

# Department of Psychology Psychology 681: Adult Psychotherapy Winter 2009

**Lectures**: Tuesday 12:30-3:20 PM **Location (lectures)**: Admin. 247B

**Instructor**: Tavis Campbell, Ph.D. **Clinical supervision**: TBD

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### **Course description and objectives**

This course provides an introduction to the practice of psychotherapy with adults. Students will learn about selected psychotherapeutic research, issues, and techniques, with an emphasis on evidence-based practice. The course includes an introduction to basic concepts in psychotherapy and psychotherapy research, case conceptualization, and interviewing skills. You will learn about behavioral, cognitive-behavioral and other psychotherapies. This course will combine instructional methods such as lectures, discussion, role-plays, and supervised training cases. It is expected that by the end of the course, students will be able to treat a defined problem under supervision, as well as to conceptualize the treatment of more complex adult cases.

## **Required texts** – available at the University Bookstore.

Antony, M. M. & Swinton, R. P. (2000). Phobic disorders and panic in adults: A guide to assessment and treatment. Washington, DC: American Psychological Association.
Beck, J. S. (1995). Cognitive therapy: Basics and beyond. New York: Guilford Press.
Dobson, K. S. (Ed.) (2001). Handbook of cognitive behavioral therapies (2nd ed). New York: Guilford Press.

#### **Course requirements and evaluation**

This course has two components: the classes, which will focus on the theory and practice of psychotherapies for adults that are in current use, and the laboratory, in which the student will assume primary clinical responsibility for two individuals with an anxiety disorder. Requirements for each aspect of the course are described below.

### Classes

You are expected to complete all the assigned readings, attend all classes, and participate actively in class discussions. The evaluation of the class component of the course will be based upon (1) class participation (10% of course grade), (3) an in-class presentation (30%), and (4) a term paper (30%). All submitted written materials must be typewritten, double-spaced, and have standard margins (1 inch) and font size (12 point).

**Readings and class participation**. Classes will typically include time for questions and discussion. Grades are based on: your comments and questions in class indicating that you have read and digested all the assigned readings for the week and active participation during class

presentations, demonstrations, and discussions. You are expected to take an active role in the seminar discussions by sharing your thoughts and responding to questions regarding the assigned readings and the topic at hand. If you come to each class prepared and participate actively, showing your comprehension of the readings, you will obtain full credit for class participation. You must participate actively in each class to receive full credit for participation. Class participation will be marked on a scale of 1-10 and will comprise 10% of your course grade.

Class presentation. Each student is required to give one 60-minute presentation introducing a type of psychotherapy to the class, focusing on describing the psychotherapeutic approach and its practical utility. Presentation topics will be selected at the beginning of the term. You should provide context by describing the historical background of the approach (where did the approach come from?), however, the presentation should primarily emphasize the theoretical perspective and central techniques used in this psychotherapy. Presentations should include information on applications for the approach (i.e., for what problems has this approach been shown to be useful? What data support this conclusion? In summary, what is the evidence regarding the efficacy of this treatment approach?). Presentations should be grounded in the assigned readings and will require additional background research to flesh out your knowledge of the topic. You are encouraged (but not required) to use role-plays, brief video clips, demonstrations, etc., to illustrate elements of the approach. In addition, for 10-15 minutes following your presentation, you are responsible for facilitating class discussion on the presentation topic. You should prepare questions to help stimulate discussion.

You are required to prepare handouts for your presentation which you should distribute to students and the instructor at the start of the presentation. Handouts should include an outline of your presentation, should summarize key points, terms, and should include key references. The goal is to allow the audience to pay close attention to your presentation and provide materials for later reference.

The presentation, which will be given a percentage grade, will be graded on clarity/organization (20%), accuracy (20%), completeness (as appropriate for the time allotted; 25%), level of interest (20%), and success in engaging others (both during the presentation and via the class discussion; 15%). At a mutually agreeable time following your presentation, I will provide you with feedback on the presentation content as well as your presentation skills. The class presentation will comprise 30% of your course grade.

