

**UNIVERSITY OF PENNSYLVANIA
SCHOOL OF SOCIAL POLICY & PRACTICE**

SW714 - ADVANCED SOCIAL WORK PRACTICE: CLINICAL PRACTICE II

Spring 2019

COURSE PURPOSE

Clinical Practice II supports students as they integrate knowledge across the curriculum and refine conceptual frameworks for practice. The second of two advanced clinical practice courses builds on the analytical methods and theoretical frameworks learned in SW 704 as well as foundational theory, knowledge, and skills taught in the foundation practice courses. SW 714 extends basic knowledge about families and groups, as presented in foundation practice and human behavior courses and applies this knowledge to a range of populations and practice settings. SW714 extends knowledge about vulnerable, oppressed and diverse populations and applies the framework of social to clinical practice endeavors designed to promote social justice. SW714 builds on content on research methods and research elective courses by incorporating research findings, evaluation of group interventions, and self-evaluation in practice.

Clinical Practice II seeks to refine and extend students' practice knowledge and skills to enable intervention planning and implementation at an advanced level with family and group systems. Coursework will build on critical understandings of the nuances and complexities of clinical social work practice. Students will leave the course with enhanced capacity to make informed choices in working with populations at risk. Course content will support students' consolidation of their professional identity as dedicated to client empowerment and the promotion of social justice. Social work values, human ethics and social policies provide a context for critical analysis of intervention theories, skills, and models as applied to clinical social work practice. Students will critically analyze practice in relation to its potential to empower clients experiencing, or at risk of experiencing, social and economic injustice based on race, ethnicity, gender, sexual orientation, class, age, and disability. Students will practice intervention skills, increase their professional self-awareness, and evaluate their own practice in both class and field.

EDUCATIONAL OBJECTIVES

By the end of the semester the student should be able to understand and contribute to system change and to critically analyze her/his capacity to do so, whether working with a single client, a family, or a group. By the end of the semester the student will be able to demonstrate:

1. The ability to use theory and an understanding of interactional processes to assess and intervene with families and groups;
2. An understanding of the structure, development, and dynamics of change in therapeutic family and group systems;
3. An understanding of the dynamics of, and ways of intervening with, loss and trauma;

4. Increased self-awareness and professional use of self as a change agent in professional relationships with clients and colleagues, and with interventions in the social environment.
5. Expanded understanding of the dynamics and diverse strategies of intervention with vulnerable populations;
6. Increased ability to draw upon, and to evaluate, evidence that informs practice;
7. Expanded understanding of the interacting variables of race, ethnicity, gender, age, socioeconomic class, sexual orientation, and mental and physical disability, which shape client functioning, organizational responses, and interventions;
8. Expanded understanding of and identification with the goals and values of the social work profession as well as a commitment to ongoing professional development.

COURSE REQUIREMENTS AND EXPECTATIONS

A. Expectations for Students

- **Come to class prepared.** Read and think about the assigned readings prior to each class.
- Participate actively and relevantly in class discussions and experiential exercises.
- Submit written assignments on time.
- Demonstrate an integration of theory with field practice in class and in the field.

B. Attendance Policy.

Classroom learning is a fundamental component of your professional education. Students are, therefore, expected to attend each class, to arrive at class on time, and to be in attendance for the full class. If you are unable to attend class for any reason, you must notify your instructor in advance and propose how you will make up the content you missed. **Missing more than two classes could result in failing the course.**

C. Criteria for Evaluating your Work

1. ***Quality of written assignments:*** Papers are to be of 2nd-year graduate level quality, well documented, using APA format, and submitted on time. Evaluated on the following criteria:

- Extent to which the paper follows specified requirements of the assignment
- Organization & conceptual clarity
- Incorporation and demonstrated understanding of course concepts
- Evidence of critical thinking and engagement with the literature (no name dropping)
- Use of scholarly literature
- Quality of writing (includes spelling, grammar, punctuation)
- Integration of assignment with field experiences
- Reflection on one's use of self
- Evidence of cultural awareness

2) ***Class participation:*** attendance, demonstration of engagement with course readings and concepts through the quality of oral participation, participation in experiential exercises, evidence of preparation for class, and peer discussion assignments.

3) ***Satisfactory performance in the field***

4) ***Integration of theory and practice:*** demonstrated in both the classroom and the field.

D. Grading Policies. The final course grade is based on the student's overall performance on activities and criteria listed above. The grade above a C+ is required to pass the course. Students whose

performance is marginal or failing at midterm will be notified in writing. In order to pass this course, performance must perform at satisfactory level in class and field.

