

Louisville Presbyterian Theological Seminary
Therapy with Adolescents
PC 3243
Summer 2015

Instructor: Michelle Finley, Ph.D., LMFT
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Class Times: Monday-Friday, June 1-5, 2015, 8:30 am - 4:30 pm

Note: The following course may change at the Instructors' discretion

Course Description

This course will present principles of healthy adolescent development and techniques used in establishing effective parent-child relationships from the perspective of relational and family systems. Research, theory, and practice regarding adolescent diagnostic categories of the DSM-5 will also be studied. Additionally, attention will be given to the effects of abuse and complex trauma on adolescents and young adults and treatment considerations. Special issues regarding therapy with minors and creative approaches for building mutually desired outcomes including the facilitation of play therapy will be explored.

Course Objectives

<u>By the end of the semester, students will:</u>	<u>Student Learning Outcomes (SLO) & MFT Competencies (MFTC:)</u>	<u>Assessment Signature Assignments</u>
Summarize the developmental tasks for individuals and families with adolescents.	SLO: 1, 2 MFTC: 1.1.1 Understand systems concepts, theories, and techniques ...foundational to MFT. 2.1.1: Understand principles of human development, sexuality, gender,...couple and family processes...	Reading and Class Participation Interview with an Adolescent
Identify a variety of therapeutic interventions for adolescents and their families.	SLO: 2 1.1.2 Understand theories and techniques of individual, marital, couple, family, and group psychotherapy 3.1.1 Know which models...are most effective for presenting problems 4.5.3-Articulate rationales for interventions related to treatment...	Reading and Class Participation Research Paper
Articulate and demonstrate an integrative, evidence-based approach for assessing and working with adolescents within the family context.	SLO: 1, 2 MFTC: 1.1.2 Understand theories and techniques of individual, marital, couple, family, and group psychotherapy 2.1.5...Understand current models of assessment... 2.1.6 -Understand the strengths and limitations of models of assessment and	Therapy Technique Demonstration Research Paper

	diagnosis... 4.1.1-Comprehend a variety of individual and systemic therapeutic models...	
Assess and plan treatment for commonly occurring mental health disorders in adolescents	SLO: 2 MFTC: 1.1.1 Understand systems concepts, theories, and techniques ...foundational to MFT. 1.1.2 Understand theories and techniques of individual, marital, couple, family, and group psychotherapy 1.2.1 Recognize contextual and systemic dynamics	Research Paper Therapy Technique Demonstration
Understand and treat complex trauma in adolescents and young adults.	SLO: 5 MFTC: 1.2.3 Recognize issues that...suggest referral for specialized evaluation...care 2.1.2: Understand major behavioral health disorders... 2.1.3-Understand the clinical needs and implications of persons with comorbid disorders 2.3.1... Diagnose and assess client behavioral and relational health problems systemically and contextually	Research Paper Therapy Technique Demonstration
Establish a culturally sensitive response to issues of gender, race, ethnicity, class, and poverty and articulate awareness of the impact of these differences in the lives of adolescents.	SLO: 1, 4 MFTC: 2.4.3...Evaluate accuracy and cultural relevance of...diagnosis 4.3.1 Match treatment modalities...to client's needs, goals and values 4.3.2 Deliver interventions in a way that is sensitive to special needs of 4.5.1 -Respect multiple perspectives	Interview with an Adolescent Therapy Technique Demonstration
Demonstrates integration of theological and spiritual concerns in assessment and treatment planning	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: 4.5.1 -Respect multiple perspectives	Therapy Technique Demonstration Research Paper

Required Textbooks*

American Psychological Association. (2001). *Publication manual of the American psychological Association (5th ed.)*. Washington, DC: American Psychological Association.

Briere, J. N., & Lanktree, C. B. (2012). *Treating complex trauma in adolescents and young adults*. Los Angeles: Sage Publications.

Micucci, J. (2009). *The adolescent in family therapy: Harnessing the power of relationships*. New York: Guilford Press.

