and other psychiatric disorders that involve problems related to behavior and mood regulation. Students will gain knowledge of the theoretical perspectives, empirical foundations, and treatment strategies of DBT, including mindfulness and acceptance strategies, and will be able to select and use appropriate techniques in their practice. The emphasis is on skill-building, and students will spend the bulk of their time learning and practicing skills and techniques through observation and dyadic role-playing.

Module Objectives: Upon completion of this 4 week module, students will be able to:

1. Articulate the biological, social and psychological characteristics of individuals with BPD and other psychiatric disorders that involve problems related to behavior and mood regulation.
2. Describe the theoretical perspectives, empirical foundations, and treatment strategies of DBT, including mindfulness and acceptance strategies.
3. Assess clients within a DBT framework, identify targets for change, and evaluate the impact of the skills and strategies used.
4. Discuss and critically review the empirical evidence for DBT.
5. Describe the professional and ethical guidelines relevant to working with clients with chronic mental health issues.

IV. Course Structure

The main focus of the course is skill acquisition. There will be limited lecturing and students must read assigned materials and view assigned videos prior to class. The initial class of each module will be devoted to an overview of that particular change orientation (i.e., MI, CBT, and DBT), a discussion of its theoretical underpinnings and empirical evidence, and a synopsis of the different techniques and specific skills drawn from that change orientation. The bulk of time in each module will be devoted to learning about evidence-based practice and practicing the skills through case demonstrations.

This 14-week course will follow the following structure:

- a. First 2 classes: Orientation to the course, overview of Evidence-Based Practices in Social Work, and discussion of the Transtheoretical Model of Behavior Change and Common Factors Approaches to clinical social work practice. Design of case vignettes and case practice demonstrations
- b. Classes 3 through 6: Motivational Interviewing Module
- c. Classes 7 through 10: Cognitive-Behavioral Therapy Module
- d. Classes 11 through 14: Dialectical Behavior Therapy Module
- e. 14th Class: Wrap-Up, discussion of integrated practice

V. Textbooks

A. Required Textbooks. All required books have been placed on 2-hr library reserve.

1. Corey, G. (2013). *Theory and practice of counseling and psychotherapy* (9th ed.). Belmont, CA: Brooks/Cole. (particularly Chs. 9-11, 15-16)
2. Linehan, M. M. (2015). *DBT skills training manual* (2nd ed.). New York, NY: The Guilford Press.
3. Miller, W. R., & Rollnick, S. (2013). *Motivational interviewing: Helping people change* (3rd ed.). New York, NY: The Guilford Press.
4. GCSW Self Care Website: <http://self-care.wix.com/exercises>

5. Cheung, M., & Leung, P. (2008). *Multicultural practice and evaluation: A case approach to evidence-based practice*. Denver, CO: Love Publishing Co. For case dialogues, Cheung & Leung book provides examples specific to some modules (see Chs. 11, 12, and 15):

Here are the steps to access this ebook:

- Visit our main website at <http://info.lib.uh.edu>
- Click on "catalog" and type "Multicultural Practice & Evaluation" into the box.
- Click the first link to our e-book version
- Click "See all full text options for UH main campus"
- Click on the link for "Education Research Complete"
- If you are off-campus, you will then be prompted to enter your CougarNet username and password
- On the right hand side, you should see a link that says "+2008" under "All Issues." and then you can click on that link and it will pop up another 2008 link that you need to click on.
- You will then be taken to a page with access to each section/chapter of the e-book. You can click on the "PDF Full text" link to get direct access to each section or you can click on the title to view the abstract and bibliographic information.

B. Journal Articles. Peer-reviewed journal articles will be assigned as well. The UH library has full text articles online through the electronic resources section. Students are also encouraged to register for remote access to the HAM-TMC Medical Library at the M. D. Anderson Library Service Desk, which has access to other mental health journal resources. Assigned journal articles will be listed in the syllabus and if accessible also posted on Blackboard.