For the final grade, activities and assignments will be given the following weights:

ASSIGNMENT	DUE DATE	WEIGHT
Field Work REQUIRED Field Work Learning Contract Addendum	January 30 th	20% Pass/Fail
Simulation Reflection and Integration	February 13 th	20%
MIDTERM CHOICE: Simulated recorded interview with theoretical integration Process recording paper with theoretical integration	March 27 th	20%
Final Assignment: Group Presentation <i>Students will work in teams of 2-3 to present on a population, presenting problem, or therapeutic technique of interest.</i>	Sessions 12, 13, 14 <i>Scheduled in class w team</i>	20%
Class participation		20%
Performance in the field ***If you FAIL fieldwork, you will receive an F for this course.		Pass/Fail

E. Late Paper Policy. Extensions are granted at the discretion of your practice instructor.

F. Academic Integrity. Students are expected to conduct themselves consistent with the University of Pennsylvania's Code of Academic Integrity, which presents standards regarding plagiarism, multiple submissions and other actions. Students are expected to be familiar with the Code, which can be found at <http://www.vpul.upenn.edu/osl/acadint.html>.

- *Plagiarism*: using the ideas, data, or language of another without specific or proper acknowledgment. Example: copying, in part or in its entirety, another person's paper, article, or web-based material and submitting it for an assignment; using someone else's ideas without attribution; failing to use quotation marks where appropriate, etc.
- *Fabrication*: submitting contrived or altered information in any academic exercise. Example: making up data or statistics, citing nonexistent articles, contriving sources, etc.
- *Multiple submissions*: submitting, without prior permission, any work submitted to fulfill another academic requirement.

G. Assigned Readings. One required textbook for this course is available for purchase at the bookstore and online. Other assigned readings from textbooks and professional journals are available on CANVAS, online, and in the library.

ASSIGNMENTS

I. ADDENDED FIELD WORK LEARNING CONTRACT

Pass/Fail

After careful thought and discussion with your field instructor, submit an amended copy of your Fall 2013 Learning Contract that integrates learning objectives commensurate with your developing expertise and increasing responsibility in field. Consider objectives based on the content of the syllabus, the nature of your agency, and your individual learning objectives when updating your learning contract. Refer to your first semester field evaluation to identify and expand on learning needs. The *revised* learning contract should indicate plans for exposure to group work and family work. To the extent possible, include measurable learning objectives as well as activities, tasks and means for evaluating your progress. You and your field instructor should sign multiple copies of your addendum (for you, your field instructor, practice teacher, and/or field liaison).

**As of January 1, 2018, the NASW code of ethics includes guidelines and precautions for the use of social media related to social work practice. In response to this addition, you must include a line item addressing how you intend to learn your agency's policies about the use and abuse of social media.*

II. SIMULATION REFLECTION & INTEGRATION

Worth 20% of grade

Part 1: Integration: Identify and describe 2 interventions. One intervention should be one that you performed and then choose one that a peer performed. Then, write an in depth review of this intervention. Include approximately 2 pages about each intervention. Integrate literature into each of your descriptions. This section will be approximately 4 pages.

- How was this intervention informed by literature/theory? Choose at least one class/outside reading to situate the intervention in the literature
- Why do you think it was chosen given the presenting issues of the client?
- Assess: what worked about it? what didn't work? how could the intervention be done differently?
- How did the supervision inform your thinking/learning about this intervention?
- Demonstrate an understanding of the intervention, its basis in theory/literature it's use, it's appropriateness with certain client populations.

Part 2. Reflection: Write a 1-2 page reflection paper on your experience of the simulation addressing:

- Reflect on your skill development. What feedback did your peers and group facilitators/actors give you following your simulation scenario? Does this feedback fit with conversations you've had with your field instructor? Does this feedback fit with your evaluation of your own professional development?
- Reflect on lessons learned in preparing for, participating in, and reflecting on the simulation experience.

Use APA style, cite at least 4 references from this course syllabus or your own research, and be sure to double-space your work.