Required Journal Article Readings*

Baldwin, S. A., Christian, S., Berkeljon, A., Shadish, W. R., & Bean, R. (2012). The effects of family therapies for adolescent delinquency and substance abuse: A

- meta-analysis. *Journal of Marital and Family Therapy*, 38, 281-304. doi: 10.1111/j.1752-0606.2011.00248.x
- Bean, R., Perry, B., & Bedell, T. (2001). Developing culturally competent marriage and family therapists: Guidelines for working with Hispanic families. *Journal of Marital and Family Therapy*, 27(1), 43-54.
- Henggeler, S. W. & Sheidow, A. J. (2012). Empirically supported family-based treatments for conduct disorder and delinquency in adolescents. *Journal of Marital and Family Therapy*, 38, 30-58. doi: 10.1111/j.1752-0606.2011.00244.x
- Kaslow, N. J., Broth, M. R., Smith, C. O., & Collins, M. H. (2012). Family-based interventions for child and adolescent disorders. *Journal of Marital and Family Therapy*, 38, 82-100. doi: 10.1111/j.1752-0606.2011.00257.x
- Kimball, E. M. (2008). Developing spirituality in adolescents: Research-informed practice and practice-inspired research. Paper presented at the Third North American Conference on Spirituality and Social Work.
<http://www.stu.ca/~spirituality/documents/LisaKimball-DevelopingSpiritualityinAdolescents.pdf>
- Levinson, M. R., Aldwin, C. M. & Igarashi, H. (2013). Religious development from adolescence to middle adulthood. Paloutzian, R. F. and Park, C. L. (eds), *Handbook of psychology of religion and spirituality*, 2nd ed. New York: Guilford Press.
- Sanders, G., & Kroll, I. (2000). Generating stories of resilience: Helping gay and lesbian youth and their families. *Journal of Marital and Family Therapy*, 26(4), 433-442.
- Sellers, R., Copeland-Linder, N., Martin, P., & Lewis, R. (2006). Racial identity matters: The relationship between racial discrimination and psychological functioning in African American adolescents. *Journal of Research on Adolescents*, 16(2), 187-216.
- Van der Stouwe, T., Asscher, J. J., Stams, G. J., Dekovic, M., & van der Laan, P. H. (2014). The effectiveness of Multisystemic Therapy (MST): A meta-analysis. *Clinical Psychology Review*, 34, 468-481. Retrieved from <http://dx.doi.org/10.1016/j.cpr.2014.06.006>

Course Requirements

1) **Readings and Class Participation (10%)**

You are expected to purchase and read the required textbook identified above and other readings as scheduled. Readings should be completed prior to the class period identified.

Assignments will be given in-class that focus on applying the reading and/or lecture materials to real-world scenarios. Additional details regarding these assignments will be given as the semester progresses. In-class assignments cannot be made-up

2) **Therapy Technique Demonstration** (30%)

Students will develop their own age- and culturally-appropriate therapy technique designed for adolescents. Students will then demonstrate the technique for the class with a partner playing the role of an adolescent. They will also demonstrate systemic interviewing skills with the intent of developing rapport with the adolescent, gaining a clear picture of the symptoms/diagnosis, and evaluating interactions within the family system. **The demonstration should last between 10-15 minutes.**

In introducing the demonstration (3-5 minutes), students must answer the following questions:

- What model informs the intervention and how does the intervention fit the model theoretically?
- What is the goal of the intervention?
- What is the child/adolescent's diagnosis? How do you justify the diagnosis?
- What is a description of "the problem" from the perspective of the parent, client, and teacher?
- What, if any, biopsychosocial issues, including the family's mental health history and relevant medical issues might impact the problem and/or treatment?
- Are there any indications of abuse or trauma (past or present)?

