# Brief Therapy PC 3123

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**Course Description** 

This intensive course is intended to help participants develop skills in short-term counseling. The course will provide an integrated model for short-term intervention that relies on Brief Strategic Therapy, Solution-Focused Therapy, and Behavioral Therapy. Students are expected to complete reading prior to the seminar and will have assignments due four weeks after the end of the seminar. The seminar week will help students think theologically about short-term therapy, articulate a basic multicultural understanding of brief therapy, develop short-term intervention skills with a variety of clients, and organize skills to complete a course of therapy with clients. This class is open to MAMFT and MDiv students with the professor's approval. Maximum enrollment is 16. This course meets M.Div. requirements for Pastoral Care and Counseling.

By the end of the semester, students	Student Learning	Assignment/Assessment
will:	Outcomes (SLO) & MFT	-
	Competencies (C:)	
Describe the theoretical foundations, theological concerns, purposes, expected outcomes, and limitations for brief therapy	SLO: 1able to conduct multicultural, evidence-based therapy with individuals, couples and families SLO:2demonstrate a broad knowledge of systemic theory and MFT treatment models and flexibly apply these in evidence-based practice SLO: 5: able to use a theologically informed and clinically appropriate framework to integrate religious and spiritual factors into the practice of Marriage and Family Therapy MFTC: 1.1.1 Understand systems concepts, theories, and techniques foundational to MFT 1.1.2 Understand theories and techniques of individual, marital,	Reading Summary Papers
	couple, family, and group psychotherapy 4.4.1 Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan 4.1.2 Recognize strengths, limitations, and contraindications oftherapy models	

### **Objectives and Expected Student Learning Outcomes**

Articulate one functional, multicultural	<b>SLO: 1</b> able to conduct multicultural,	Final Position Paper
model for problem assessment, planning	evidence-based therapy with individuals, couples and families	
intervention, and assessing outcome of	<b>SLO: 4</b> able to use a multicultural	
short-term counseling	approach to MFT that attends	
6	appropriately to religious, cultural,	
	racial, economic, gender, and sexual	
	orientation diversity	
	1.1.2 Understand theories and	
	techniques of individual, marital,	
	couple, family, and group	
~	psychotherapy	
Complete basic assessment that	SLO: 1able to conduct multicultural,	Case Example and Review
discriminates between cases needing	evidence-based therapy with individuals, couples and families	
immediate referral or longer-term care, and	MFTC: 1.2.3 Recognize issues	
those for which short-term counseling is	thatsuggest referral for specialized	
appropriate	evaluationcare	
appropriate	1.3.1 Gather and review intake	
	informationbalanced attention to	
	individual, family, community	
	contextual factors	
	1.4.1 Evaluate case for	
	appropriateness	
	5.3.7 Practice within defined scope of	
	practice and competence	<b>x</b> · · · · · · ·
Demonstrate the ability to identify client	<b>SLO:</b> 1able to conduct multicultural,	
strengths, resiliencies and resources and	evidence-based therapy with individuals, couples and families	Case Example and Review
prioritize clear, achievable goals agreed	SLO:2demonstrate a broad	
upon by both client and therapist	knowledge of systemic theory and MFT	
T S S S S S S S S S S S S S S S S S S S	treatment models and flexibly apply	
	these in evidence-based practice	
	MFTC: 2.3.8 Identify client's strengths,	
	resilience and resources	
	2.3.9-Elucidate presenting problem	
	2.4.4 Assess the therapist-client	
	agreement of therapeutic goals and	
	diagnosis 3.2.1 Integrate client feedback,	
	assessment, contextual information, and	
	diagnosis with treatment goals and plan	
	3.3.2-Prioritize treatment goals	
Demonstrate the ability to use basic short-	SLO: 1able to conduct multicultural,	Live observation during class
term intervention skills in a counseling		Case Example and Review
	individuals, couples and families	-
session.		Final Position Paper
	knowledge of systemic theory and MFT	
	treatment models and flexibly apply	
	these in evidence-based practice	
	3.3.3 Develop a clear plan about how	
	sessions will be conducted 3.3.4 Structure treatment to meet	
	clients' needs and to facilitate systemic	
	change	
	3.3.5: Managetherapy toward	
	treatment goals	
Demonstrate the ability to asses and	SLO: 1able to conduct multicultural,	Case Example and Review
manage clinical crisis/emergencies such as		Final Position Paper
	individuals, couples and families	
suicidal, homicidal statements, etc.	3.3.6 Manage risks, crises and	
	emergencies	
	3.4.3 Evaluate level of risks,	
	management of risks, crises and	
	emergencies	

