This package contains model syllabi for both the face-to-face (SWK-S) and online (SWK-D) versions of the course. Use the version applicable to your teaching assignment, and be sure to delete the unused version and this cover page before distributing. Please direct any questions to your program director or coordinator.
Course Information

Semester Year: XXXXX
Section Number: XXXXX
Location: XXXXX
Day: XXXXX
Time: XXXXX

Instructor: XXXXX XXXXXXXXXXX
Office: XXXX
Email: XXXX
Phone: XXXX
Office Hours: XXXX

Course Description

Students enrolled in this course develop knowledge, skills, and judgment necessary for competent application of selected evidence-informed practices for service with diverse clients, including children, youth, adults, and families affected by mental health issues, substance use disorders, and other behavioral addictions within the context of trauma responsive care. Students learn to discover, analyze, synthesize, and evaluate evidence of practice effectiveness and apply that knowledge in communication, strengths discovery and assessment, hypothesis formation, contracting, intervention and prevention planning, service delivery, and evaluation.

Course Competencies

- 6: Engage with Individuals and Families in Mental Health and Addictions settings.
- 7: Assess Individuals and Families in Mental Health and Addictions settings.
- 8: Intervene with Individuals and Families in Mental Health and Addictions settings.
- 9: Evaluate Practice with Individuals and Families in Mental Health and Addictions settings.

Course Objectives

1. Apply, synthesize, and evaluate evidence-informed practices within the context of trauma responsive care with individuals and families affected by mental health issues, substance use disorders, and other behavioral addictions.
2. Apply, synthesize, and evaluate diversity on behalf of individuals and families affected by mental health issues, substance use disorders, and other behavioral addictions.
3. Apply and interpret outcome measures to evaluate client progress and treatment efficacy with individuals and families at risk of or affected by mental health issues, substance use disorders, and other behavioral addictions. Required Textbooks

Required Texts


Required Readings


Recommended Readings

Substance Abuse and Mental Health Services Administration [SAMHSA] (2009): Illness Management and Recovery. Retrieve from [store.samhsa.gov/shin/content//SMA09-4463/PractitionerGuidesandHandouts.pdf](store.samhsa.gov/shin/content//SMA09-4463/PractitionerGuidesandHandouts.pdf)


Course Content

This course examines evidenced-based practices for working with diverse clients affected by mental health issues, substance use disorders, and other behavioral addictions. As a part of the course, students will examine values, ethics, and cultural/social diversity. A variety of teaching and learning activities will be used during class sessions. These include but are not limited to the following: lectures, class discussions and exercises, homework, and small group works.

The major evaluation of students’ progress in accomplishing the learning objectives of this course is class attendance, participation in experiential practice exercises, presentations, quizzes and additional assignments.

Be mindful that academic and experiential content in social work courses may trigger an emotional response, especially in individuals who have prior trauma history. As social workers, it is our responsibility to be present for clients who have experienced trauma; therefore, it is necessary to cultivate compassionate self-awareness and address our personal histories in a timely manner for competent social work practice. If
you are triggered in the classroom, your priority is self-care as well as continuing to gain knowledge for practice. You may need to seek consultation from faculty as to your readiness for practice and/or how to better prepare for social work practice.

Course Outline

**Class 1: Introductions and overview of the course**

**Overview**
- A. Evidence-informed practice
- B. Social work ethics
- C. An integrative approach to Mental Health/Addictions Practice
- D. What makes therapy work?
- E. Common factors, clinical skills, and the therapeutic relationship

**READINGS:**
1. N/A

**ASSIGNMENTS:**
1. N/A

**Class 2: Treatments for severe mental illness**

**Overview**
- A. Strengths- and recovery-based practices
- B. Family-focused therapy

**READINGS:**
2. Barlow Ch 11 & 12
3. Rapp & Goscha (2012)

**ASSIGNMENTS:**
5. Small group exercise based on readings

**Class 3: Behavioral therapy for treating depression**

**Overview**
- A. Assumptions and aim of behavioral therapy
- B. Activity monitoring and scheduling
- C. Behavioral experiments
- D. etc.