III. Select one of the following midterm assignments to complete Worth 20% of grade

Option 1: RECORDED INTERVIEW WITH A PEER: INTEGRATING THEORY

For this assignment, we are interested in gauging your progress in counseling, assessment and reflective listening skills. Choose a partner from class with whom you will work. It does not have to be the same partner you had the first time, but it is okay if you choose the same partner. Choose a scenario that proves somewhat difficult for you. The interview should last 30 to 50 minutes. The idea is that the interview flow naturally, so do not practice ahead of time! You are on the honor system to do this as an improvisation, not a performance that has been practiced many times. We are most interested in your reflection on how you did, not the role play itself. You will be graded on your reflections and analysis. You are required to video record your session, and as before, you may use any recording method that is most convenient for you (using your own phone, camera, iPad, etc.). For this review, choose 10 minutes where you were particularly skillful or had particular difficulty to show your small group for feedback. You may hand write additional notes from your group presentation onto the assignment before turning it in.

In a 5-7 page, double-spaced, APA-formatted paper, respond to the following questions:

1. What were your goals for the interview?
2. To what extent were these goals achieved?
3. What did you do that seemed to work?
4. What did you do that did not seem to work? What would you do differently if you had the opportunity to redo this interview?
5. How does your skill level compare with your work first semester? i.e., have you improved? If so, how? If not, how will you in the future?
6. What countertransference issues emerged?
7. What kinds of theory or practice knowledge (if any) did you put into action in this interview? How would you theory to explain and evaluate this interaction? *Support your theoretical analysis with 5 to 7 references from the course materials. Your answer to this question should be about 2 to 3 pages double -spaced.*
8. What areas of knowledge do you need to explore for future work with this client? *Cite at least two references from the course materials or from the relevant literature. This answer should be at least half a page double-spaced.*
9. What are your plans for the next interview? What is the basis for deciding upon this plan? *Cite a minimum of two references.*

Option 2: PROCESS RECORDING/REFLECTION PAPER: INTEGRATING THEORY

Write a 5-7 page paper in which you discuss an intervention plan with an individual or family you worked with this year. Explore this intervention using in depth discussion of one or two theoretical perspective(s) that have been discussed in SW704/714. The paper should draw from and **cite literature from the syllabus and outside scholarly sources** (at least 6 references), and should include the following components:

- a) Brief introduction of client system: client demographics (Age, culture, gender, SES, etc), reason for referral, presenting problem from client's & worker's perspective. History of presenting problem.
- b) Analysis from a theoretical perspective. Identify one or two practice theory/theories that you have studied this semester (ego psychology, structural family therapy, play therapy, ambiguous loss theory, etc.) that you used or might have used to guide intervention methods with this client.
 - Explain how theory helps you understand this client.

- Show how you are using each theory and its concepts to understand and/or assist the client.
- Discuss the kinds of intervention(s) based on this theory that you are pursuing or would pursue if you were working with this client over time. Your analysis should demonstrate a deep understanding of the theory and practice methods related to the theory. Your analysis should reflect critical thinking about the use of theory. Scholarly sources should be liberally cited throughout!

APPENDIX: Attach a process recording (3-4 pages single spaced) that illustrates your intervention with this client and includes your emotional reactions and ongoing thinking about the client, your relationship with the client, your use of self, and your application of theory.

IV. **30-MINUTE GROUP PRESENTATION (3 student max/ group)** **Worth 20% of grade**

Date of presentation to be determined by your professor prior to spring break

Each group will explore a specific challenge faced by a client population of your choice and teach the class about a supportive intervention for that. The chosen intervention **MUST** be backed up with evidence-based scholarly research! **Your practice instructor must approve your topic.** You will be graded on your knowledge of subject AND your presentation skills. Make it engaging and interesting, scholarly and professional. **EVERYONE** in the group must participate. All must be present for the presentation, but not everyone must act as a presenter.

Part A: Problem and Intervention Overview Powerpoint (10-15 minutes)

Select a specific kind of presenting problem encountered by clients of interest to your group (i.e.-veterans with PTSD, grieving older adults, traumatized children). Use of short video clips or other engaging teaching methods encouraged, but watch your time limit please. **Cite a minimum of 10 scholarly sources in your powerpoint.**

1. Provide a brief overview of the specific challenges faced by the population you chose.
 - Provide for all classmates and your professor a list of 8-10 local, internet or national resources to support this population and/or to learn more about your chosen intervention.
 - Provide your reference list to the class and your professor
2. Discuss an evidence-based intervention you identified to support healing for this client population.
 - Why did you choose this intervention or interventions?
 - How and where (what kind of agency) will it be implemented (individual, group, family based) with clients?
 - How long will intervention take (single session, multiple sessions)?
 - What evidence supports this choice?
 - Where does this intervention best fit theoretically with those we have studied this year?
 - What strengths and challenges might exist when trying to implement this intervention in a real life practice setting?
3. Make sure to email your professor a copy of your powerpoint **before your presentation date.**

PART B: Experiential Exercise with your classmates (15-20 minutes)

Offer your classmates a chance to experience your chosen intervention firsthand. Have them practice some aspect of the intervention individually, in small groups, or with you as facilitator. Classmates may role play this intervention as a client or as her/himself. Be clear and concise in your instructions and allow some time to debrief afterwards.

