A. Description of Course Content

This foundation level course introduces graduate students to both theory and methods for social work practice with individuals, families, and small groups. It emphasizes a generalist perspective, beginning interviewing and relationship skills, problem assessment, goal setting, and contracting. Special attention is given to the common roles assumed by social workers (e.g. facilitator, broker, advocate). Required of all except advanced standing students.

B. Student Learning Outcomes

The Council on Social Work Education requires that accredited social work programs follow the CSWE Educational Policy and Standards that comprises nine competencies as follows:

1. Demonstrate Ethical and Professional Behavior
2. Engage Diversity and Difference in Practice
3. Advance Human Rights and Social, Economic, and Environmental Justice
4. Engage in Practice-informed Research and Research-informed Practice
5. Engage in Policy Practice
6. Engage with Individuals, Families, Groups, Organizations, and Communities
7. Assess Individuals, Families, Groups, Organizations, and Communities
8. Intervene with Individuals, Families, Groups, Organizations, and Communities
9. Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

Specifically, while this course addresses competencies 1, 4, 6, 7, and 8, the main foci are competencies 1, 6, 7,
Competency 1: Demonstrate Ethical and Professional Behavior

Social workers understand the value base of the profession and its ethical standards, as well as relevant laws and regulations that may impact practice at the micro, mezzo, and macro levels. Social workers understand frameworks of ethical decision-making and how to apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize personal values and the distinction between personal and professional values. They also understand how their personal experiences and affective reactions influence their professional judgement and behavior. Social workers understand the profession’s history, its mission, and the roles and responsibilities of the profession. Social workers also understand the role of other professions when engaged in inter-professional teams. Social workers recognize the importance of life-long learning and are committed to continually updating their skills to ensure they are relevant and effective. Social workers also understand emerging forms of technology and the ethical use of technology in social work practice. Social workers:

- Make ethical decisions by applying the standards of the NASW Code of Ethics, relevant laws and regulations, models for ethical decision-making, ethical conduct of research, and additional codes of ethics as appropriate to context;
- Use reflection and self-regulation to manage personal values and maintain professionalism in practice situations;
- Demonstrate professional demeanor in behavior; appearance; and oral, written, and electronic communication;
- Use technology ethically and appropriately to facilitate practice outcomes; and
- Use supervision and consultation to guide professional judgment and

Competency 6: Engage with Individuals, Families, Groups, Organizations, and Communities

Social workers understand that engagement is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers value the importance of human relationships. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand strategies to engage diverse clients and constituencies to advance practice effectiveness.

Social workers understand how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies. Social workers value principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals as appropriate. Social workers:

- apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies; and
- use empathy, reflection, and interpersonal skills to effectively engage diverse clients and

Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities

Social workers understand that assessment is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the assessment of diverse clients and constituencies, including
individuals, families, groups, organizations, and communities. Social workers understand methods of assessment with diverse clients and constituencies to advance practice effectiveness. Social workers recognize the implications of the larger practice context in the assessment process and value the importance of inter-professional collaboration in this process. Social workers understand how their personal experiences and affective reactions may affect their assessment and decision-making. Social workers:

- Collect and organize data, and apply critical thinking to interpret information from clients and constituencies;
- Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks in the analysis of assessment data from clients and constituencies;
- Develop mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies; and
- Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and

Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities

Social workers understand that intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers are knowledgeable about evidence-informed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to effectively intervene with clients and constituencies. Social workers understand methods of identifying, analyzing and implementing evidence-informed interventions to achieve client and constituency goals. Social workers value the importance of inter-professional teamwork and communication in interventions, recognizing that beneficial outcomes may require interdisciplinary, inter-professional, and inter-organizational collaboration. Social workers:

- Critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies;
- Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks in interventions with clients and constituencies;
- Use inter-professional collaboration as appropriate to achieve beneficial practice outcomes;
- Negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies; and
- Facilitate effective transitions and endings that advance mutually agreed-on goals.

