#### PCf 3083

### Theories of Change Fall 2018

Loren Townsend ltownsend@lpts.edu

#### **Syllabus**

#### **Course Description:**

This course explores the epistemological foundations for the practice of Marriage and Family Therapy, especially as this is integrated in a theological context. The course is a graduate seminar and heavily focused on reading and class discussion. Course content centers a deep understanding of how epistemological assumptions guide theory, models and practice, and critical evaluation of traditional and emerging models of family therapy. One primary goal is for students to develop skill in: (1) describing and discussing epistemological and theoretical foundations of primary models of family therapy and (2) describe and discuss a personal theory of change that guides model selection and therapeutic choices in the practice of MFT.

## Format:

This class is a graduate seminar. Participants are expected to be prepared for class by completing all reading and thorough preparation for scheduled/assigned class presentations/discussions. Because of the highly interactive nature of this class, multiple absences or arriving late for class will affect a student's grade in the course.

One day a mystic stopped Nasrudin on the street and pointed at the sky. He meant: "There is only one truth, which covers all." Nasrudin was accompanied at the time by some desiring to be his disciple. They said to themselves, "This weird apparition is mad. Perhaps Nasrudin will take some precaution against him."

Sure enough, the Mullah rummaged in his knapsack and brought out a coil of rope. The followers thought, 'Excellent, we will be able to seize and bind up the madman if he becomes violent" Nasrudin's action had, in fact, meant, "Ordinary humanity tries to reach the sky by methods as unsuitable as this rope." The madman laughed and walked away. "Well done," said the followers, "you saved us from him."

This story has given rise to the Persian proverb: "A question about the sky warrants the answer of a rope."

Idries Shah

Theories of Change: Course Outcomes						
By the end of the semester, students will:	Student Learning Outcomes (SLO) & MFT Competencies (MFTC:)	<u>Assessment</u> <u>Signature Assignments</u>				
Develop a historically-informed understanding of three epistemological streams influencing family therapy theory.	SLO: 2 -Demonstrate a broad knowledge of MFT theory MFTC: 1.1.1understand systems concepts, theoriesfoundational to MFT 1.1.2understand theories and techniques of individual, maritalpsychotherapy 6.1.1-Know the extant MFT literature, research	Concept presentations Model Presentation				
Demonstrate skill in critically discerning and discussing the epistemological foundations for principal therapeutic schools of thought in Family Systems Theory.	<ul> <li>SLO: 2-Demonstrate a broad knowledge of MFT theory</li> <li>MFTC: 2.1.6 -Understand the strengths and limitations of models of assessment and diagnosis</li> <li>2.4.2-Assess ability to view issues and therapeutic processes systemically</li> <li>4.1.2-Recognize strengths, limitationsof specific therapy models</li> <li>4.5.3-Articulate rationales for interventions related to treatment</li> </ul>	Model Presentation Theory of Change Paper and Presentation				
Demonstrate the ability to describe one's own theory of change to clients, colleagues, supervisors and potential employers.	SLO: 4ability to apply multicultural approaches to MFT and attendtodifferences MFTC: 3.1.1-Know which modelsare most effective for presenting problems 4.1.1-Comprehend a variety of individual and systemic therapeutic models	Theory of Change Paper and Presentation				
Discuss the dynamic interaction between theoretical foundations in family therapy and key theological understandings of existence, creation, and the human person in a moral and relational ecological context.	SLO: 5 able to use a theologically informed and clinically appropriate framework to integrate religious and spiritual factorsinto MFT MFTC: 4.5.1Respect multiple perspectives	Model Presentation Theory of Change Paper and Presentation Duncan, et al review				
<b>Multicultural Therapy Definition:</b> 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).

#### Texts

# Becvar, D.S. and Becvar, R.J. (2014). *Family therapy: A systemic integration*, 8<sup>th</sup> ed. Boston: Pearson. **Print Reserve in Library**

#### Supplemental Texts (Library Reserve)

Browning, D.S. (1987). *Religion and the modern psychologies*. Minneapolis: Fortress Press.

Duncan, B. L., S. D. Miller, B. E. Wampold, and M. A. Hubble (2009). *The heart and soul of change*. 2 ed. (2009). Washington, DC: American Psychological Association.

Keeney, B. (1983). *Aesthetics of change*. New York: Guilford Press Luepnitz, D. (1988). *The Family Interpreted*. New York: Basic Books.