**READINGS:**
6. **Required:** Barlow Ch 9, p. 353-393.
7. Recommended: Barlow Ch 6

**ASSIGNMENTS:**
8. Small group exercise based on readings

Revision: August 2018
Class 4: Cognitive therapy for treating depression/anxiety/substance use

Overview
A. Assumptions and aim of cognitive therapy
B. Conducting a case formulation
C. Identifying moods and thoughts
D. Cognitive distortions
E. Socratic questioning
F. Hypothesis testing
G. etc.

READINGS:
9. Barlow Ch 7, p. 275-312

ASSIGNMENTS:
11. Small group exercise based on readings

Class 5: Schema therapy for treating depression and personality disorders

Overview
A. Assumptions and aim of schema therapy
B. Early maladaptive schemas
C. Cognitive restructuring
D. Imagery
E. etc.

READINGS:
12. Barlow, Ch 7, p. 312-323

ASSIGNMENTS:
15. Small group exercise based on readings

Class 6: Cognitive-behavioral and behavioral therapies for treating anxiety disorders
i.e., panic disorder/agoraphobia/social anxiety/OCD etc.

Overview
A. Assumptions and aim of CBT for Panic Disorder and related anxiety disorders
B. Psycho-education
C. Breathing retraining/applied relaxation
D. Cognitive restructuring
E. Exposure techniques

READINGS:
1. Barlow Ch 1, 3 & 4
ASSIGNMENTS:
1. Small group exercise based on readings

Class 7: Dialectic Behavioral Therapy for treating borderline personality disorder

Overview
A. Assumptions and aim of DBT
B. DBT Skills training
C. Stages of DBT treatment
D. etc.

READINGS:
1. Barlow Ch 10

ASSIGNMENTS:
1. Midterm exam due (hard copy in class)
2. Small group exercise based on readings

Class 8: Treatments for Posttraumatic Stress Disorder

Overview
A. Assumptions and aim of treatments for PTSD
B. Cognitive processing therapy strategies for treating PTSD
C. Exposure therapy strategies for treating PTSD
D. Additional therapy strategies for treating PTSD (e.g., EMDR, etc.)

READINGS:
1. Barlow Ch 2

ASSIGNMENTS:
1. Small group exercise based on readings

Class 9: Meet in small groups to prepare for Student Group Presentation

Overview
A. Students will work with their small groups in preparation for Student Group Presentation Assignment (See Assignment #3 below).

READINGS:
1. N/A

ASSIGNMENTS:
1. N/A

Class 10: Treating substance use disorders and other behavioral addictions

Overview
A. Strategies for treating withdrawal, including detoxification
B. Strategies for addressing urges, triggers
C. Motivational interviewing
D. Strategies for addressing relapse

Revision: August 2018
E. Etc.

**READINGS:**
1. Barlow Ch 12

**ASSIGNMENTS:**
1. Small group exercise based on readings

**Class 11:** Treatments for children and families [ADHD, ODD, Conduct disorder]

**Overview**
A. Family factors in the treatment of childhood disorders
B. Role of medications
C. Parent training strategies for addressing childhood disorders
D. Etc.

**READINGS:**
3. Wells (2005)

**ASSIGNMENTS:**
1. Small group exercise based on readings

**Class 12:** Student Group Presentations

**READINGS:**
1. Readings to be assigned presenters

**ASSIGNMENTS:**
1. N/A

**Class 13:** Student Group Presentations

**READINGS:**
1. Readings to be assigned presenters

**ASSIGNMENTS:**
1. N/A

**Class 14:** Acceptance and Commitment Therapy (ACT)

**Overview**
A. ACT as a “third wave” therapy
B. Underlying principles of ACT
C. Core processes of ACT (ie., acceptance, cognitive defusion, being present, self as context, values, committed action)

**READINGS:**
1. Hayes et al. (2012)
2. Additional reading to be determined

Revision: August 2018
ASSIGNMENTS:
1. N/A

Class 15: Alternative treatment approaches/Strategies for evaluating practice

Overview
A. Strategies for evaluating client progress and treatment efficacy
B. (Below is a list of treatment options to be covered for Class 14)
C. Mindfulness and spiritually-integrated approaches
D. Psychoanalytic approaches
E. Etc.