SCHEDULE OF CLASS SESSIONS

TRAUMA & SOCIAL WORK PRACTICE

Learning Objectives:

Introduction to the neuropsychology of trauma

Conduct a culturally sensitive, trauma-informed assessment

Understand the short- & long-term impact of trauma on attachment & development over the life course

Self-care in an intense emotional space: Distinguishing Countertransference vs. Compassion Fatigue

Session #1 Simulated training experience in crisis intervention, trauma, and community work

Date: January 16

Targeted competencies and practice behaviors:

1. Demonstrate critical thinking and engage in reflective practice.
2. Identify and articulate client strengths.
3. Attends to interpersonal and contextual factors that impact the therapeutic alliance.
4. Establish a relationally based process that encourages clients to be equal participants in the establishment of treatment goals and expected outcomes
5. Demonstrate the use of appropriate clinical techniques for a range of presenting concerns identified in the assessment, including crisis intervention strategies as needed
6. Attend to the dynamic interplay of cultural, social, physiological, and psychological factors (racism, sexism, homophobia, and other forms of oppression on the therapeutic bond, and translate into culturally competent practice during role play and debriefings.

Session #2 Introduction to Trauma

Date: January 23

Required readings:

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- Knight, C. (2015). Trauma informed social worker practice: practice considerations and challenges. *clinical social work journal*, 43(1), 25-37
- Boscarino, J. A. & Aciams, R. E. (2008). Overview of findings from the World Trade Center Disaster Outcome Study: Recommendations for future research after exposure to psychological trauma. *International journal of emergency mental health*, 10(4) 275-290.
- Markoff, L.S., Reed, B.G., Fallo, R.D., Elliott, D.E., & Bjelajac, P. (2005). Implementing trauma-Informed alcohol and other drug and mental health services for women: Lessons learned in a multisite demonstration project. *American Journal of Orthopsychiatry*, 75(4), 525-539.

Session #3 Relational Trauma

January 30 DUE TODAY: Revised Learning Contract

Required readings:

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- Gil, E. (1991). The healing power of play: Working with abused children. New York, NY: Guilford Press, pp.1-20; 192-196.
- Dittman, I. & Jensen, T.K. (2014). Giving Voice to Traumatized Youth-Experiences with Trauma Focused CBT. *Child Abuse & Neglect*, 38, 1221-1230.

BEHAVIORAL & COGNITIVE INTERVENTIONS

Session #4 Understanding Cognitive & Behavioral Theories

February 6

Learning Objectives:

Theory in the cognitive behavioral tradition

Know about evidence-based interventions, best practices, and the evidence-based research process in DBT, as well as CBT and other forms of practice.

Techniques: Cognitive restructuring, mindfulness

Articulate how acceptance and mindfulness fit into the CBT as well as social work tradition

Recommended Website-Free Trauma Focused CBT training and certificate: <http://tfcbt.musc.edu>

Classroom Activity: Introduce measurement and begin charting daily thought/event log.

Required Readings:

- Horevitz, E & Manoleas, P. (2013). Professional competencies and training needs of professional social workers in integrated behavioral health in primary care. *Social work in health care, 52(8)*, 752-787.
- Zimmerman, P. D. (2004). Psychotherapy in residential treatment: Historical development and critical issues. *Child and adolescent psychiatric clinics of North America, 3(2)*, 347-361.

Session #5 Cognitive-behavioral techniques

February 13 *DUE TOAY: Simulation Reflection Paper*

Required Readings:

- Chambers, R., Gullone, E., & Allen, N. (2009). Mindful emotion regulation: An integrative review, *Clinical Psychology Review, 29(6)*, 560-572.
- Hayes, Steven C. (Ed); Follette, Victoria M. (Ed); Linehan, Marsha M. (Ed), (2004). *Mindfulness and acceptance: Expanding the cognitive-behavioral tradition*, (pp. 1-29). New York, NY, US: Guilford Press.