Assignments	
<ul> <li>Assignment 1: MFT Models, Epistemology and Change (two class sessions) (50% of grade) Grading Rubric in Appendix A.</li> <li>Expectations for class session 1 <ul> <li>Provide a comprehensive overview of assigned therapy model based on class readings and additional resources. Use material from primary sources when possible (original writing of founders) and others who have developed the model in recent years.</li> <li>Any relevant factors in how model developed</li> <li>Concepts governing model</li> <li>Epistemological analysis of model (the "belief system" grounding it, use and understanding of knowledge, etc.)</li> <li>How epistemology translates into practice—how it governs what the therapist observes, assessment,</li> </ul> </li> </ul>	<ul> <li>Assignment 1: Grading Rubric</li> <li>Evidence of research/reading beyond basic texts presented in class</li> <li>Demonstrates understanding of concepts and epistemology of model</li> <li>Demonstrates professionally useful understanding of how epistemology of model guides practice</li> <li>Makes effective connections between therapy model's epistemology and practice and broader concerns of social meaning, theology, etc.</li> <li>Case study effectively demonstrates clear understanding of model and epistemology</li> <li>Case study shows how model/epistemology provides (or fails</li> </ul>

<ul> <li>treatment planning, outcome expectations and observations</li> <li>Theological connections, meanings or conflicts with model epistemology</li> <li>Summarize the therapy model's "theory of change" (how do families/individuals change?)</li> <li>Be creative with classroom presentation</li> <li><u>Expectations for class session 2</u></li> <li>Present a case for class discussion using the therapy model assigned</li> <li>Use concepts from class session 1</li> <li>Demonstrate with case study how epistemology/model influences each dimension of therapy: Therapist observation, statement of presenting problem, expected outcomes, therapist behavior and expectations through therapy process (intake, joining, early therapy, middle stages, termination)</li> </ul>	<ul> <li>to provide) a contextual framework for the whole of therapy</li> <li>Case study demonstrates a clear understanding of how model/epistemology guides therapist observation, action and expectations</li> <li>Any handouts and/or AV of professional quality</li> <li>Class presentation demonstrates appropriate professionalism</li> <li>Presentation and case study show appropriate awareness of multicultural and contextual issues</li> </ul>
<ul> <li>Assignment 4: Theory of Change Paper and Presentation (50% of grade) (<i>Due last day of class</i>)</li> <li>Write a 10-15 page double spaced, APA format (no more than 15 pages of text, excluding references—only the first 15 pages will be evaluated) paper describing your personal theory of change that guides your work as a therapist. Your paper should include, but not limited to: <ul> <li>A general description of your theory and theology of change (that is, what do you believe about how and why clients change in therapy?).</li> <li>Clarity about the epistemological assumptions and commitments that support your theory of change.</li> <li>Description of how your preferred model of therapy connects with your epistemological assumptions and commitments. Does it account for biology, psychology, social/contextual factors, life of the spirit, etc.? How?</li> <li>How do these commitments and beliefs translate into choice of therapy model and inform your in-session decisions of what to do with clients? Be specific.</li> <li>Be sure to consider contextual issues, such as how cultural factors influence your epistemological and theoretical thinking.</li> <li>Address a beginning theological framework for your theory of change. For instance, what place does religion or spirituality play in your theory of change? How do your theological/religious beliefs influence what you expect and what you believe you know about therapy, clients, life, change, etc.</li> </ul> </li> </ul>	<ul> <li>Theory of change is well grounded in a nuanced, critically analyzed use of MFT theory.</li> <li>Epistemological assumptions and commitments framing the argument for the student's theory of change are identified and justified with insight and critical thought.</li> <li>Student relates theory of change directly to preferred models of therapy in a nuanced, critically evaluated way. Shows clear evidence and examples that demonstrate how theory of change influences and directs therapeutic action.</li> <li>Demonstrates coherence between concepts, theory of change, practice.</li> <li>Theory of change demonstrates clear attention to multicultural, multireligious and other contextual factors that frame and influence family therapy.</li> <li>Paper attends directly to theological and spiritual factors related to theory of change, appropriate use of personal faith tradition and understanding of religious diversity.</li> <li>Classroom presentation is consistent with written theory</li> </ul>

0	A prospective clinical director interviewing you for a job	٠	Classroom presentation demonstrates a
0	A supervisor deciding whether to accept you as a supervisee		professional ability to appropriately articulate a theory of change to
0	A colleague who challenges you on your understanding of change		employers, colleagues and clients
0	A client who wants to know how you decide what to do in therapy and how that is expected to help them change		
0	Be creative—you may speak to the whole class, use a "fishbowl" conversation using a classmate to demonstrate (for instance) a job interview or conversation with client, etc.		