Multicultural Therapy Definition: Multicultural Therapy, according to D. W. Sue and Torino (2005, p 3) "...can be defined as both a helping role and process that uses modalities and defines goals consistent with the life experiences and cultural values of clients, recognizes client identities to include individual, group, and universal dimensions, advocates the use of universal and culture-specific strategies and roles in the healing process, and balances the importance of individualism and collectivism in the assessment, diagnosis, and treatment of client and client systems." Multicultural competence as a therapist includes: (1) therapist awareness of personal assumptions, values and biases, (2) understanding the worldview of diverse clients, and (3) facility with appropriate strategies and interventions consistent with the life experiences and values of culturally different clients. (Sue & Sue 2008)

Evidence-based Practice Definition: EBP is a "...practice-friendly approach to using research to enhance family therapy" (Gehard, 2010, 133). This approach looks to research to help clinicians make decisions in therapy about care for individual clients, couples and families. Evidence-based practice will (1) look to research for information about what treatments are most effective for specific problems, (2) critically examine that research for its validity and applicability to specific cases, and (3) evaluate how effective a selected method is for specific clients, couples and families (for example, using the ORS/SRS).

# **Methods**

Reading assignments are to be completed prior to the seminar and turned in the first day of class. Seminar session will divided between lecture-discussion and practice of short-term therapy skills using one-way mirrors in the LPTS counseling-training center. An integrative paper and case study will be due on August 1<sup>st</sup> following the seminar.

# **Requirements**

# Prior to Seminar Week (to be turned in first day of seminar):

- 1. Read all assigned texts.
- 2. For each book write a 250 word summary of the book, including what most resonated with you, and how you envision using what you learned from the text in clinical/pastoral practice.
- 3. Come to the seminar prepared with a case, case problem, client presenting problem, etc. to present/role play during the seminar. Do not prepare a formal case study. This is material to be used for practice behind the one-way mirror during the class.

### **During the Seminar**

- 1. Be prepared to role play both therapist and client behind a one-way mirror
- 2. Be prepared to discuss reading, class activities and engage in thoughtful, critical evaluation of yours and others' counseling skills.

### After the Seminar (Due August 1st)

- 1. **Final Position Paper:** Complete an 8-10 page position paper outlining your theoretical and practical approach to brief therapy. Papers will be evaluated using the attached rubric. In your paper explain:
  - a. What your position is;
  - b. How you arrived at this position (be sure to include both theological and behavioral science justifications for your position);
  - c. How your position compares to other possible positions in practicing brief therapy;
  - d. How your work is guided by this position;
  - e. How you assess client need and appropriateness for short-term therapy;
  - f. How you incorporate client feedback in assessment and treatment;
  - g. Your philosophy of goal setting and structuring therapy;
  - h. How you select interventions; and
  - i. How you evaluate progress.
- 2. **Case Study:** Demonstrate how you use your philosophy by writing a case study using a brief therapy model that shows:
  - a. Clear definition of the model of brief therapy you are using—this model should be clear throughout the following steps;
  - b. Intake and evaluation procedures that identify the client as appropriate for brief therapy;
  - c. Assessment and goal setting using your chosen model;
  - d. Process of treatment and interventions you used;
  - e. Use of client feedback;
  - f. Management of any crises or emergencies in treatment;
  - g. Outcome of treatment described using your guiding model;
  - h. Your assessment of your work as therapist (strengths and limitations)

# **Required Texts**

- Walter, J. E. & Peller, J.E. (1992). *Becoming solution-focused in brief therapy*. New York: Routledge.
- Stone, H., (Ed.). (2001). *Strategies for brief pastoral counseling*. Minneapolis: Fortress Press.
- Trepper, T.S. & Papay, H.E. (2013). *Psychotherapy abbreviation: A practical guide*, NY, NY: Routledge.

### Brief Therapy Comprehensive Rubric

<u>Scoring Directions</u>: Mark or highlight observations in each area. Complete rating score at the end of the rubric.

<u>Scoring</u>: 0-2 unacceptable (C- & below), 3-5 marginal (C to B), 6-8 expected (B+ to A), 9-10 exceeds expectations for student's level of training.

Assignment I: Theory Readings

#### Description:

- 1. Read all assigned texts.
- 2. For each book write a 250 word summary of the book, including what most resonated with you, and how you envision using what you learned from the text in clinical/pastoral practice.
- 3. Come to the seminar prepared with a case, case problem, client presenting problem, etc. to present/role play during the seminar. Do not prepare a formal case study. This is material to be used for practice behind the one-way mirror during the class.