**Term paper**. Each student will write a comprehensive, scholarly review paper *critically evaluating* treatment approaches (including efficacy and effectiveness studies, as available) to a defined disorder. Topics may include those covered in class or not. By **February 10** please email me to let me know what you'd like your paper topic to focus on and to obtain my approval. The scope of the paper may vary depending on the breadth of the literature available; please discuss with me if you have any questions. Papers should be no longer than 20 pages (not including references), and must adhere to APA style (5<sup>th</sup> ed.). Term papers are due in my departmental mailbox no later than **9:00 AM on April 14, 2009**. Each term paper will be assigned a percentage grade and will comprise <u>30%</u> of your course grade.

## Laboratory

The evaluation of the clinical component of the course will be based upon (1) completion of the practicum as described below (pass/fail) and (2) a case review (30%).

Clinical cases. Each student will be assigned two cases of a person with an anxiety disorder. In consultation with the instructor, you will take primary responsibility for assessing and planning treatment for each patient, conducting the treatment, and evaluating change. The bulk of supervision will take place in weekly group supervision sessions in which you will review details of the progress of your cases with me and discuss any questions, issues, problems, and concerns. To complement supervision meetings, I will also observe and provide feedback on your performance in at least two, hour-long client sessions. You are responsible for arranging for me to observe one of your first two sessions with one client and your first exposure session, and feel free to discuss and schedule further observations with me. You are required to audio tape each session for review and supervision purposes. Audio recordings must be kept confidential; i.e., in a secure location and identified only by the client's initials and session number. You are responsible for purchasing a tape recorder and, if needed, audiotapes. Check the tape recorder before using it to ensure recordings are easily audible. You should also determine with me a mutually agreeable time for a regular, 30- to 60-minute-long, individual supervision session biweekly as needed while your cases are active. Individual supervision sessions are intended to allow in-depth discussion and feedback on a particular session, issue or problem. It is recommended that you play a section of a taped session for discussion. In case of emergency, I (or, in my absence, another chartered clinical psychologist) will be available between regularly scheduled supervision.

You must keep case notes documenting services provided. All case notes must be completed in a timely fashion after each session—i.e., within 24 hours—and must either be typewritten or written in clearly legible handwriting. You and I must both sign each entry. A secure file must be kept for each case in the Clinical Psychology Program office. Each week in group supervision you should hand in the notes from your most recently completed therapy sessions for my review.

You are expected to dress professionally, fully respect client confidentiality, and behave in a professional and ethical manner at all times with respect to your cases. A breach of ethical conduct will lead to a failure of the course. You must receive a passing evaluation in your clinical performance to pass this course.

Case review: At the completion of the case or the end of the course (whichever comes first), you are required to write a case review describing one of your phobia cases. You may select either of your cases to review; the grade will not depend on the outcome of the case or whether therapy is complete (although that is preferable where possible). Instead, your grade will hinge on the completeness and thoughtfulness of your presentation of the case, including the rationale for the assessment and psychotherapeutic approach you have taken. Discuss the following topics (at a minimum):

- 1. presenting problem and history
- 2. case formulation
- 3. treatment plan
- 4. assessment plan
- 5. description of the treatment program
- 6. description of the outcomes of the therapy
- 7. follow-up plan
- 8. special considerations; issues in treatment

Use the knowledge you have gained through course readings and lectures to inform your discussion of these eight topic areas. Typically it is helpful to prepare charts or graphs to track change on key variables. The case review should be no longer than 10 pages, plus any accompanying charts, graphs, etc. The case review, accompanied by all the session notes and other supporting materials (i.e., completed questionnaires), are due in my departmental mailbox no later than **9:00 AM on April 14, 2009**. This work will be assigned a percentage grade and will comprise <u>30%</u> of the course grade.

Percentages below indicate the <u>approximate</u> standard required for each letter grade; cutoffs may be lowered but will not be raised:

A+	96-100%	B+	80-84%	C+	67-71%	D+	54-58%
A	90-95%	В	76-79%	C	63-66%	D	50-53%
A-	85-89%	B-	72-75%	C-	59-62%	F	0-49%

A student seeking reappraisal of graded tests, exams, lab assignments, etc., must discuss their work with the instructor within fifteen days of being notified of the mark or of the work having been returned to the class. In accord with Faculty regulations, the <a href="whole">whole</a> assignment or exam will be re-marked, and the mark may be raised, lowered, or remain the same. No reappraisal is permitted after the fifteen-day period.