Students must also distribute a 1-page handout to the class based on the following headings:

Heading #1- Name of intervention

Heading #2- Objectives of intervention (at least 3)

Heading #3- Description of how intervention fits a particular theory

Heading #3- Intervention instructions

3) **Interview with an Adolescent** (30%)

Students will interview an adolescent in order to gain a better sense of the unique developmental challenges adolescents face. Following the interview, students must write a **3-5-page (double-spaced)** overview of the interview, which addresses the following questions:

1. What does the adolescent like about being a teenager and why?
2. What does the adolescent dislike about being a teenager why?

3. How have relationships with parents, teachers, and siblings changed as the adolescent has gotten older?
4. What are the most important things in the adolescent's life and why?
5. What does the adolescent wish adults understood about being a teenager?
6. What does the adolescent view as the most significant challenges facing teenagers in general?

4) **Research Paper (30%)**

Students will write a 7-10 page double-spaced scholarly paper in APA format (including 8-10 professional references) on a commonly occurring mental disorder of adolescents. Topics might include ADD/ADHD, disruptive/defiant behavioral disorders, or a mood disorder.

The paper must include the following headings:

Section #1- Introduction (please do not write-out this heading in keeping with APA format)

Heading #1- Defining the Problem

- What is the prevalence of the disorder?
- What are the criteria used to diagnose the problem? Are the criteria generally accepted by researchers or is there some controversy?
- What are the problems/special considerations in diagnosing the disorder in children/adolescents?

Heading #2- Treatment

- What evidenced-based approaches are available in treating the disorder? If no evidenced-based approaches exist, what are treatment approaches are suggested in the literature?
- Describe the evidenced-based approaches and summarize related research.
- What are the strengths/limitations of each approach?

Heading #3- Conclusion

Summary of Class Grading Percentages

10%	Assigned Readings, Class Participation, Attendance
30%	Play Therapy Demonstration (DUE June 3 rd , 4 th , and 5 th)
30%	Adolescent Interview (Adolescent selected by June 2 nd ; Final Paper DUE June 12 th)
30%	Research Paper (Topic due June 3 rd ; DUE June 19 th)
100%	Total

Grading Scale

A = 90%-100%

B = 80%-89%

C = 70%-79%

D = 60%-69%

F = 59% or lower

Academic Policies

Expected Behavior in Class

As discussions in this class may often be of a personal nature, it is crucial to respect each class member's values and views. What is revealed of individuals during class meetings is considered confidential. Since you are taking this class, the instructor assumes that each person will be mature when discussing personal issues around family of origin, ethnicity, gender, and sexuality. If there are concerns that you have about the class, please make an appointment to talk with the professor.

Use of Inclusive Language

In accordance with seminary policy, students are to use inclusive language in class discussions and in written and oral communication by using language representative of the whole human community in respect to gender, sexual orientation, ethnicity, age, and physical and intellectual capacities. For more information see:

<http://lpts.libguides.com/content.php?pid=469569&sid=4083885> Direct quotations from theological texts and translations of the Bible do not have to be altered to conform to this policy. In your own writing, however, when referring to God, you are encouraged to use a variety of images and metaphors, reflecting the richness of the Bible's images for God.

Special Accommodations

Students requiring accommodations for a documented physical or learning disability should be in contact with the Director of the Academic Support Center (kmapes@lpts.edu) during the first two weeks of a semester (or before the semester begins) and should speak with the instructor as soon as possible to arrange appropriate adjustments. Students with environmental or other sensitivities that may affect their learning are also encouraged to speak with the instructor.

Expected Academic Performance

Individuals admitted to graduate study are expected to perform well consistently in academic work. This is translated into grades in the following way. Basic mastery of the body of knowledge required for a course at a level expected for graduate study results in scores in the B to B+ range. Grades of A- are granted for work which demonstrates: 1) basic mastery of the body of knowledge and 2) independent thought about the subject matter. Grades of A are granted for work which demonstrates: 1) mastery of the required body of knowledge, 2) independent thought about the subject matter, and 3) creative/integrative use of the material, exceptional writing and expression which

integrates the material into a student's own system of thought, and/or exceptionally well done or articulated research.