C. Videos. In addition to the streamed video-recorded lectures and clinical videos, students can access a variety of clinical videos at the following links with your CougarNet ID and Password access:
<http://search.alexanderstreet.com.ezproxy.lib.uh.edu/ctiv> (Counseling & Therapy)
<https://uh-kanopystreaming-com.ezproxy.lib.uh.edu/> (Kanopy)
<http://psyctherapy.apa.org.ezproxy.lib.uh.edu/> (Psyctherapy)

D. Additional Readings. See Blackboard

VI. Course Requirements

Attendance Policy: You must attend the first meeting for your continuous enrolment in this course. If you miss a class or more than one hour of a class, regardless of reasons, two points (-2) will be reduced from your final grade. Make-up assignments to get up to 1.5 point back may be available if you schedule a meeting with the instructor within 2 weeks of the absence. Students who are absent for 10 hours, regardless of reasons, must withdraw from the course or receive an automatic F grade. If you miss any assignment, you cannot pass this course and must re-take it when this course is offered again. Since this class is a part of your professional preparation, the same level of professionalism is expected of all students. Do not use your phone or other electronic devices in class except for viewing course materials for the lecture. As a responsible professional, you must

observe **self-discipline in class**.

1. **Class Participation & Quizzes** (25% of final grade). Students must complete all required readings, view all assigned clinical videos prior to class, engage in role play activities, prepare to be a co-therapist, and actively participate in class discussions. Prepare skill analysis from videos watched prior to class and submit your summary via Blackboard after class. Additionally, quizzes will be used to reflect reading preparation, which must be submitted via Blackboard prior to the posted due date (if you have completed the first attempt before 1pm prior to the first day of the module, you will get two additional attempts to complete the quiz by the due date).
2. **Current-Event Case Vignette and Case Dialogue/Demonstrations (one per module)** (55% of final grade). Three students will form a group to write a case vignette for role play based on a current event. Prepare your case vignette by Week2 and share the case summary in class, with ppt and current event source/reference. Under each treatment module through role plays, practice the use of specific skills and techniques from the module with the client(s) in this same vignette. In these role plays, each student must practice three roles: therapist, client, and supervisor. Submit your case vignette by 2/2 and each ppt file and final dialogues via Blackboard by 11:59pm on the date of presentation. Time allotted for each demonstration: 10 minutes
3. **Evidence-Based Practice Presentation** (20% of final grade). Each student will be assigned a practice modality (MI, CB or DB) to research and present in class (one article from the bibliography list will be assigned and one journal article from another credible source can be chosen). The goal of this presentation is to specify techniques suggested by the literature for the specific modality and identify empirical evidence to support CBI skill applications in clinical social work. Submit your final ppt file via Blackboard by 11:59pm on the date of your presentation. Time allotted: 10 minutes

VII. Evaluation and Grading

The following standard grading scale has been adopted for all courses taught in the college.

A =	96-100% of the points	C+ =	76-79.9%
A- =	92-95.9%	C =	72-75.9%
B+ =	88-91.9%	C- =	68-71.9%
B =	84-87.9%	D =	64-67.9%
B- =	80-83.9%	F =	Below 64%

VIII. Policy on grades of I (Incomplete):

The grade of "I" (Incomplete) is a conditional and temporary grade given when students are either **(a)** passing a course or **(b)** still have a reasonable chance of passing in the judgment of the instructor but, for non-academic reasons beyond their control have not completed a relatively small part of all requirements.

Students are responsible for informing the instructor immediately of the reasons

for not submitting an assignment on time or not taking an examination. Students must contact the instructor of the course in which they receive an "I" grade to make arrangements to complete the course requirements. Students should be instructed not to re-register for the same course in a following semester in order to complete the incomplete requirements.

The grade of "I" must be changed by fulfillment of course requirements within one year of the date awarded or it will be changed automatically to an "F" (or to a "U" [Unsatisfactory] in S/U graded courses). The instructor may require a time period of less than one year to fulfill course requirements, and the grade may be changed by the instructor at any time to reflect work completed in the course. The grade of "I" may not be changed to a grade of **W**.

IX. Policy on academic dishonesty and plagiarism

Students are expected to demonstrate and maintain a professional standard of writing in all courses, do one's own work, give credit for the ideas of others, and provide proper citation of source materials. Any student who plagiarizes any part of a paper or assignment or engages in any form of academic dishonesty will receive an "I" for the class with a recommendation that a grade of F be assigned, subsequent to a College hearing, in accordance with the University policy on academic dishonesty. Other actions may also be recommended and/or taken by the College to suspend or expel a student who engages in academic dishonesty.