C. Required Textbooks and Other Course Materials


D. Additional Recommended Textbooks and Other Course Materials


E. Descriptions of Major Assignments and Examinations

IN CLASS DISCUSSIONS AND ROLES PLAYS

On a number of occasions throughout the semester, we will hold in class discussions and role plays for credit. Students are expected to participate fully as part of their class participation. The goal of these exercises is for you to become increasingly comfortable with yourself, to improve your skills and to learn from others. As an observer, I want you to gain insight into what is NOT said as much as what is said, and to notice when the body language of the role players does not match what they are saying. This is meant to be engaging and a fun way to learn from each other and practice your skills. Addresses Student Learning Outcome 6, 7, and 8
**ETHICS GROUP PRESENTATION**

In this assignment, students will be working in groups. Groups of 3 max. it is your responsibility to find your group members. Each group is responsible for determining an ethical course of action for handling the dilemma in the assigned scenario. Groups will choose a scenario from the ones listed below. Groups will utilize resource materials in:

- Cournoyer et al. Chapter 5
- Ethical decision-making information found below

Each group will review a case presenting an ethical dilemma from the list below and discuss the dilemmas in light of the reading. That is, groups should discuss what ethical principles (according to the Code of Ethics) and/or practice issues are at play. Each group will review their scenario, identify the ethical dilemma(s), discuss the dilemma(s) utilizing the ethical decision-making materials discussed in class, and work to arrive at a consensus. **In discussing the cases, please follow steps 1-4 of Reamer’s 7-Step Process on the Ethical decision making found below.**

Each group will make a 15 minute presentation. Presentations should include the following (workload should be divided among the members of your group):

**Steps 1-4 of Reamer's 7-Step Process:**

1. Identify the ethical issues, including the social work values and duties that conflict.
2. Identify the individuals, groups, and organizations that are likely to be affected by the ethical decision.
3. Tentatively identify all possible courses of action and the participants involved in each, along with possible benefits and risks for each.
4. Thoroughly examine the reasons in favor of and opposed to each possible course of action, considering the relevant ethical theories, principles, and guidelines; codes of ethics and legal principles; social work practice theory and principles; personal values (including religious, cultural, and ethnic values and political ideology), particularly those that conflict with one's own.

Power points, videos, role play, posters, podcast style etc may be used for the presentation. Be creative but make sure to address all the four steps clearly and thoroughly.

**Grading Criteria**

Presentations will be evaluated on the group’s ability to clearly address each of the above questions thoroughly and concisely during the presentation.

* Please note that language below can be problematic for some cases, this is part of the ethical dilemma.

<table>
<thead>
<tr>
<th>Ethics Case Study Scenarios</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-Partum Depression and Risk:</td>
</tr>
</tbody>
</table>
Janie, a 33 year old female, was admitted to a behavioral health hospital for treatment of acute, post-partum depression and suicidal ideation. Janie reported to her ob/gyn shortly after the birth of her daughter that she was having thoughts of harming her newborn because she believes she is not a “good enough” mother. Janie is a high functioning individual with a high level of education and good support. Prior to this episode of post-partum depression, Janie had no history of mental health concerns. Janie is very sad she has these thoughts and is very concerned as to why she has them. Janie exhibits great insight and is aware she has unresolved issues surrounding her family of origin—such as her decision to leave the Mormon Church, her parents’ explanation of her adoption, and emotional abuse by her mother. Janie is able to verbalize these issues in treatment and appears to be making good progress. You as a hospital social worker have developed a good rapport with Janie, her husband, and her in-laws (with whom she is living). You have consulted with Janie’s psychiatrist who believes Janie’s psychotropic medications are effective and who is ready to discharge Janie to return home and continue treatment in an outpatient setting; however, your supervisor and the hospital’s risk management director believe you should make a Child Protective Services (CPS) referral. Would a probable CPS investigation add more stress to Janie and set her back in her recovery? Do you believe Janie has enough support at home to negate calling in a report? Who is your client?