Recommended Readings: Cognitive Behavioral Therapy

- *For those interested in trauma focused CBT work with children:* <http://tfcbt.musc.edu/>
- Butler, S. & Northcut, T. B. (2013). Enhancing psychodynamic therapy with cognitive-behavioral therapy in the treatment of grief. *Clinical social work journal, 41(4)*, 309-315.
- Cohen, M & Fried, G. (2007). Comparing relaxation training and cognitive-behavioral group therapy for women with breast cancer. *Research on social work practice, 17(3)*, 313-323.
- Cooper, L. (2012). Combined motivational interviewing and cognitive-behavioral therapy with older adult drug and alcohol abusers. *Health and social work, 37(3)*, 173-179.
- Craig, S. L., Austin, A. & Alessi, E. (2013). Gay affirmative cognitive behavioral therapy for sexual minority youth: A clinical adaptation. *Clinical social work journal, 41(3)*, 258-266.
- Wagner, A. W., Shireen, R. & Harned, M. S. (2007). Applications of dialectical behavior therapy to the treatment of complex trauma-related problems: When one case formulation does not fit all. *Journal of Traumatic Stress, 20(4)*, 391-400.
- Koons, C. R., Robins, C. J., Tweed, J. L., Lynch, T. R., Gonzalez, A. M., Morse, J. Q... (2001). Efficacy of dialectical behavior therapy in women veterans with borderline personality disorder. *Behavior Therapy, 32*, 371-390.

**Sessions #6 Dialectical Behavioral Therapy
February 20**

Classroom Activity: Set up 7-8 chairs in a circle in the center of the room. Ask for students to volunteer to participate in a group, facilitated at first by the faculty, in which they will discuss their charting: what they learned, how they experienced charting, did they omit or overemphasize any thoughts, etc. Once the group process and dialogue has coalesced, tap in a student in the 'peanut gallery' to take over in the fish bowl. The role of the facilitator is to use CBT &/or DBT techniques to facilitate a group discussion of thoughts and emotions tracked by participants. Should the facilitator get 'stuck' another student may tap in or be tapped in by the faculty.

Required Readings: Dialectical Behavior Therapy

- Koerner, K & Dimeff, L. A. (2007). Overview of dialectical behavior therapy. In L. A. Dimeff & K. Koerner (Eds). *Dialectical behavior therapy in clinical practice: Applications across disorders and settings* (1-18). New York, NY: Guilford
- Swenson, C. R., Witterholt, S & Bohus, M (2007). Dialectical behavior therapy on inpatient units. In L. A. Dimeff & K. Koerner (Eds). *Dialectical behavior therapy in clinical practice: Applications across disorders and settings* (69-111). New York, NY: Guilford
- Bauserman, S. A. K. (1998). Treatment of persons who self-mutilate with dialectical behavior therapy. *Psychiatric Rehabilitation Skills*, 2(2), 149-157

Required Readings: Acceptance and Commitment Therapy

- Hayes, S. C., Luoma, J. B., Bond, F. W., Masuda, A., & Lillis, J. (2006). Acceptance and commitment therapy: Model, processes and outcomes. *Behaviour research and therapy*, 44(1), 1-25.
- Roberts, A. R. (2002). Assessment, crisis intervention, and trauma treatment: The integrative ACT intervention model. *Brief treatment and crisis intervention*, 2(1), 1.

TERMINATION

Learning Objectives

Impact of termination for clients and workers
Attachment and loss in endings with clients
Termination with vulnerable clients

**Session #7-8 Termination with individuals, families, and groups
February 27 & March 13**

Required Readings:

- Lanyado, M. (1999). Holding on and letting go: some thoughts about the process of ending therapy. *Journal of child psychotherapy*. 25, (3), 357-378.
- Ryz, P., & Wilson, J. (1999). Endings as gain: The capacity to end and its role in creating space for growth. *Journal of Child Psychotherapy*, 25(3), 379-403
- Bembry, J.X. & Ericson, C. (1999). Therapeutic termination with the early adolescent who has experienced multiple losses. *Child and Adolescent Social Work Journal*, 16(3): 177-189.
- Siebold, C. (2007). Every time we say Goodbye: forced termination revisited, a commentary. *Clinical Social Work Journal*, 35 (2), 91-95.
- Zilberstein, K. (2008). Au revoir: An attachment and loss perspective on termination. *Clinical Social Work Journal*, 36: 301-311.