READINGS:
1. Duncan & Sparks (2010)
2. Additional reading to be determined based on interest of the class

ASSIGNMENTS:
1. Final course exam due following Class 15 during Final Exam Week

Assignments and Grading
1. Weekly small group discussion exercises
   a. Due ........................................Classes 2-11
   b. Final Grade Points .................20 points
2. Mid-semester take-home exam
   a. Due ........................................Class 7
   b. Final Grade Points .................20 points
3. Student Group Presentation
   c. Due ........................................Classes 12 & 13
   d. Final Grade Points .................20 points
4. Individual Practice Exercise
   e. Due ........................................By assignment
   f. Final Grade Points .................10 points
5. Final Exam
   g. Due .........................................Final Exam Week
   h. Final Grade Points ..................30 points

TOTAL .............................................100 points

Weekly small group discussion exercises
Throughout the course, each student will be responsible for completing all assigned readings for each week. This is especially essential for being able to participate fully in this graded assignment. During
classes 2 through 11 (see details on table above), students will complete in-class assignments within a small group (consisting of 2-4 students). The assignments will vary from week to week but will generally entail each group taking 15 to 20 minutes during class to discuss a set of questions, an exercise, or case scenario related to the readings. Through discussion within the small group, students will attempt to deepen their understanding of the readings. Next, each group will choose a representative to summarize highlights of their small group’s discussion to the larger class. Each student will be graded based upon their level of participation. This includes attendance (participation necessitates being present in class), peer evaluation of level of participation, and instructor observation.

*Students who cannot attend class will miss 3 points for the exercise
*Points for weekly small group discussion exercises: 20

Mid-semester take home exam
Students will complete a take-home mid-term exam that addresses knowledge and skills explored up to that point in the seminar. The exam covers required readings, lectures, slides, handouts, seminar discussions, demonstrations, videos, and presentations

The exam is prepared in such a way to provide students an opportunity to demonstrate progress toward achievement of the course learning objectives outlined in this syllabus. Exams may contain multiple-choice, short essay, and case scenario items.

Mid-term exam instructions will be provided during class time prior to exam.

*The completed exam is due Class 7
*Points for mid-term take-home examination: 20

Student GROUP presentation
Each group will give a 75 minute presentation on a specific mental health/addictions practice approach targeting a particular problem type, population and/or diagnosis (e.g. PTSD for victims of sexual abuse; dialectical behavioral therapy [DBT] for borderline personality disorder; family systems therapy for adolescents with conduct disorder etc.). The presentation is expected to include the following:

Information about the chosen practice approach (what the worker does, what the client does, the various phases of intervention, homework that is assigned, research support etc…) [Approx 15 minutes]

A role-play of the chosen practice approach. Each group will create and conduct a role play illustrating their chosen practice approach. Your group gets to decide the number of students that will participate in the role play. For example, two students may conduct the role play for an individual therapy scenario, whereas four or five students may participate for a family therapy role play. All students are expected to make an equal contribution to the group presentation, however, whether performing in the role play or not. Before beginning the role play, each group will give background information about the case, explain which session you are at with the client (e.g. the 4th session), what was done during previous sessions with the client (hypothetically), and the specific techniques or strategies that you plan to employ during the role play etc. [Approx 15 minutes]
Following the role play, explicate to the class what components of the practice approach were illustrated in the role play, what components that were not addressed in the role play, and what might be done in future sessions if a practitioner was to continue using this approach with the client(s) in the role play. Also discuss your prognosis for the client(s) in the role play. As part of the presentation, each group will supply handouts to the class, including an outline of the practice approach, plus any homework assignments that might be given to clients. [Approx 10 minutes]

Each group will **conduct an exercise for your peers** that allows them to practice a component of the therapy approach (e.g. have students role play a certain skill in dyads and then discuss it afterward) [Approximately 20 minutes]

The final component of the presentation will **consist of allotting 15 minutes for your peers to ask questions and give feedback**. Peer feedback will include an evaluative component which will contribute to the grade for this assignment. Finally, students who are presenting will have a separate opportunity to rate the contributions of each their own group members to the group project.