**Domestic Abuse and Pregnancy**

Samantha is a 29 year-old woman who has endured 10 years of domestic abuse. She sought assistance with the local women’s shelter and has been estranged from her husband for the last two years, living in hiding; however, she was unable to file for divorce for the following reasons 1) divorce proceedings as court records would reveal her location to her estranged husband, 2) she cannot afford a divorce, and 3) she is fearful a divorce would push her estranged husband “over the edge” and he would kill her. Samantha is now pregnant by her boyfriend with whom she lives and feels safe. She knows she cannot afford to care for the baby and believes adoption would be in the baby’s best interest. Samantha has contacted the adoption agency at which you work. You consult with your agency’s legal team who advise that in the State of Texas, a woman who is pregnant and married (even though estranged as there is no legal “separation” in Texas) MUST notify the husband of the pregnancy before an adoption plan can be pursued. Samantha tells you that if she cannot pursue adoption, she will deliver the baby to the police station after birth or will leave it at another location as she is certain her estranged husband will kill both her and the baby if he is aware she is pregnant. What do you recommend to Samantha? What do you recommend to the judge and/or legal team?

**The Board Member and Mrs. Lang**

Mrs. Lang’s husband died a few months ago. It is now evident that she can no longer cope alone. Her family physician urged her to enter a home for the aged. But Mrs. Lang told her social worker that she was not yet ready to leave her own home. The Social Worker accepted Mrs. Lang’s decision since she did not feel that it is ethical to apply pressure on clients. The Social worker was also aware that the family doctor had “succeeded” in receiving assent only after he applied heavy pressures on Mrs. Lang. In reviewing this case with her supervisor, the social worker learned that the family doctor was a board member of the agency. The Supervisor thought that cooperating with this board member would be far better than fighting him for the sake of protecting the “right” of one client, especially when it was clear that Mrs. Lang could no longer live alone. Should the fact that the physician is a board member make any difference in resolving this dilemma?

**Birth Control for Teenagers**

Pam Welsh, a fourteen year old teen, is not getting along with her parents. After Pam ran away from home twice, her parents took her for therapy to a social worker. During therapy, Pam told her social worker that she is sexually active. She asked the worker for help in avoiding pregnancy. She is afraid of becoming pregnant, but she is even more afraid that her puritanical parents may learn of her sexual activities. Should the social worker help Pam obtain birth control pills, even though she knows that Pam’s parents have taken a strong public stand against supplying them to teens? Is it ethical for the social worker to ignore the parents’ values? Can she ignore her client’s request? To whom is she accountable?

**A Hostile Mother and Parental Rights**

Andrea became pregnant while in high school. Her son Richard, now four years old, has been in foster care since he was six months old. The boy’s father is not known. Andrea is described by her social worker as an angry and hostile woman. She visits her son irregularly. The foster parents report that during these visits she often slaps him and abuses him verbally. Andrea has frequently threatened to surrender her parental rights. At yesterday's session with her social worker, Andrea again said that she wanted to see no more of Richard. Should her social worker take this request literally and ask her to sign surrender papers?
What about Mentally Ill Patients on Death Row?

Mrs. Powers is a correctional social worker with many years of experience. In just two more years she will reach retirement age with full vesting in the state's retirement plan. Recently she was assigned to work on a multidisciplinary team that included a psychiatrist, psychologist, nurse, and social worker. The objective of the team is to treat mentally ill prisoners on death row and to return them to a state of competency so that they may be legally executed. What are the highest interests and rights of a client? What are the limits of a social worker's responsibility to society?

A Same Sex Affair in the Office

Lou and Nellie Barnes have been married for fifteen years, but are not happy with their marriage. They decided to seek the help of a social worker. In this social agency, clients with marital problems are seen at first individually and only later jointly. In one of the early sessions Lou Barnes told his social worker that he has been having an affair with one of the men at his office. His wife knows absolutely nothing about this office affair. Lou has no intentions of terminating it. He feels that he is strong enough to handle both his wife and his boyfriend and neither needs to know about the other. What are the social worker's responsibilities to Mr. Barnes? To Mrs. Barnes? Would she be betraying confidential information if she told Mrs. Barnes about her husband's office affair? Would she be party to Mr. Barnes's concealment if she kept quiet? What is the ethical thing to do?

Discriminatory Practices and an Agency Employee

Several Social agencies in your city, including the one for which you work engage in discriminatory practices against minority group children. There is now a Court case about this matter. Lawyers for the plaintiff have asked you to testify about specific instances of such discriminatory practices. You oppose these practices and repeatedly have spoken against them at staff meetings, but you hesitate to testify in Court because (1) you are afraid that you may be fired if you testify against your agency, (2) you are not sure whether the confidential relationship you have with your clients permits you to reveal this information, and (3) you are not certain whether it is ethical for you to use agency records for this purpose.