#### **Policies**

#### **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. 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. See for more information, see: <a href="http://www.lpts.edu/academics/academic-resources/academic-support-center/online-writing-lab/avoiding-gender-bias">http://www.lpts.edu/academics/academic-resources/academic-support-center/online-writing-lab/avoiding-gender-bias</a>

#### 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.

#### **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.

#### **Citation Policy**

Citations in your MFT Program papers should follow the American Psychological Association. *Publication Manual of the American Psychological Association*. 6th ed. Washington, DC: American Psychological Association, 2010.

Copies of the manual 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. Because of the highly interactive nature of this seminar, class absences must be minimal. Multiple class absences and arriving late for class may result in lower grade or failing the class.

**Make-Up Work Policy:** No make up work for unexcused absences will be accepted. Simply emailing the instructors informing them that you will be absent (for any reason) will **not** count as an excused absence, and therefore will count as an unexcused absence. Unexcused absences will result in a score of "0" for any assignments due on the day of your absence. <u>Acceptable excused absences</u> include death of an immediate family member, an obligatory school function or illness with a doctor's note. In order for these absences to be **excused**, students must provide documentation of their 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.

**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.

#### **Grading: Grade Scale and Philosophy**

A	96.6-100
A-	93.6-96.5
B+	90.6-93.5
В	87.6-90.5
B-	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

Individuals admitted to graduate study are expected to perform consistently and well in academic work. This is translated into grades in the following way:

- Basic mastery of the body of knowledge at a level expected in graduate study will earn scores in the B to B+ range.
- Grades of A- are granted for work which demonstrates basic mastery of the body of knowledge, and independent thought about the subject matter.
- Grades of A are granted for work which demonstrates mastery of the required body of knowledge, independent thought about the subject matter, creative/integrative use of the material, exceptional writing which integrates the material into a student's own system of thought, and/or exceptionally well done or articulate research.

	Sch	redule 2018
Date	Classroom	Assignment/Reading
9/6	Introduction	Becvar & Becvar, chs 1, 2, 4
	Lecture/discussion: Epistemology and	
	MFT	Sparks, J. A and Duncan, B L. (2010). Common factors in couple
		and family therapy: Must all have prizes? In Duncan, B.L, Miller,
		S.D., Wampold, B.E. & Hubble, M.A., The heart and soul of
		change, 2 <sup>nd</sup> ed. Washington, DC: APA. (pg. 357-291) (CAMS)
9/13	Systemic epistemology: Concepts and	Becvar & Becvar, ch 3, 15
	Therapeutic Implications for Change	Keeney, Chs. 2-3 <i>Library reserve!</i>
	Vocabulary	Assignment: Read closely, take notes and be ready to discuss
	1-Cybernetics:	the reading.
	2-System Wholeness & Ecology	
	3-Circular causation	
	4-Feedback/Homeostasis	
	5-Recursion & levels	
	6-Autopoeisis	
	7-Closed/open systems/entropy	
	8-First/second order change	
	9-Equifinality/Equipotentiality	
0 /20	10-Isomorphism:	
9/20	Epistemology & Change	Becvar & Becvar Ch. 10
	Communication Approaches	Other supportive reading
	Leader 1 Leader 2	
	Communication Case Analysis	
0/27	-	
9/27	Epistemology & Change Strategic & Milan	Becvar & Becvar Ch. 11
	Leader 1	Other supportive reading
	Leader 2	
	Strategic Case Analysis	
10/4	Epistemology & Change:	Becvar & Becvar Ch 9
	Structural Approach	Other supportive reading
	Leader 1	
	Leader 2	
	Structural Case Analysis	
10/11	Epistemology & Change: Natural Systems	Becvar & Becvar Ch 7
	(Bowen)	Other supportive reading
	Leader 1	
	Leader 2	4
	Natural Systems Case Analysis	
10/18	Research and Reading	Research and Reading
10/25	Epistemology & Change:	Becvar & Becvar Ch. 6
	<b>Object Relations</b>	Other supportive reading
	Leader 1:	