*Presentations will take place during Classes 12 & 13
*Points for Student Group Presentation: 20

**Individual PRACTICE EXERCISE**

Students will be assigned one topic/module per course syllabus and develop and prepare a Practice Exercise for the class and lead this exercise per each class based on the evidence based interventions discussed that day during class. This will also include post discussion about the practice exercise. This should be 30 minutes long.

*Points for Individual Practice Exercise: 10

**FINAL EXAM**

During Final Exam Week (following Class 15), participants complete an examination that addresses knowledge and skills explored *throughout* the seminar. The exam covers required readings, lectures, slides, handouts, seminar discussions, demonstrations, videos, and presentations.

The course examination is prepared in such a way to provide students an opportunity to demonstrate progress toward achievement of the course learning objectives outlined in this syllabus. The exam may contain multiple-choice, short essay, and case scenario items.

*The final exam will take place during Final Exam Week
*Points for final course examination: 30

**Grading Standards**

Papers are graded on the quality of the final product not on the effort you extended completing them. The grade of A is reserved for truly outstanding work that goes beyond basic requirements.

In the Indiana University School of Social Work MSW program, grades of B are the expected norm. Reflecting competency and proficiency, grades of B reflect good or high quality work typical of graduate students in professional schools. Indeed, professors typically evaluate students’ work in such a way that B is the average grade. Grades in both the A and the C range are relatively uncommon and reflect work that
is significantly superior to or significantly inferior, respectively, to the average, high quality, professional work conducted by most IU MSW students. Because of this approach to grading, students who routinely earned A grades in their undergraduate studies may conclude that a B grade reflects a decrease in their academic performance. Such is not the case. Grades of B in the IU MSW program reflect the average, highly competent, proficient quality of our students. In a sense, a B grade in graduate school is analogous to an A grade in undergraduate studies. MSW students must work extremely hard to achieve a B grade. If you are fortunate enough receive a B, prize it as evidence of the professional quality of your work.

Grades of A reflect Excellence. Excellent scholarly products and academic or professional performances are substantially superior to the “good,” “the high quality,” “the competent,” or the “satisfactory.” They are unusual, exceptional, and extraordinary. Criteria for assignments are not only met, they are exceeded by a significant margin. Excellence is a rare phenomenon. As a result, relatively few MSW students earn A grades.

Grades of B signify good or high quality scholarly products and academic or professional performance. Grades in the B range reflect work expected of a conscientious graduate student in a professional program. Criteria for assignments are met in a competent, thoughtful, and professional manner. However, the criteria are not exceeded and the quality is not substantially superior to other good quality products or performances. There is a clear distinction between the good and the excellent. We expect that most MSW students will earn grades in the B range—reflecting the good or high quality work expected of competent future helping professionals.

Grades of C and C+ signify work that is marginal in nature. The scholarly products or professional performances meet many but not all of the expected criteria. The work approaches but does not quite meet the standards of quality expected of a graduate student in a professional school. Satisfactory in many respects, its quality is not consistently so and cannot be considered of good or high quality. We anticipate that a minority of MSW students will earn C and C+ grades.

Grades of C- and lower reflect work that is unsatisfactory. The products or performances do not meet several, many, or most of the criteria. The work fails to approach the standards of quality expected of a graduate student and a future MSW-level professional. We anticipate that a small percentage of MSW students will earn unsatisfactory grades of C-, D, and F.

**Grading scale**

Grade minimums are as follows [Note: grades below C are Unsatisfactory in the MSW Program]:

- **A** 93% Excellent, Exceptional Quality
- **A-** 90% Superior Quality
- **B+** 87% Very Good, Slightly Higher Quality
- **B** 83% Good, High Quality (expected of most MSW students)
- **B-** 80% Satisfactory Quality
- **C+** 77% Marginal, Modestly Acceptable Quality
- **C** 73% Marginal, Minimally Acceptable Quality
- **C-** 70% Unsatisfactory Quality