An Affair with a Married Man

Lottie Kanyala is thirty-eight years old. She has never been married and had all but given up hope of ever making it with a man. In despair she turned to a social worker for help in rebuilding her life. Half a year later she told her social worker that she was having an affair with a married man whom she had met at a church social. Bill was the most wonderful fellow any woman could want. She asked the social worker to help her develop the necessary interpersonal skills that will permit her to hold onto him. This social worker believes strongly in the sanctity of the marriage vows and thinks that adultery is wrong. Yet she is also aware that for Lottie this might be the only chance of having a meaningful relationship with a man. What are the ethical implications of acceding to Lottie's request? Of not acceding to it? What consideration should be given to the worker's values?

Taking on a Private Client

Christine Ross is the only social worker in a remote mountain community where she staffs the county welfare office. Her friend, Kay Jordan, the principal of the county high school, has told her about a very disturbed student in her school. This student has lately engaged in some very bizarre behavior and Kay has no doubt that he needs professional help. Since the nearest mental health clinic is 130 miles away. Kay asked Christine to provide therapy for this student. The student is not eligible for service from the county welfare department (which in any case does not provide therapy). Therefore, Kay asked Christine to take him on as a private client. Christine has never before provided therapy for this kind of very disturbed person, but she is willing to try. Is it ethical for her to do so when there is no possibility of obtaining supervision?

Paul and His Illegal Immigrant Parents

Paul Aquizap, a third grader, has shown signs of depression and apathy. He is frequently absent from school. His teacher has referred him to the school social worker since her attempts to contact Paul's parents have not been successful. On a home visit the social worker discovered that Paul's parents are illegal immigrants, that they speak almost no English, and that they were hardly ever at home since they worked very long hours. Paul is left alone at home almost all the time. He finds it difficult to manage. Should the social worker ignore the illegal status of Paul's parents and focus his attention on helping Paul? Is this legal? Is it ethical?

Threats from Your Client
You have been treating Jason Conger, a severely disturbed person, for several months. In recent weeks he has become increasingly aggressive toward you, claiming (wrongly) that you are planning to harm him. Today he told you that if you do not stop persecuting him, he will get even with you by harming your child. You are very concerned since you know that Jason has been involved in the past in physically abusing children. Should you report this threat to the police? Should you arrange for a commitment to a mental hospital? Should you withdraw from this case? Or what should you do? What are the ethical dilemmas you must resolve before you can make a decision?

A Prior Incident between a Father and a Daughter

During family therapy involving a father, a mother, and their sixteen-year-old daughter, the discussion turns to an incident that happened three or four years earlier. Late one evening when the father was drunk, he entered the daughter's bedroom and started 10 play with her breasts. The daughter's cries awakened the mother, who put an immediate stop to the incident. Next morning the father remembered nothing. All agree that there was no prior or subsequent sexual abuse. The family is able to talk openly about this incident and the pain that it caused for all members of the family. The family feels that there is no reason why the social worker should report this incident now. Your professional judgment concurs with the family's wishes. but you also know that the law requires you to report such incidents. What should you do?

A New Friend and Peer Consultation

Last night social worker Mark Sussna met Valerie Aylon at a party at a friend's apartment. In the course of the evening they discovered that they shared many interests. It was almost a case of "love at first sight." Mark made a date to meet Valerie the following evening. Today one of Mark's colleagues discussed a complicated case with him. Mark soon realized that the client being discussed was his new friend, Valerie Aylon. What should he do? Should he tell his colleague to consult with someone else? Or should he keep silent so that he can find out more about Valerie, information which will help him determine whether they are really suitable? Or should he terminate his friendship with Valerie? (Note: peer consultation is the accepted practice in this agency so that confidentiality is not an issue.)