All presentations, papers and written assignments must be fully and properly referenced using APA style format (or as approved by the instructor), with credit given to the authors whose ideas you have used. If you are using direct quotes from a specific author (or authors), you must set the quote in quotation marks or use an indented quotation form. For all direct quotes, you must include the page number(s) in your text or references. Any time that you use more than four or five consecutive words taken from another author, you must clearly indicate that this is a direct quotation. Please consult the current APA manual for further information.

Academic dishonesty includes using any other person's work and representing it as your own. This includes (but is not limited to) using graded papers from students who have previously taken this course as the basis for your work. It also includes, but is not limited to submitting the same paper to more than one class. It also includes securing another person to complete any required activities, assignments, quizzes, papers, or exams in an online course, or in any on-line environment. If you have any specific questions about plagiarism or academic dishonesty, please raise these questions in class or make an appointment to see the instructor. This statement is consistent with the University Policy on Academic Dishonesty that can be found in your UH Student Handbook.

X. Course Schedule and Reading Assignments

Please note that instructor's ppt file and additional readings for each class period will be posted on Blackboard two days prior to class time.

Week 1: January 19, 2016

Orientation to the Course:

1. Overview of evidence-based practices in social work
2. Transtheoretical model of behavior change
3. Common factors approaches to clinical social work practice

Required Readings (for class discussions):

- Corey (2013), Ch. 2 (Personal and Professional Self)
- Corey (2013), Ch. 3 (Ethical Issues in Clinical Practice)

Blackboard Readings:

- Prochaska & Norcross (P&N) (2014), Ch. 1 (Defining and Comparing the Psychotherapies); Book at reserve library, chapter and P&N ppt file on Blackboard
- Cameron & Keenan (2010). The common factors model.
- Sprenkle, Davis, & Lebow (2009), Ch. 2 (A Brief History of Common Factors)

Week 2: January 26, 2016

Current Event and Case Vignette Planning

Case Vignette Sharing: Prepare a presentation about your case, two students per case, as it relates to a current event in a society or in the U.S.

DUE: Case Vignette Intake Summary (Feb 2, 2016 by 11:59pm)

Week 3: February 2, 2016

Motivational Interviewing (1):

1. Introduction to MI; Spirit of MI
2. Questions Regarding Each MI Process
3. Method of MI: Engaging, Focusing, Evoking, Planning, Evaluating

Watch prior to class: Core Concepts of MI (with Cathy Cole and William Miller) (2 hrs): <https://uh-kanopystreaming-com.ezproxy.lib.uh.edu/video/core-concepts-motivational-interviewing>

Required Readings (prior to class):

- Miller & Rollnick (2013), Chapters 1-7

Blackboard Readings:

- Tools posted: Foundations of MI; Readiness ruler; support client ability; MI-OverviewPPT

Quiz#1 (due first attempt; 2 additional attempts will then be opened until 2/16 by 11:59pm)

Week 4: February 9, 2016

Motivational Interviewing (2):

4. Practice on Engaging; Practice on Focusing; Exchanging information
5. Practice on Evoking – Change talk and Sustain talk (Increasing importance)
6. Evidence-Based Presentations #1

Video (watch in class):

- Motivational Interviewing, William Miller
- Required Readings (prior to class):
- Miller & Rollnick (2013), Chapters 8-18
- Blackboard Readings: MI Tools: Traps to avoid; MI#1 to MI#5

Week 5: February 16, 2016

Motivational Interviewing (3):

7. Practice on Planning; Strengthening commitment; Supporting change
8. Practice on Applying and integrating MI in practice
9. Practice on Evaluating MI conversations
10. Evidence-Based Presentations #2

Video (watch in class):

- Building Confidence in Motivational Interviewing (with Cathy Cole)

Required Readings:

- Miller & Rollnick (2013), Chapters 19-28

Blackboard Readings: MI#1 to MI#5

Week 6: February 23, 2016

Motivational Interviewing (4):

11. MI Skills Analysis
12. Case Demonstrations: MI

Internet Reading: <http://www.racgp.org.au/afp/2012/september/motivational-interviewing-techniques/>

Week 7: March 1, 2016

Cognitive Behavior Therapy (1):

1. Overview of CBT treatment
2. Cognitive conceptualization
3. Assessment and first session
4. Behavioral activation

Required Readings:

- Corey (2013), Chs 9-11

Blackboard Readings: To be assigned

Watch prior to class: CBT: Anxiety and Fear (29 mins): <https://uh-kanopystreaming-com.ezproxy.lib.uh.edu/video/cognitive-behavioral-therapy-techniques-re-5>

Quiz#2 (due first attempt; 2 additional attempts will then be opened until 3/29 by 11:59pm)

Week 8: March 8, 2016

Cognitive Behavior Therapy (2):

5. Second session and beyond
6. Automatic thoughts
7. Evidence-Based Presentations #3

Required Readings:

- Corey (2013), Chs 9-11
- Cheung & Leung (2008), Chapters 11, 12

Blackboard Readings: CB#1 to CB#5

Video (watch in class):

- CBT: Stan with Corey

[March 15, 2016 NO CLASS – SPRING BREAK]

Week 9: March 22, 2016

Cognitive Behavior Therapy (3):

8. Disputing irrational thoughts
9. Evidence-Based Presentations #4

Video (watch in class):

- CBT: Techniques for retraining your brain—Third-wave CBT

Blackboard Readings:

- Disputing irrational thoughts
- Tools

Week 10: March 29, 2016

Cognitive Behavior Therapy (4):

10. CBT Skills Analysis
11. Case Demonstrations: CBT

Internet Reading: Self-help tools: <http://www.anxietybc.com/help-resources/cbt/self-help-cognitive-behavioural-therapy>

Week 11: April 5, 2016

Dialectic Behavior Therapy (1):

1. Rationale for using DBT skills
2. DBT strategies
3. Biosocial theory of emotional dysregulation

Watch prior to class: DBT with a female military veteran with Alexander Chapman (24 mins):

<http://psyctherapy.apa.org.ezproxy.lib.uh.edu/view/2796471/play/true/>

Video (watch in class):

- What is DBT for Adolescents

Required Readings:

- Linehan (2015), Chs 1, 5, 6

Blackboard Reading:

- DBT: A social work intervention?

Quiz#3 (due first attempt; 2 additional attempts will then be opened until 4/26 by 11:59pm)

Week 12: April 12, 2016

Dialectical Behavior Therapy (2):

4. Mindfulness skills
5. Interpersonal effectiveness skills
6. Emotion regulation skills
7. Distress tolerance skills
8. Evidence-Based Presentations #5

Video (watch in class):

- DBT: Understanding Borderline Personality Disorder

DBT Required Readings:

- Linehan (2015), Chs. 7-10

Blackboard Readings:

- DB#1 to DB#5

Week 13: April 19, 2016

Dialectical Behavior Therapy (3):

9. Chart making and treatment evaluating
10. Evidence-Based Presentations #6

Blackboard Readings:

- DB#1 to DB#5
- DBT charts

Week 14: April 26, 2016

Dialectical Behavior Therapy (4):

11. DBT skills analysis
12. Case Demonstrations: DBT

Putting it all together—wrap-up/Integrated Clinical Practice

Strengths and Limitations of Each Treatment Modality

Required Readings: Corey (2013), Chapters 15-16

Internet Reading: Self-help Tools:

http://www.dbtselfhelp.com/html/everyday_dbt.html

XI. Bibliography

General CBI:

1. Beck, J. S. (2011). *Cognitive behavior therapy: Basics and beyond* (2nd ed.). New York, NY: The Guilford Press.
2. Cameron, M., & Keenan, E. K. (2010). The common factors model: Implications for transtheoretical clinical social work practice. *Social Work, 55*(1), 63-73.
3. Dimeff, L. A., & Koerner, K. (2007). *Dialectical behavior therapy in clinical practice: Applications across disorders and settings*. New York, NY: The Guilford Press.
4. Hohman, M. (2015). *Motivational interviewing in social work practice*. New York, NY: The Guilford Press.
5. Leahy, R. L. (2003). *Cognitive therapy techniques: A practitioner's guide*. New York, NY: The Guilford Press.
6. Linehan, M. M. (1993). *Cognitive-behavioral treatment of borderline personality disorder*. New York, NY: The Guilford Press.
7. Linehan, M. M. (1993). *Skills training manual for treating borderline personality disorder*. New York: The Guilford Press.
8. Miller, A. L., Rathus, J. H., & Linehan, M. M. (2006). *Dialectical behavior therapy with suicidal adolescents*. New York, NY: The Guilford Press.
9. Naar-King, S., & Suarez, M. (2011). *Motivational interviewing with adolescents and young adults*. New York, NY: The Guilford Press.
10. O'Donohue, W., & Fisher, J. E. (Eds.) (2009). *Cognitive behavior therapy: Applying empirically supported techniques in your practice* (2nd ed.). Hoboken, NJ: John Wiley & Sons.
11. Prochaska, J. O., & Norcross, J. C. (2014). *Systems of psychotherapy: A transtheoretical analysis*. Belmont, CA: Thompson Brooks/Cole.
12. Rollnick, S., Miller, W. R., & Butler, C. C. (2008). *Motivational interviewing in health care*. New York, NY: The Guilford Press.
13. Sprenkle, D. H., Davis, S. D., & Lebow, J. L. (2009). *Common factors in couple and family therapy: The overlooked foundation for effective practice*. New York, NY: The Guilford Press.