Revision: August 2018
Course Information

<table>
<thead>
<tr>
<th>Semester Year:</th>
<th>Term and year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section Number:</td>
<td>XXXXX</td>
</tr>
<tr>
<td>Location:</td>
<td>XXXXX</td>
</tr>
<tr>
<td>Day:</td>
<td>XXXXX</td>
</tr>
<tr>
<td>Time:</td>
<td>XXXXX</td>
</tr>
<tr>
<td>Instructor:</td>
<td>XXXXX XXXXXXXXXX</td>
</tr>
<tr>
<td>Office:</td>
<td>XXXX</td>
</tr>
<tr>
<td>Email:</td>
<td>XXXX</td>
</tr>
<tr>
<td>Phone:</td>
<td>xxxxx</td>
</tr>
<tr>
<td>Office Hours:</td>
<td>xxxxxxxxxxxx</td>
</tr>
</tbody>
</table>

Course Description

Students enrolled in this course develop knowledge, skills, and judgment necessary for competent application of selected evidence-informed practices for service with diverse clients, including children, youth, adults, and families affected by mental health issues, substance use disorders, and other behavioral addictions within the context of trauma responsive care. Students learn to discover, analyze, synthesize, and evaluate evidence of practice effectiveness and apply knowledge in communication, strengths discover and assessment, hypothesis formation, contracting, intervention and prevention planning, service delivery, and evaluation.

Course Objectives

1. Apply, synthesize, and evaluate evidence-informed practices within the context of trauma responsive care with individuals and families affected by mental health issues, substance use disorders, and other behavioral addictions.

2. Apply, synthesize, and evaluate diversity on behalf of individuals and families affected by mental health issues, substance use disorders, and other behavioral addictions.

3. Apply and interpret outcome measures to evaluate client progress and treatment efficacy with individuals and families at risk of or affected by mental health issues, substance use disorders, and other behavioral addictions.

Required Texts


Course Content

Be mindful that academic and experiential content in social work courses may trigger an emotional response, especially in individuals who have prior trauma history. As social workers, it is our responsibility to be present for clients who have experienced trauma; therefore, it is necessary to cultivate compassionate self-awareness and address our personal histories in a timely manner for competent social work practice. If you are triggered in the classroom, your priority is self-care as well as continuing to gain knowledge for practice. You may need to seek consultation from faculty as to your readiness for practice and/or how to better prepare for social work practice.

Revision: August 2018
This course examines evidence-based practices for working with diverse clients affected by mental health issues, substance use disorders, and other behavioral addictions. As part of this course, students will examine values, ethics, and cultural/social diversity. A variety of teaching and learning activities will be used. These include, but are not limited to, class and small group discussions, small group work, and individual work.

The major evaluation of students’ progress in accomplishing the learning objectives of this course is participation in experiential practice exercises, presentations, quizzes, and additional assignments.

Resources

- Canvas email will also be used a way to communicate between instructor and students. You are expected to check the course announcements on Canvas before each class.
- Additional readings will be assigned throughout the semester and be posted on Canvas (Resource tab).

Course Outline

Module 1: Evidence-Based Practice and Intervention with Individuals: An Intro to CBT

Weeks 1, 2

Overview

This module introduces basic concepts and beginning techniques of CBT.

Assignments

Readings

1) Padesky, C. A., & Greenberger, D. (2016), Chapters 1, 2, 3, and 4 from required text.

Individual Assignments

2) Quick Check Activity: Case Conceptualization
3) Quick Check Activity: More About Developing Problem Lists
4) Quick Check Activity: Agenda Setting

Module 2: CBT Competencies: Identifying Maladaptive Thoughts and Beliefs

Weeks 3, 4

Overview

This module addresses the importance of clients identifying maladaptive thoughts and core beliefs, including various techniques and methods used toward identifying and challenging them.

Assignments

Readings


Individual Assignments

2) Quick Check Activity: Maladaptive Thoughts (cont.)
3) Quick Check Activity: More About Core Beliefs and the Downward Arrow Technique

Revision: August 2018
Module 3: Identifying Client Progress and Treatment Efficacy: Behavioral Activation, Action Plans, and Ending Treatment

Week 5

Overview
This module explains how to help clients develop evidence that supports/does not support a client’s automatic thoughts and provides information on strategies for ending CBT treatment.

Assignments

Readings

Individual Assignments
8) Quick Check Activity: Behavioral Activation and the Activity Scheduling Technique
9) Individual Application: Behavioral Activation, Understanding Depression

Module 4: Working with Individuals and Families

Weeks 6, 7
Overview
This module examines how intervention strategies and techniques are applied in a variety of clinical contexts for individuals and families (e.g., disruptive behavior in children, grief work, anxiety in youth).