Getting Help for Clyde Lukke

Clyde Lukke voluntarily entered Sunnyside Psychiatric Hospital on Wednesday afternoon. He complained of severe depression and was afraid that he might commit suicide. The admitting psychiatrist diagnosed him as suffering from recurrent depression. The usual treatment at Sunnyside for this diagnostic category is three to five weeks hospitalization, followed by long-term intensive individual therapy. Five days after admission, Angela Mennikka, the floor social worker, was notified by the business office to prepare the patient for discharge. Ms. Mennikka was surprised since discharge orders are usually discussed by the floor staff before they are entered. Rarely is discharge an administrative decision. Upon inquiry she learned that Mr. Lukke's HMO benefits are limited to one week of psychiatric hospitalization. She also learned that this HMO, like many similar organizations, reimburses only for time-limited group therapy, not for individual therapy. Should the social worker prepare a routine discharge and let the HMO staff worry about how to help Lukke? Or should she take an advocate stance to ensure that Lukke will get the treatment he needs? What is expected in this situation from a professional social worker who wants to engage in ethical practice?

Who Will Help Lydia?

A growing number of social workers engage in divorce mediation. A divorce mediator is not accountable to one client, but tries to help two people who are in conflict. The divorce mediator is expected to be impartial and not favor one or the other side to the conflict. The task is to help these two persons arrive at an agreement regarding property division, child custody and support, alimony, and so forth. Lydia and Art Dante have requested Jessica Cusamos to serve as their mediator in preparation for their divorce. Jessica is an MSW social worker with an extensive private practice. During the first meeting with the Dantes, Jessica Cusamos learned that Art Dante is an experienced businessman, a skillful negotiator, and a quick thinker. Lydia Dante, on the other hand, appears emotionally immature, has no business experience, and is unable to make decisions without help. It quickly became clear to Jessica that Art will leave Lydia all but penniless unless she receives help. Is it ethical for Jessica to step in and help Lydia—or must she remain neutral?

Jennifer, the Agency, and Her Foster Parents
Jennifer has been in foster care for most of her seventeen years. Several months ago she discovered that she was pregnant. She began to see her social worker, Ms. Rosetti, more frequently. Her foster parents are aware of her condition. Because of some of Jennifer’s health problems and because of her family history, her physician recommended that she undergo an amniocentesis. The test results revealed that Jennifer’s fetus would probably be severely damaged and would have only a marginal chance of surviving more than six months. When this became known, the agency's assistant director spoke with Ms. Rosetti and asked her if she had discussed an abortion with Jennifer. Unless Jennifer aborted, the agency would have to pay large sums of money for this baby which, at best, would live less than a year. Ms. Rosetti knows that Jennifer is ambivalent about carrying the fetus to term and is not at all sure whether she wants to be a mother. But Ms. Rosetti also knows that the foster parents with whom Jennifer has an excellent relationship oppose abortion on religious grounds.

Who's to Know?

A local psychologist has just completed a battery of intelligence tests for a retarded teenager served by your agency. You have learned that this boy's test results are just above the score required to continue services for him and his family. Your supervisor, concerned about what will happen if services are cut all, asked you to suggest to the psychologist that she “report a slightly lower score, thus ensuring that the agency could continue to provide services to this client.

Divorce and the Need to Lie

June and Warren Eades have come to you for marital counseling. They have been married for three years, have no children, and are now convinced that they are not compatible. After meeting with you for ten weeks, they have come to the joint decision to seek a divorce. From a clinical point of view, you see no reason why this mature decision should not be implemented so that these two adults can be free to pursue other relationships. But you also know that your state does not provide for divorce by mutual consent. Adultery and extreme cruelty are the only causes accepted for divorce. What are the ethical implications if you refer them to a lawyer who you know will help them fabricate the evidence necessary to obtain a divorce?

Parents Who Believe In Faith Healing

You are a child welfare worker responsible for a caseload of foster children. One of the children has been diagnosed with a fast-progressive illness which is often, but not always, fatal. You know the natural parents believe in faith healing and will not permit the medical treatment which would provide the only hope (other than a long shot) that the illness will not be fatal.

A "Fuller" Relationship with a Client

Ever since Al Dwyer opened his private practice office, clients have become the center of his life. He finds it gratifying that he can use his insight and skills to help others without being handicapped by agency rules and requirements. Al has become so involved in the lives and problems of his clients that he has begun to neglect his family. His wife, in particular, has no understanding for what he is trying to do nor does she understand why he has to spend so much time in the office. Recently Al has begun working with a new client. Elana P. Her major problem appears to be her sexual inhibitions that have prevented her from forming meaningful relationships. Al Dwyer is aware that he is sexually attracted to this new client and is wondering whether he can help her by developing a "fuller" relationship with her.