Expectations for Class Attendance and Assignments

1. Assignments are due on the day they are assigned.
2. Given the intensive nature of this class, late assignments will be graded down one letter grade per day, beginning the day after the assignment is due.
3. Late assignments will not be accepted past two days overdue.
4. Reading and discussion are expected of all participants.
5. As per seminary policy, an incomplete will be granted only because of serious personal or family problems or a major illness. Procrastination and poor planning are not acceptable as illness. While these may be personal problems, they do not qualify as the kind of circumstantial disruption of life that will qualify for an incomplete. Acceptable excused absences include death of an immediate family member, an obligatory school function, or illness with a doctor's note.
6. In the event of an **excused** absence, the student must provide documentation of his or her absence. If you have an excused absence, you will be allowed to make-up assignments that you missed as a result of your absence. Arrangements for make-up assignments are to be coordinated with the instructors.

Academic Honesty

All work turned in to the instructors is expected to be the work of the student whose name appears on the assignment. Any borrowing of the ideas or the words of others must be acknowledged by quotation marks (where appropriate) and by citation of author and source. Use of another's language or ideas from online resources is included in this policy, and must be attributed to author and source of the work being cited. Failure to do so constitutes plagiarism, and may result in failure of the course. Two occurrences of plagiarism may result in dismissal from the Seminary. Students unfamiliar with issues related to academic honesty can find help from the staff in the Academic Support Center. For more information, see the Policy for Academic Honesty in the Student Handbook.

Citation Policy

Citations in your papers should follow Seminary standards, which are based on these guides:

American Psychological Association. *Publication Manual of the American Psychological Association*. 6th ed. Washington, DC: American Psychological Association, 2010.

Turabian, Kate L., Wayne C. Booth, Gregory G. Colomb, and Joseph M. Williams. *A Manual for Writers of Research Papers, Theses, and Dissertations: Chicago Style*

for Students and Researchers. 8th ed. Chicago: University of Chicago Press, 2013.

The Chicago Manual of Style. 16th ed. Chicago: University of Chicago Press, 2010.

Copies of these guides are available at the library and in the Academic Support Center.

Attendance Policy

According to the Seminary catalog, students are expected to attend class meetings regularly. In case of illness or emergency, students are asked to notify the instructor of their planned absence from class, either prior to the session or within 24 hours of the class session. **Given the intensive and short nature of this course, missing more than one class may result in a low or failing grade in the course.**

Email Policy

Emails will be responded to as quickly as possible. However, emails sent on the weekend may not be responded to until Monday. It is highly recommended that you provide sufficient time before an assignment is due for receiving a response to an email asking a question.

MFT Program COAMFTE Core Competencies

Rubrics for COAMFTE Core Competencies in each and every course will be distributed for review during the first class of the semester. The student will read each competency and review the corresponding primary assessment tool and student learning outcome (SLO). During the semester, the professor will be responsible for assessing the degree to which the competency has been developed at a minimal Performance Level of “3” on the 1-5 Assessment Rubric Rating Scale.*

If the student has not achieved each competency at the minimal level of success by the last day of the semester, the student will have (30) days after the final exam date to remediate the competency, and then report back to the professor to demonstrate how the competency has been met. If demonstration of the competency has not been satisfactorily completed at a minimal performance level of “3” after the 30 day period, the student will be referred to the Faculty Remediation Committee (FRC) who will meet with the student and provide corrective feedback through the use of a written Individual Remediation Plan (IRP) and timeline.

The student will have until the end of the semester to demonstrate fulfillment of the minimal performance level. If the student does not address the student learning outcome prescribed or cannot meet a minimal performance level of “3,” the student will be dismissed from the program at the recommendation of the FRC Committee members (see *Student Handbook*).