Assignments

Readings

Individual Assignment
18) M4 Quick Check Activity: Applying CBT to PTSD

Group Assignment
19) Discussion: Applying CBT to PTSD

Module 5: Working with Client Resistance
Week 8

Overview
This module provides information on how to deal with client resistance, particularly through understanding why people often resist change.

Revision: August 2018
Assignments

Readings

Individual Assignment
2) Quick Check Application: The DBT Perspective on Working with Client Resistance

Group Assignment
3) Discussion: Working with Client Resistance

Module 6: Working with Families
Weeks 9, 10

Overview
This module examines some of the strategies and techniques that are useful when working with troubled families.

Assignments
Readings

Individual Assignment
6) Quick Check Activity: Working with Families: Guidelines and Techniques

Group Assignments
7) Group Application: Case Analysis Using MIGS
8) Discussion: Session Guidelines

Module 7: Working with Families: Structural and Strategic Family Therapies
Weeks 11, 12

Overview
This module takes a closer look at intervention strategies used for working with families.

Assignments
Readings


**Individual Assignments**

4) Quick Check Activity: Structural Family Theory Boundary Concepts

5) Quick Check: Structural Family Therapy

6) Individual Application: Applying Structural Family Theory Through Assessment and Treatment Planning

---

**Module 8: Mental Health Practice for Adolescents and Youth: Suicide**

**Week 13**

**Overview**

This module provides some key facts and information on suicide, with particular focus on adolescents and youth.

**Assignments**

**Readings**


7) McManama, K. H., & Almeida, J. *Safety planning and brief interventions*. SW 464: Understanding Suicide. (Canvas)

hopelessness, suicidal ideation, and substance use. *J Youth Adolescence, 44*, 362-378. (Canvas)

**Individual Assignment**
9) Individual Application: Suicidal Screening Case Assessment

**Group Assignment**
10) Discussion: Suicide Statistics

**Module 9: Mental Health and Addictions Practice and Intervention with Larger Systems**
**Weeks 14, 15**

**Overview**
This module provides macrosystemic concepts and ideas to inform ongoing individual and family work, as well as intervention in the macrosystem.

**Assignments**

**Readings**
3) Reder, P. (1986). Multi-agency family systems. *Journal of Family Therapy, 8*, 139-152. (Canvas)

**Group Assignments**
5) Discussion: Assessing the Involvement of External Systems
6) Discussion: Defining the Problem
7) Discussion: Assessing Relationship Patterns

**Assignments and Grading**
More specific instructions for each assignment will be posted on Canvas. Instructor also will discuss details or answer any questions related to assignment during the class and office hours.

All assignments should be produced on a wordprocessor (or typed), double spaced, with one-inch margins on all sides, carefully edited and proofed, using no smaller than a 12 point font, and conforming to APA style (6th ed.)

Revision: August 2018
Assignments

6. Quick Check Activity: Case Conceptualization (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ..............................................0.75%

7. Quick Check Activity: More About Developing Problem Lists (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ..............................................0.75%

8. Quick Check Activity: Agenda Setting (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ..............................................0.75%

9. Quick Check Activity: Maladaptive Thoughts (cont.) (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ..............................................0.75%

10. Quick Check Activity: More About Core Beliefs and the Downward Arrow Technique (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................0.75%

11. Quick Check Activity: Thought Record Technique (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................0.75%

12. Quick Check Activity: Looking at the Evidence (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................0.75%

13. Individual Application: Identifying Automatic Thoughts (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................10%

14. Quick Check Activity: Behavioral Activation and the Activity Scheduling Technique (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................0.75%

15. Individual Application: Behavioral Activation: Understanding Depression (Individual Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................10%

16. Discussion: Applying CBT to PTSD (Group Assignment)
    a. DUE: ................................................TBD
    b. Final Grade Percentage: ..............................................5%

17. M4 Quick Check: Readings Review (Individual Assessment)
    a. DUE: ................................................TBD

Revision: August 2018
b. Final Grade Percentage: ................................................0.75%

18. Quick Check Activity: The DBT Perspective on Working with Client Resistance (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................0.75%