The Child of an AIDS Victim

You are a hospital social worker who has been working with a drug abusing young mother who contracted AIDS and died, leaving behind a two-year-old girl who now needs a foster care placement. You know that it is extremely difficult to find foster parents willing to take in children who have been exposed to AIDS. Must you tell potential foster parents the child’s background even though the child tests HIV negative?

Dementia and Care

Linda is a home health care manager. She has been seeing Mr. and Mrs. Jones for over a year. Mrs. Jones is suffering from advanced stages of dementia, and her husband, age 82, is committed to caring for her at home. Their son lives in another state, they have few friends still living, and Mr. Jones refuses respite services due to his wife’s extreme fear of change and of strangers. Due to Mr. Jones’s frail condition, Linda has become increasingly concerned about his capacity to care for his wife, yet he consistently refuses to consider other options. Would Linda be violating the Code of Ethics if she were to arrange respite care or a placement for Mrs. Jones?
Evidence Based Therapy thrown to the wayside

Jackie attended an exciting workshop on the “Parentified Child” and has come to see that much of her work with women in recovery focuses on this issue. She has done reading on the concept and discusses it regularly over lunch with a colleague who shares her interest. Lately, she has begun to focus her work with clients not on their substance abuse and relapse issues but rather on the childhood issues that she feels may be contributing to their addictive behavior. She feels it would be unethical to continue “treating the symptoms and not the underlying problem.” Is Jackie in violation of the Code of Ethics? What activities, if any, would assure you that she has met the standard of competence?

Addresses Student Learning Outcome 1

BIOPSYCHOSOCIAL ASSESSMENT

Students will complete a biopsychosocial of an individual of their choosing. You could pick different clients for all course assignments or choose one client to complete all the assignments for this class. A biopsychosocial history is a comprehensive assessment of an individual. The assessment does not have a specific length, but should not exceed 10 double-spaced pages. It is expected that you will complete the assessment fully and in a professional manner. This includes paragraph form, complete descriptions, and using formal writing (without contractions, slang, etc.). This assignment will also have a reflective component in which you will evaluate how well you were able to engage the client and use the interviewing skills studied in class. I will post additional information about this assignment online.

Grading Criteria: This will be based on completeness of the information gathered, clarity of writing, and applicability of the intervention(s) recommended.

Learning Objectives Addressed: The purpose of this assignment is for students to begin the process of conceptualizing the initial assessment process in terms of, (a) knowing what information is required in a biopsychosocial assessment; (b) the process of actually interviewing someone with the view to gathering said information; and (c) organizing that information in a way that allows for making recommendations about interventions.

Addresses Student Learning Outcome 7

GENOGRAM AND ECOMAP

You will create a three-generation family Genogram (i.e., grandparents, parents, self, and siblings). If applicable, you may also include your children in the Genogram. You will also create an ecomap. You could pick different clients for all course assignments or choose one client to complete all the assignments for this class. Additional information on the content, style, and grading of this assignment will be provided in class and posted online in the Assignment folder.

Addresses Student Learning Outcome 7

SKILLS PRESENTATION

Students will demonstrate the skills that they have learned throughout the semester in a final brief 2 person role-play segment involving basic interviewing skills utilized by the social work practitioner. The role play is expected to last 5 minutes. You could pick different clients for all course assignments or choose one client to complete all the assignments for this class. Additional information on the content and grading of this assignment will be provided in class and posted online.

Addresses Student Learning Outcome 6


**DOCUMENTATION EXERCISE**

*Using the topic/client chosen for your skills presentation*, you will select one of the formats (e.g., SOAP, DAPO) taught in class to compose a progress note which will describe your session from the clinician’s perspective. Additional information on the content, style, and grading of this assignment will be provided in class and posted online.