Session #9 GUEST LECTURES – Students are offered a slate of guest lectures and are required to attend at least one. *Students must sign in at the start and sign out at the end of the lecture.* List of guest speakers and titles will become available in early March. Guest lectures will be offered:

- Wednesday March 20th 12:00pm-2:30pm
- Thursday March 21st 12:00pm-2:30pm
- Thursday March 21st 6:45pm-9:15pm

WORK WITH SOCIAL CONSTRUCTIONIST, NARRATIVE, AND POSTMODERN APPROACHES

Learning Objectives:

Distinguish modern versus postmodern clinical practice
 Articulate and critique narrative theory
 Apply narrative therapy to a population of interest/your practice
 Become familiar with narrative therapy using art and play

Recommended Website: <http://www.dulwichcentre.com.au/articles.html>
www.dulwichcentre.com.au/what-is-narrative-therapy.html

Session #10 Theoretical Underpinnings of postmodern practice
March 27 *Midterm Due Today*

Required Readings:

- Walsh, J. (2014). *Theories for direct social work practice*. Belmont CA: Thomson Brooks/Cole. pp. 270-305. (Chapter 12).
- Hunt, Q., Russo-Mitma, G., Olsen, C. & Nelson, M. (2015). Restorying interventions: Commemorating the past & embracing the future. *Journal of family psychotherapy*, 26(1), 36-41.
- Hoffman, R.M. & Kress, V.E. (2008). Narrative therapy and non-suicidal-self-injurious behavior: Externalizing the problem and internalizing personal agency. *Journal of Humanistic Counseling, Education and Development*, 47, 157-174.
- Kim, H., Prouty, A. M. & Robertson, P. N. E. (2012). Narrative therapy with intercultural couples: A case study. *Journal of family psychotherapy*, 23(4), 273-286.

Session #11 Constructing and deconstructing narratives in family practice
April 3

Required Readings:

- Gillies, J. & Neimeyer, R. (2006). Loss, grief, and the search for significance: Towards a model of meaning reconstruction in bereavement. *Journal of constructivist psychology*, 19(1), 31-65.
- Roberts, G. A. (2000). Narrative and severe mental illness: what place do stories have in an evidence-based world? *Advances in Psychiatric Treatment*, 6, 432-441.
- Shovlin, K. J. (1999). Discovering narrative voice through play and art therapy: A case study. *Guidance & Counseling*, 14(4).
- Campbell, R. S. & Pennebaker, J. W. (2003). The secret life of pronouns: Flexibility in writing style and physical health. *Psychological science*, 14(1), 60-65.

Session #12 Narrative techniques for crafting alternate endings
April 10 Final Presentations Begin

Required Readings:

- Walsh, J. (2014), *Theories for direct social work practice*. Belmont CA: Thomson Brooks/Cole. pp. 270-305. (Chapter 12).
- Hill, N. (2011). Externalizing conversations: Single session narrative group interventions in a partial hospital setting. *Clinical social work journal*, 39(3), 279-287.
- Mahoney, A.M. & Daniel, CA. (2006). Bridging the power gap: narrative therapy with incarcerated women. *The Prison Journal*, 86(1), 75-88.
- Roberts, G. A. (2000). Narrative and severe mental illness: what place do stories have in an evidence-based world? *Advances in Psychiatric Treatment*, 6, 432-441.
- Werner-Lin, A., and D. S. Gardner. 2009. Family illness narratives of inherited cancer risk: Continuity and transformation. *Families, Systems and Health* 27.3: 201–212.
- Yong, E. (2010). Narrative therapy and elders with memory loss. *Clinical Social Work Journal*, 38, 193-202.

Session #13 LAB: Narrative techniques
April 17 Final Presentations Continue

Session #14 Final Presentations and Party
April 24

Evidence Based Intervention FINAL PRESENTATION – 30 points

STUDENTS: _____ DATE: _____

1. Identifies a unique population that seeks out or could benefit from social work intervention.

- Overview of the challenges faced by the population.
- Lists 8-10 resources for support of population or to learn about intervention
- Provides reference list for presentation to class

_____ points

2. Discusses evidence based intervention identified to support healing, coping and transformation with this specific population.

- Why did you choose this intervention?
- Where/how has it been implemented?
- What is the structure of the intervention?
- Where does this intervention fit theoretically?
- Strengths and challenges?
- Specific population concerns or targets of change?

_____ points

3. Experiential exercise with classmates.

- Encourages engagement
- Encourages critical thinking
- Clear instructions and debriefing opportunities

_____ points

TOTAL: _____