19. Discussion: Working with Client Resistance (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

20. Quick Check Activity: Working with Families: Guidelines and Techniques (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................0.75%

21. Discussion: Session Guidelines (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

22. Group Application: Case Analysis Using MIGS (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

23. Quick Check Activity: Structural Family Theory Boundary Concepts (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................0.75%

24. Quick Check Activity: Structural Family Therapy (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................0.75%

25. Individual Application: Applying Structural Family Therapy Through Assessment and Treatment Planning
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................10%

26. Discussion: Suicide Statistics (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

27. Individual Application: Suicidal Screening Case Assessment (Individual Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................10%

28. Discussion: Assessing the Involvement of External Systems (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

29. Discussion: Defining the Problem (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

Revision: August 2018
30. Discussion: Assessing Relationship Patterns (Group Assignment)
   a. DUE: ................................................TBD
   b. Final Grade Percentage: ................................................5%

Grading Standards
Papers are graded on the quality of the final product not on the effort you extended completing them. The grade of A is reserved for truly outstanding work that goes beyond basic requirements.

In the Indiana University School of Social Work MSW program, grades of B are the expected norm. Reflecting competency and proficiency, grades of B reflect good or high quality work typical of graduate students in professional schools. Indeed, professors typically evaluate students’ work in such a way that B is the average grade. Grades in both the A and the C range are relatively uncommon and reflect work that is significantly superior to or significantly inferior, respectively, to the average, high quality, professional work conducted by most IU MSW students. Because of this approach to grading, students who routinely earned A grades in their undergraduate studies may conclude that a B grade reflects a decrease in their academic performance. Such is not the case. Grades of B in the IU MSW program reflect the average, high competent, proficient quality of our students. In a sense, a B grade in graduate school is analogous to an A grade in undergraduate studies. MSW students must work extremely hard to achieve a B grade. If you are fortunate enough to receive a B, prize it as evidence of the professional quality of your work.

Grades of A reflect Excellence. Excellent scholarly products and academic or professional performances are substantially superior to the “good,” “the high quality,” “the competent,” or the “satisfactory.” They are unusual, exceptional, and extraordinary. Criteria for assignments are not only met, they are exceeded by a significant margin. Excellence is a rare phenomenon. As a result, relatively few MSW students earn A grades.

Grades of B signify good or high quality scholarly products and academic or professional performance. Grades in the B range reflect work expected of a conscientious graduate student in a professional program. Criteria for assignments are met in a competent, thoughtful, and professional manner. However, the criteria are not exceeded and the quality is not substantially superior to other good quality products or performances. There is a clear distinction between the good and the excellent. We expect that most MSW students will earn grades in the B range—reflecting the good or high quality work expected of competent future helping professionals.

Grades of C and C+ signify work that is marginal in nature. The scholarly products or professional performances meet many but not all of the expected criteria. The work approaches but does not quite meet the standards of quality expected of a graduate student in a professional school. Satisfactory in many respects, its quality is not consistently so and cannot be considered of good or high quality. We anticipate that a minority of MSW students will earn C and C+ grades.

Grades of C- and lower reflect work that is unsatisfactory. The products or performances do not meet several, many, or most of the criteria. The work fails to approach the standards of quality expected of a graduate student and a future MSW-level professional. We anticipate that a small percentage of MSW students will earn unsatisfactory grades of C-, D, and F.

Revision: August 2018
Grading scale
Grade minimums are as follows [Note: grades below C are Unsatisfactory in the MSW Program]:

A  93%  Excellent, Exceptional Quality
A- 90%  Superior Quality
B+ 87%  Very Good, Slightly Higher Quality
B  83%  Good, High Quality (expected of most MSW students)
B- 80%  Satisfactory Quality
C+ 77%  Marginal, Modestly Acceptable Quality
C  73%  Marginal, Minimally Acceptable Quality
C- 70%  Unsatisfactory Quality

Bibliography


Falkner, M. J. (October 2015). University of New Mexico Department of Psychiatry and Behavioral Sciences.


Revision: August 2018


Reder, P. (1986). Multi-agency family systems. *Journal of Family Therapy, 8,* 139-152.


Revision: August 2018