Addresses Student Learning Outcome 7

*****PAPERS – GENERAL INFORMATION AND EXPECTATIONS*****

All papers must follow APA guidelines. **At a minimum** this means:

- Points will be deducted if you do not follow these guidelines. See the following website for additional help with APA format: [http://owl.english.purdue.edu/owl/resource/560/01/](http://owl.english.purdue.edu/owl/resource/560/01/)
- Written work must be clear, concise, and grammatically correct. Deficiencies in areas such as spelling, punctuation, sentence structure, and incoherent organization will result in lower grades. As stated, plagiarism (using someone else’s words, thoughts, or ideas and claiming them as your own – i.e., using direct sentences written by others) will result in a failing grade for the course.
- Please use formal and professional language when completing papers and assignments for this course (i.e., Why Social Work paper and Psychosocial Assessment). This includes refraining from the use of contractions (e.g., can’t, don’t, won’t, etc.).

**F. Attendance**

At The University of Texas at Arlington, taking attendance is not required but attendance is a critical indicator in student success. Each faculty member is free to develop his or her own methods of evaluating students' academic performance, which includes establishing course-specific policies on attendance. However, while UT Arlington does not require instructors to take attendance in their courses, the U.S. Department of Education requires that the University have a mechanism in place to mark when Federal Student Aid recipients "begin attendance in a course." UT Arlington instructors will report when students begin attendance in a course as part of the final grading process. Specifically, when assigning a student a grade of F, faculty report the last date a student attended their class based on evidence such as a test, participation in a class project or presentation, or engagement online via Canvas. This data is reported to the Department of Education for federal financial aid recipients.

Information specific to modality and meeting times for this course are provided in the section below.

It is the student’s responsibility, whether present or absent, to keep abreast of assignments. However, there are specific due dates for each assignment posted in the schedule on this syllabus. Students are expected to adhere to the due dates and complete the weekly assignments each week. Students are expected to complete all of the assignments for this course to receive a passing grade. Assignments not turned in will be recorded as "0" in grade center and may jeopardize the opportunity to receive a passing grade for the semester.

(Online Synchronous TH 2pm-4:50pm)

**G. Grading**
All papers must be grammatically correct using APA style. Papers with many grammatical errors and misspellings will not receive a satisfactory grade. If you need assistance with this UTA Resources are available, please email course faculty for more information.

Grading Scale: The following scale will be used in determining the letter grade for the course. A= 90-100, B=80-89, C=70-79, D=60-69, F=Below 60

The following assignments will be utilized in order to determine the final grade for the course:

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Class Discussions/Role Plays</td>
<td>10 (5 total / 2 pts each)</td>
</tr>
<tr>
<td>Ethics Group Presentation</td>
<td>20</td>
</tr>
<tr>
<td>Biopsychosocial Assessment</td>
<td>20</td>
</tr>
<tr>
<td>Genogram/Ecomap</td>
<td>10</td>
</tr>
<tr>
<td>Skills Presentation</td>
<td>20</td>
</tr>
<tr>
<td>Documentation</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100 points</strong></td>
</tr>
</tbody>
</table>

Students are expected to keep track of their performance throughout the semester and seek guidance from available sources (including the instructor) if their performance drops below satisfactory levels; see "Student Support Services," below.

**H. Make-Up Exams**

Late assignments will not be accepted.

**I. Course Schedule**

<table>
<thead>
<tr>
<th>Week(s)/Date</th>
<th>Module</th>
<th>Topic</th>
<th>Readings Required H: Hepworth et al. <em>Recommended C: Cournoyer</em></th>
<th>Due Dates</th>
</tr>
</thead>
</table>