Intellectual honesty is the cornerstone of the development and acquisition of knowledge and requires that the contribution of others be acknowledged. Consequently, plagiarism or cheating on any assignment is regarded as an extremely serious academic offense. Plagiarism involves submitting or presenting work in a course as if it were the student's own work done expressly for that particular course when, in fact, it is not. Students should examine sections of the University Calendar that present a Statement of Intellectual honesty and definitions and penalties associated with Plagiarism/Cheating/Other Academic Misconduct.

## Course schedule and readings (subject to change)

Week	Date	Topic	Readings
1	Jan. 13	- Introductory	Chambless, D. L., & Ollendick, T. H. (2001).
		meeting	Empirically supported psychological
		- Evidence-based	interventions: Controversies and evidence.
		treatment	Annual Review of Psychology, 52, 685-716.
		- Research issues	Kazdin, A. E. (1995). Methods of psychotherapy
		-Case Formulation	research. In B. Bongar & L. Beutler (Eds.)
		-Multicultural	Comprehensive textbook of psychotherapy. New
		sensitivity in	York: Oxford University Press. (Ch. 21)
		psychotherapy	Mash, E., & Hunsley, J. (1993). Assessment
			considerations in the identification of failing
			psychotherapy: Bringing the negatives out of the
			darkroom. Psychological Assessment, 5, 292-
			301.

			Beutler, L. E. (2000). David and Goliath: When empirical and clinical standards of practice meet. <i>American Psychologist</i> , <i>55</i> , 997-1007.  Persons, J. B. & Davidson, J. (2001). Cognitive-behavioral case formulation. In K. S. Dobson (Ed.) <i>Handbook of cognitive-behavioral therapies</i> . (2 <sup>nd</sup> ed.), New York: Guilford Press (Ch. 3)  Casas, J. M. (1995). Counseling and psychotherapy with racial/ethnic minority groups in theory and practice. In B. Bongar & L. Beutler (Eds.) <i>Comprehensive textbook of psychotherapy</i> (pp. 311-335). New York: Oxford University Press
3	Jan. 20	Cognitive-Behavioral Therapy for Anxiety Disorders	Antony, M. M., & Swinson, R. P. (2000). Phobic disorders and panic in adults: A guide to assessment and treatment. American Psychological Association. (Ch. 2-8) Bernstein, D. A., & Borkovec, T. D. (1973).  Progressive relaxation training: A manual for the helping professions. Champaign, IL: Research Press.
4	Jan. 27	Cognitive-Behavioral Therapy for Depression	Beck, J. (1995). Cognitive therapy: Basics and beyond. New York: Guilford Press.
5	Feb. 3	Behavioral Medicine Fundamental Concepts and Techniques	Schneiderman, Neil; Antoni, Michael H; Saab, Patrice G; Ironson, Gail. Health psychology: Psychosocial and biobehavioral aspects of chronic disease management. Annual Review of Psychology. Vol 52 2001, 555-580.
5	Feb. 10	- Motivational Interviewing	Moyers, Theresa B; Rollnick, Stephen. A motivational interviewing perspective on resistance in psychotherapy. [Journal; Peer Reviewed Journal] Journal of Clinical Psychology. Vol 58(2) Feb 2002, 185-193. Glyn Elwyn, Ken Resnicow, Stephen Rollnick, Christopher C Butler, Jim McCambridge, Paul Kinnersley. Consultations about changing behaviour British Medical Journal 2005;331;961-963
6	Feb. 24	Object relations Guest Speaker: Dr. Anne Mahoney	Cashdan, S. (1988). Object relations therapy: Using the relationship. New York: W. W. Norton. (Ch. 1)
7	March 3	Addictions Guest speaker; Shervin Vakili	TBA
8	March 10	Pain	TBA

		Guest Speaker: Dr. P.	
		Taenzer	
9	March 24	Mindfulness	TBA
		Meditation	
10	March 31	Student Presentations	TBA
11	April 7	Student Presentations	TBA
12	April 14	Student presentations	TBA

Student presentation topics to be selected from the following:

Smoking cessation, Psychotherapy for Schizophrenia and related disorders, Cognitive Therapy for Personality Disorders, Interpersonal Therapy for Depression, CBT for groups/families/couples, Dialectic Behavior Therapy