Motivational Interviewing:

- MI#1. Field, C. A., Cabriaes, J. A., Woolard, R. H., Tyroch, A. H., Caetano, R., & Castro, Y. (2015).

- Cultural adaptation of a brief motivational intervention for heavy drinking among Hispanics in a medical setting. *BMC Public Health*, 15(1), 1-12. doi:10.1186/s12889-015-1984-y
- MI#2. Holleran Steiker, L. K. (2009). Motivational interviewing and addiction: An interview with Melinda Hohman. *Journal of Social Work Practice in the Addictions*, 9(2), 236-239. doi:10.1080/15332560902858554
- MI#3. Hyrkas, K., & Wiggins, M. (2014). A comparison of usual care, a patient-centred education intervention and motivational interviewing to improve medication adherence and readmissions of adults in an acute-care setting. *Journal of Nursing Management*, 22(3), 350-361. doi:10.1111/jonm.12221
- MI#4. McMurrin, M., Cox, W. M., Whitham, D., & Hedges, L. (2013). The addition of a goal-based motivational interview to treatment as usual to enhance engagement and reduce dropouts in a personality disorder treatment service: Results of a feasibility study for a randomized controlled trial. *Trials*, 14(1), 1-10. doi:10.1186/1745-6215-14-50
- MI#5. Tennille, J., Solomon, P., & Bohman, C. (2014). Using the FIELD model to prepare social work students and field instructors on sexuality and intimacy for persons with psychiatric disabilities. *Sexuality & Disability*, 32(4), 469-483. doi:10.1007/s11195-014-9380-6

Cognitive-Behavioral Therapy:

- CB#1. Armstrong, G., Blashki, G., Joubert, L., Bland, R., Moulding, R., Gunn, J., & Naccarella, L. (2010). An evaluation of the effect of an educational intervention for Australian social workers on competence in delivering brief cognitive behavioural strategies: A randomised controlled trial. *BMC Health Services Research*, 10, 304-312. doi:10.1186/1472-6963-10-304
- CB#2. Berlin, S. B. (1982). Cognitive behavioral interventions for social work practice. *Social Work*, 27(3), 218-226.
- CB#3. Gregory Jr., V. L. (2010). Cognitive-behavioral therapy for schizophrenia: Applications to social work practice. *Social Work in Mental Health*, 8(2), 140-159. doi:10.1080/15332980902791086
- CB#4. Ruffolo, M. C., & Fischer, D. (2009). Using an evidence-based CBT group intervention model for adolescents with depressive symptoms: lessons learned from a school-based adaptation. *Child & Family Social Work*, 14(2), 189-197. doi:10.1111/j.1365-2206.2009.00623.x
- CB#5. Wong, D., Chung, C., Wu, J., Tang, J., & Lau, P. (2015). A preliminary study of an integrated and culturally attuned cognitive behavioral group treatment for Chinese problem gamblers in Hong Kong. *Journal of Gambling Studies*, 31(3), 1015-1027. doi:10.1007/s10899-014-9457-2

Dialectic-Behavioral Therapy:

- DB#1. Bass, C., van Nevel, J., & Swart, J. (2014). A comparison between dialectical behavior therapy, mode deactivation therapy, cognitive behavioral therapy, and acceptance and commitment therapy in the treatment of adolescents. *International Journal of Behavioral Consultation & Therapy*, 9(2), 4-8.
- DB#2. Panos, P. T., Jackson, J. W., Hasan, O., & Panos, A. (2014). Meta-analysis and systematic review assessing the efficacy of dialectical behavior therapy (DBT). *Research on Social Work Practice*, 24(2), 213-223. doi:10.1177/1049731513503047
- DB#3. Rathus, J., Campbell, B., Miller, A., & Smith, H. (2015). Treatment acceptability study of walking the middle path, a new DBT skills module for adolescents and their families. *American Journal of Psychotherapy*, 69(2), 163-178.
- DB#4. Roepke, S., Schröder-Abé, M., Schütz, A., Jacob, G., Dams, A., Vater, A., ... Lammers, C-H. (2011). Dialectic behavioural therapy has an impact on self-concept clarity and facets of self-esteem in women with borderline personality disorder. *Clinical Psychology & Psychotherapy*, 18(2), 148-158. doi:10.1002/cpp.684
- DB#5. Washburn, M., & Parrish, D. E. (2013). DBT self-help application for mobile devices. *Journal of Technology in Human Services*, 31(2), 175-183.

Recommended Websites

- American Psychological Association: www.apa.org/
- Association for Behavioral and Cognitive Therapies: <http://www.abct.org/>
- Beck Institute for Cognitive Behavior Therapy: <http://www.beckinstitute.org/>
- Behavioral Tech, LLC (DBT): <http://behavioraltech.org/>
- Center for Disease Control and Prevention (CDC): <http://www.cdc.gov/>
- Effective Interventions (HIV): <https://www.effectiveinterventions.org/en/Home.aspx>
- Evidence-Based Intervention Network: <http://ebi.missouri.edu/>

Jung Center of Houston: <http://www.junghouston.org/>
Mental Health America: <http://www.nmha.org/>
Mental Health America of Greater Houston: <http://www.mhahouston.org/>
National Alliance on Mental Illness: <http://www.nami.org/>
National Association of Cognitive Behavioral Therapists: <http://www.nacbt.org/>
National Association of Social Workers: <http://www.socialworkers.org/>
National Association of Social Workers—Texas: <http://www.naswtx.org/>
National Center on Minority Health and Health Disparities <http://ncmhd.nih.gov/>
National Hispanic Council on Aging: <http://www.nhcoa.org/>
National Institute of Mental Health: <http://www.nimh.nih.gov/>
National Institute on Alcohol Abuse and Alcoholism: <http://www.niaaa.nih.gov/>
National Institute on Drug Abuse: <http://www.drugabuse.gov/>
National Registry of Evidence-Based Programs and Practices: <http://www.nrepp.samhsa.gov/>
Pew Hispanic Center: <http://pewhispanic.org/>
PsychCentral: <http://psychcentral.com/>
Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov/>
Texas Psychological Association: <http://www.texaspsyc.org/>
US Census Bureau: <http://www.census.gov/>

XII. Americans with Disabilities Statement

The University of Houston System complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, pertaining to the provision of reasonable academic adjustments/auxiliary aids for students with a disability. In accordance with Section 504 and ADA guidelines, each University within the System strives to provide reasonable academic adjustments/auxiliary aids to students who request and require them. If you believe that you have a disability requiring an academic adjustments/auxiliary aid, please contact the UH Center for Disabilities at 713-743-5400.

SOCW7318 Transtheoretical Clinical Practice (CBI)
 Video Analyses
Dr. Monit Cheung's Section
Spring 2016

Name: _____

Watch the required video per treatment modality prior to class and prepare to discuss the case and techniques in class.

1. What techniques did the speakers refer to as related to this specific treatment modality (MI, CB or DB)?

2. If there were therapeutic questions, please write down the questions used and discuss how skillful or useful these questions were for the client?

3. Had the client's situation been carried to a conclusion or solution? Do you think the situation would have improved? In what way?

4. What would you have done or said differently and how?

Use this chart when watching a video in class to summarize your observations or analyses:

From the specific treatment modality, the goal is to:	Techniques Used (quoting the therapist's Therapeutic Questions or Comments)
1. Assess the client's situation (e.g. problems presented, thinking patterns, obstacles)	
2. Break defenses or calm down the client	
3. Determine the workable or achievable outcomes	
4. Help the client find solutions	
5. Mobilize resources that can enhance client's actions	
6. Utilize the client's strengths	