Exceeds Expectations for	Expected	Marginal	UA	Average score
level of training	(6-8)	(3-5)	(0-2)	for category:
(9-10)				
× ,				
Paper demonstrates that all	Paper demonstrates that	Paper demonstrates that	UA	SLO: 1, 2
preparatory theoretical	all preparatory theoretical	most preparatory		MFTC: 1.1.1,
reading is complete and	reading is complete	theoretical reading is		1.1.2, 4.1.2
shows good critical insight		complete		
into readings		_		
Demonstrates exceptional	Demonstrates good	Demonstrates some		SLO: 1, 2
awareness of how reading	awareness of how reading	awareness of how reading		MFTC: 1.1.1,
material applies to basic	material applies to basic	material applies to basic		1.1.2, 4.1.2, 4.4.1
counseling/pastoral practice	counseling/pastoral	counseling/pastoral		
	practice	practice		

### Assignment II: Final Position Paper

**Directions:** Complete an 8-10 page position paper outlining your theoretical and practical approach to brief therapy. Papers will be evaluated using the attached rubric. In your paper explain:

- a. What your position is;
- b. How you arrived at this position (be sure to include both theological and behavioral science justifications for your position);
- c. How your position compares to other possible positions in practicing brief therapy;
- d. How your work is guided by this position;
- e. How you assess client need and appropriateness for short-term therapy;
- f. How you incorporate client feedback in assessment and treatment;
- g. Your philosophy of goal setting and structuring therapy;
- h. How you select interventions; and
- i. How you evaluate progress.
- j. Be sure to address theological, spiritual and multicultural issues.

Exceeds Expectations for	Expected	Marginal	UA	Average score
level of training (9-10)	(6-8)	(3-5)	(0-2)	for category:
Demonstrates exceptional	Demonstrates good	Demonstrates marginal	UA	SLO: 1, 2
understanding and use of		understanding and use of		MFTC: 1.1.2,
brief therapy models.		brief therapy models.		
Demonstrates exceptional	Demonstrates clear	Demonstrates marginal		SLO: 1, 2
appropriation of selected	appropriation of selected	appropriation of selected		MFTC: 1.1.2,
brief therapy models for	brief therapy models for	brief therapy models for		3.3.3
application to clinical	application to clinical	application to clinical		
practice.	practice.	practice.		
Provides exceptional	Provides clear	Provides some		SLO: 1, 2
understanding about how	understanding about how	understanding about how		MFTC: 1.1.2,
observable, measureable		client goals are set using		2.3.9, 3.3.3, 3.3.4
	8	client collaboration,		
client collaboration, strengths	client collaboration,	strengths and resources.		
and resources.	strengths and resources.			
Provides an exceptional	Provides a theoretical	Provides a marginal		SLO: 1, 2
		theoretical framework for		1.1.2,
interventions with clients	interventions with clients			
with clear examples of how		with clear examples of		
these fit with guiding model.	how these fit with guiding	how these fit with guiding		
	model.	model.		
· · · · · · · · · · · · · · · · · ·	Provides an	Provides little framework		SLO: 1, 2
framework for assessing	understandable	for assessing client		MFTC:3.3.3,
client progress	Ũ	progress		3.3.4, .3.5,
	client progress			

Identifies and discusses	Identifies and discusses	Marginally identifies and	SLO: 4, 5
critically theological,	theological and spiritual	discusses theological and	MFTC: 3.3.4
spiritual and multicultural	issues related to brief	spiritual issues related to	
issues related to brief therapy	therapy and selected	brief therapy and selected	
and selected model.	model.	model.	

#### Assignment III: Case Study

**Directions:** Demonstrate how you use your philosophy by writing a case study using a brief therapy model that shows:

- a. Clear definition of the model of brief therapy you are using—this model should be clear throughout the following steps;
- b. Intake and evaluation procedures that identify the client as appropriate for brief therapy;
- c. Assessment and goal setting clearly using your chosen model;
- d. Process of treatment and interventions you used, clearly demonstrating chosen model;
- e. Use of client feedback;
- f. Management of any crises or emergencies in treatment;
- g. Outcome of treatment described using your guiding model;
- h. Your assessment of your work as therapist (strengths and limitations)

Assessment Rubric: Use the following rubric to guide your work.

**Reviewer Directions:** Highlight or mark observations in each area. Complete rating score at the end of each category.

Scoring: 9-10 Exceeds Expectations, 6-8 Expected, 3-5 marginal, 0-2 unacceptable.

**Category I:** Identifying Information/Description of Client **Description:** 

A. Provide a one paragraph description of the client family presented. Include ages, ethnic and gender information, vocational or educational information and any other outstanding features that will help provide a picture of the context for treatment of the case.