11
<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Topic</th>
<th>Readings</th>
<th>Activity</th>
</tr>
</thead>
</table>
| 1    | 1/19 | 1. Introductions; Syllabus and Course Overview  
   2. Introduction to Professionalism  
   3. Direct Practice: Domain, Philosophy, Roles  
   5. Overview of the Helping Process | H: Chapter 1-3  
   Recommended C: Chapter 1-3 | In Class Discussion/Role Play 1 on 1/19 |
   2. Operationalizing the Cardinal Social Work Values | H: Chapter 4  
   Recommended C: Chapters 4 and 5 | In Class Discussion/Role Play 2 on 1/26 |
| 3    | 2/2  | -     | Work on Ethics Presentation | Ethics Group Presentation Due 2/16 |
| 4    | 2/9  | 1. Talking and Listening--The Basic Interpersonal Skills  
   2. Building Blocks of Communication: Conveying Empathy and Authenticity  
   Recommended C: Chapter 6, 7 and 8 | In Class Discussion/Role Play 3 on 2/9 |
| 5    | 2/16 | 1. Exploring Eliminating Counterproductive Communication Patterns | H: Chapter 7  
   Recommended C: Chapter 9 | In Class Discussion/Role Play 4 on 2/16 |
<p>| 6    | 2/23 | 1. Biopsychosocial Assessment | H: Chapters 8, 9 | Biopsychosocial Assessment Due 3/9 |</p>
<table>
<thead>
<tr>
<th>Date</th>
<th>Week</th>
<th>Activity</th>
<th>Reading Material</th>
<th>Notes</th>
</tr>
</thead>
</table>
Recommended C: Chapter 10  
Genogram/Ecomap Due 3/14 (right before Spring Break) |                                                      |
| 8 3/9      | 7    | Contracting, Working, Evaluating Developing Goals and Formulating a Contract. Planning and Implementing Change-Oriented Strategies. Developing Resources, Organizing, Planning, and Advocacy as Intervention  
H: Chapters 12-14  
Recommended C: Chapter 11-12 | In Class Discussion/Role Play 5 on 3/9 |                                                      |
| 9 3/16     | -    | Spring Break                                                             | -                                                    |                                                      |
| 10 3/23    | -    | Work on Skills Presentation                                              | -                                                    | Skills Presentation Due 4/6                       |
H: Chapters 15 and 16 | Documentation 4/13 |                                                      |
| 12 4/6     | 9    | Additive Empathy, Interpretation, and Confrontation. Managing Barriers to Change  
H: Chapters 17 and 18 |                                                      |                                                      |
| 13 4/13    | 10   | Ending  
H: Chapter 19  
Recommended C: Chapter 13 |                                                      |                                                      |
| 14 4/20    | -    | Guest Speaker Q&A                                                        | -                                                    |                                                      |

As the instructor for this course, I reserve the right to adjust this schedule in any way that serves the
educational needs of the students enrolled in this course.

J. Expectations for Out-of-Class Study

Beyond the time required to attend each class meeting, students enrolled in this course should expect to spend at least an additional three hours (for each hour of class or lecture per week) of their own time in course-related activities, including reading required materials, completing assignments, preparing for assignments and exams, and reviewing online content, etc.

K. Librarian to Contact

The Social Sciences/Social Work Resource Librarian is Brooke Troutman. Her office is in the campus Central Library. She may also be contacted via E-mail: brooke.troutman@uta.edu or by phone: (817)272-5352.

The following is a list of commonly used library resources:

- Library Home Page
- Library Services
- Subject Guides
- Subject Librarians
- Course Reserves
- Library Tutorials
- Connecting from Off-Campus
- Ask a Librarian

L. Grade Grievances

For more information on the grade grievance process please see the BSW Program Manual or the MSW Program Manual. Grade grievance can be submitted through the BSW Grade Grievance form or the MSW Grade Grievance form located on the Forms and Resources website.

M. Institutional Policies

UTA students are encouraged to review these institutional policies and informational sections and reach out to the specific office with any questions. The following policies can be found on the UTA Syllabus Institutional Policies page:

- Drop Policy
- Observance of Religious Holy Days
- Disability Accommodations
- Non-Discrimination Policy
- Title IX Policy
- Academic Integrity
- Electronic Communication
- Campus Carry
- Final Review Week
- Student Feedback Survey
- Active Shooter
- Counseling and Psychological Services (CAPS)
- Student Support Services

N. Mandatory Face Covering Policy

All students and instructional staff are required to wear facial coverings while they are on campus, inside buildings, and in classrooms. Students that fail to comply with the facial covering requirement will be asked to
leave the class session. If students need masks, they may obtain them at the Central Library, the E.H. Hereford University Center's front desk, or in their department. Students who refuse to wear a facial covering in class will be asked to leave the session by the instructor, and, if the student refuses to leave, they may be reported to UTA's Office of Student Conduct.

0. Emergency Exit Procedures

Should we experience an emergency event that requires us to vacate the building, students should exit the room and move toward the nearest exits, which are the stairwells located at either end of the adjacent hallway. When exiting the building during an emergency, one should never take an elevator but should use the stairwells. Faculty members and instructional staff will assist students in selecting the safest route for evacuation and will make arrangements to assist individuals with disabilities.