*** Assessment Rubric Rating Scale**

5 = Exceptional: Skills and understanding significantly beyond developmental level
4 = Outstanding: Strong mastery of skills and thorough understanding of concepts

3 = Mastered Basic Skills at Developmental Level: Understanding of concepts/skills evident

2 = Developing: Minor conceptual and skill errors; in process of developing

1 = Deficits: Significant remediation needed; deficits in knowledge/skills

Note: Ratings of “3” and above indicate performing well for developmental level

COURSE & ASSIGNMENT SCHEDULE

(Reading assignments need to be read for that date listed)

AFT= *The Adolescent in Family Therapy*

TCT = *Treating Complex Trauma in Adolescents and Young Adults*

DATE	TOPIC	READINGS/DUE DATES
June 1 st	Syllabus & Introduction A Comprehensive Multicultural/Developmental/Life Cycle Framework Basic Concepts for Treating Adolescents The Pervasiveness of Trauma & Abuse	AFT – 1-2 AFT – 3 & 11 TCT – 1-2
June 2 nd	Assessment: Solution-Focused Narrative Trauma-Informed Interviewing Skills Assessment Tools (interviewing, self-report, other-report) Identifying the Problem Identifying Attempted Solutions Spiritual Dimensions of Assessment	AFT – 4 TCT – 3-4; Appendices I.--VII. Adolescent Selected for Interview DUE
June 3 rd	Common Factors: Therapeutic Relationship; Building Alliance with Family Multiculturalism & Diversity: Low-Income Families Ethnic/Racial Diversity	AFT – 1, 3, & 4 TCT – 5 & 8 AFT – 12 TCT – 5

	Spiritual Development Examining Specific Disorders in Adolescents: ADD/ADHD IFS Eating Disorders Underachievement & Other School-Related Problems	AFT – 5 AFT – 10 Research Paper Topic DUE Therapy Technique Demonstrations DUE
June 4th	Examining Specific Disorders in Adolescents: Mood Disorders (Anxiety, Depression, & Suicidality) Defiant & Disruptive Behaviors EFT Oppositional Behavior Psychosis	AFT – 6-7 AFT-8 AFT – 9 Therapy Technique Demonstrations DUE
June 5th	Specific Evidence-based Models for Treating Adolescents: Integrative Treatment of Complex Trauma for Adolescents (ITCT-A) Multisystemic Therapy (MST) Functional Family Therapy (FFT) Multidimensional Family Therapy (MDFT) Brief Strategic Family Therapy (BSFT)	Baldwin, Christian, Berkeljon, Shadish, & Bean (2012) Kaslow, Broth, Smith, & Collins (2012) Henggeler & Sheidow (2012) TCT – 5-22 (Sections II. & II.) van der Stouwe, Asscher, Stams, Dekovic, & van der Laan (2014) – MST Meta-Analysis Therapy Technique Demonstrations DUE
June 12th		Adolescent Interview DUE

June 19th		Research Paper DUE

CRITERIA FOR EVALUATION
MMFT 640-Family Therapy: Children & Adolescents

<u>Assignments</u>	<u>Criteria</u>	<u>Points</u>
Therapy Technique Presentation <i>Core Competencies: 2.1.2, 2.1.4, 2.1.5, 2.3.3, 2.3.9, 4.3.2</i>	General delivery of intervention, including preparation, organization, & enthusiasm	20
	Handouts applicable to presentation	20
	Conventions of Language & Mechanics (grammar, parallel sentence structure, correct spelling, neatness, etc.)	10
	Response to questions listed in syllabus	25
	Delivery of intervention (i.e., consistent with description, therapist skill, appropriateness for age, developmental level, problem)	25
	<i>TOTAL POINTS POSSIBLE</i>	<i>100</i>
Research Paper	Grammar/Spelling/APA Style	25
	Depth of response to headings	75
	<i>TOTAL POINTS POSSIBLE</i>	<i>100</i>
Interview w/ An Adolescent	Grammar/Spelling/Sentence Structure	10
	Depth of response to headings	40
	<i>TOTAL POINTS POSSIBLE</i>	<i>50</i>
In-Class Assignments	<i>TOTAL POINTS POSSIBLE</i>	<i>25</i>
Final Exam <i>Core Competencies: 1.1.1, 3.1.1</i>	<i>TOTAL POINTS POSSIBLE</i>	<i>100</i>