Levels of Quality

Exceeds Expectations (9-10) Expected (6-8) Marginal (3-5) UA

(0-2) Category I Score:

Rubric for Category I

Description is clear, and includes identifying information-and any outstanding features of all clients present, including-personal dimensions that may affect therapy.

Description is present and describes basic attributes of clients. Presents information in a logical manner. Description is excessive, disorganized, or misses important primary information. UA SLO 1 MFTC: 1.2.1,

1.3.1

Category II: Presenting Problem

**Description:** Provide a concise summary of what the individual/couple/family perceived as the motivating factor bringing them to therapy. Also include perceptions provided by referral source and treating therapist.

Exceeds Expectations (9-10) Expected (6-8) Marginal (3-5) UA

### (0-2) Category II Score

Rubric for Category II Presenting problem is identifiable and concise, and reflects clients' description

Grade: \_\_\_\_\_

**Comments:** 

Monday <u>Morning Session</u>	-Classes of problems & unit of analysis	-Designing a strategy In session
-Introductions	-Assessment I	strategies
- Introduction to and history of brief therapy	-Deciding on brief treatment	Homework Follow-up Self-help
-Short-term	Afternoon Session	Afternoon Session
mentality; short-term procedures	-Goal setting Prioritizing Stakeholders	-Practice in LSCTC
-A general framework for counseling	Clarification Scaling/miracle	
-Strengths and	-Practice in LSCTC	
limitations		Thursday Morning Session
Afternoon Session		
-Setting the stage for change		-Couples Assessment/tool
-A theory of change		Alliance Domestic
-Listening		violence Goal
-Defining presenting problem		setting/what works Strategies
-Practice in LSCTC	Wednesday Morning Session	-Families with children
	-	Afternoon Session
	-Religious listening & theological reflection	Chronic mental illness -Medical problems
Schedu	Ile—Brief Therapy Summ	
	Prayer	-Parish counseling
T 1	Scripture Meditation Mindfulness	-Rethinking boundaries -Record keeping
Tuesday <u>Morning Session</u>	Etc.	- Supervision/consulta tion
-Boundaries and Ethics	-Assessment II Depression Suicide	-When things go badly
-Structuring sessions and course of treatment	Anxiety Substance abuse (Berg video) Life problems	-Practice in LSCTC

Appendix

# **Important Policies**

### Grading: Grade Scale and Philosophy

А	96.6-100
A-	93.6-96.5
$\mathbf{B}+$	90.6-93.5
В	87.6-90.5
С	85.6-87.5
C+	83.6-85.5
С	81.6-83.5
C-	79.6-81.5
D	70.6-79.5
F	Below 70.6

### Attendance

Learning is a complex activity that requires conceptual and experiential participation by those who wish to learn. Student attendance and participation is fundamental to the way the learning environment is structured for this course. Attendance and participation is required to earn a passing grade. While circumstances may require an adult learner to miss class occasionally, absence from more than 10% of the classroom experience will affect student learning and (consequently) the student's grade. Extreme circumstances, such as health problems, family concerns, etc. must be discussed with the professor *prior* to multiple missed classes. Students unable to attend at least 75% of classes are advised to drop the class prior to the registrar's WP deadline, or receive a failing grade.

### Form for Writing Assignments

All papers submitted for grades must be written in APA approved style and be double-spaced.

Major research papers, book reviews, etc. should include a cover sheet with the assignment title, your name, and the class for which you are writing.

Weekly assignments should include at the top of the first page your *name, title of the assignment, and the date the assignment is due.* These papers are to be folded in half (vertically) with your name and mailbox number on the outside. This allows returning them to you through campus mail.

All sources used in writing assignments must be cited appropriately and according to APA style. *Failure to cite sources is plagiarism. You must give credit for quotes and ideas used in your writing. Papers submitted for grades that demonstrate plagiarism will receive a failing grade, and students will be subject to the seminary policy regarding plagiarism.* 

### **Inclusive Language is a Seminary Policy**

Learning is fundamentally concerned with communication, self-expression, and personal and social transformation. Learning respects individuals, their feelings, their value and worth, and their particular potential for contribution to common knowledge and community virtue. Learning is fundamentally and intentionally inclusive.

Since all learning is inherently ethical and political, and theological discourse has been traditionally patriarchal and gender exclusive, the Seminary has established a policy, in the interest of constructing an inclusive and egalitarian community, that the language (symbols, metaphors) used in our class discussions and written work shall be gender inclusive and respectful of all persons and groups as valued human creatures of God.

Racism also permeates our society and is detrimental to any learning environment. We need to use language, symbols, and metaphors that honor our commitment to racial inclusiveness.