	Leader 2:	
	Object Relations Case Analysis	
11/1	Epistemology & Change: Contextual Therapy Leader 1 Leader 2	Becvar & Becvar Ch. 6 Other supportive reading
11/8	Contextual Therapy Case Study Epistemology & Change	Becvar & Becvar Ch 8
11/0	Experiential Approaches	Other supportive reading
	Leader 1	other supportive reading
	Leader 2	
	Experiential Therapy Case Study	
	Communication Case Analysis	
11/15	Epistemology & Change:	Becvar & Becvar Ch. 13
	Narrative & Collaborative Therapy	Other supportive reading
	Leader 1	
	Leader 2	
11/22	Narrative/Collaborative Case Analysis	
11/22	Thanksgiving	Becvar & Becvar Ch. 12
11/29	Epistemology & Change: Cognitive/Behavioral	Other supportive reading
	Leader 1	Other supportive reading
	Leader 2	
	Case Analysis	
12/6	Theory of Change Presentations	Present your Theory of Change paper. Fifteen minute, concise
	Theory of Change Paper Due	summary of your theory of change as you would describe it to a
		professional interviewing you for a job. See Syllabus description.

Assignment: MFT Models, Epistemology and Change (two class sessions)

#### • Expectations for class session 1

- Provide a comprehensive overview of assigned therapy model based on class readings and additional resources. Use material from primary sources when possible (original writing of founders) and others who have developed the model in recent years.
  - Any relevant factors in how model developed
  - Concepts governing model
  - Epistemological analysis of model (the "belief system" grounding it, use and understanding of knowledge, etc.)
  - How epistemology translates into practice—how it governs what the therapist observes, assessment, treatment planning, outcome expectations and observations
  - Theological connections, meanings or conflicts with model epistemology
  - Summarize the therapy model's "theory of change" (how do families/individuals change?)
- Be creative with classroom presentation

#### • Expectations for class session 2

- o Present a case for class discussion using the therapy model assigned
  - Use concepts from class session 1
  - Demonstrate with case study how epistemology/model influences each dimension of therapy: Therapist observation, statement of presenting problem, expected outcomes, therapist behavior and expectations through therapy process (intake, joining, early therapy, middle stages, termination)

Key:

9-10 Exceeds Expectations for level of training

6-8 Meets expectations

3-5 Marginal

0-2 Unacceptable

Score	9-10	6-8	3-5	0-2	SLOs and Competencies
Evidence of research/reading beyond basic texts presented in class					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Demonstrates understanding of concepts and epistemology of model					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Demonstrates professionally useful understanding of how epistemology of model guides practice					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Makes effective connections between therapy model's epistemology and practice and broader concerns of social meaning, theology, etc.					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Case study effectively demonstrates clear understanding of model and epistemology					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Case study shows how model/epistemology provides (or fails to provide) a contextual framework for the whole of therapy					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2, 4.5.3
Case study demonstrates a clear understanding of how model/epistemology guides therapist					SLO: 2, 4 MFTC: 1.1.1, 6.1.1, 2.4.2, 4.1.2,

observation, action and expectations		4.5.3
Presentation and case study show appropriate awareness of multicultural and contextual issues		SLO: 4 MFTC: 4.1.1, 4.5.1
Discussion leadershipshows expert ability to engage the class in a focused, critical discussion of issues.		

Assignment: Theory of Change Paper and Presentation

•	Write a 10-15 page double spaced, APA format (no more than 15 pages of text, excluding
	references—only the first 15 pages will be evaluated) paper describing your personal theory of
	change that guides your work as a therapist. Your paper should include, but not limited to:
	A superstation of second the main data of shores (that is substated as second strings)

- A general description of your theory and theology of change (that is, what do you believe about how and why clients change in therapy?).
- Clarity about the epistemological assumptions and commitments that support your theory of change.
- Description of how your preferred model of therapy connects with your epistemological assumptions and commitments. Does it account for biology, psychology, social/contextual factors, life of the spirit, etc.? How?
- How do these commitments and beliefs translate into choice of therapy model and inform your in-session decisions of what to do with clients? Be specific.
- Be sure to consider contextual issues, such as how cultural factors influence your epistemological and theoretical thinking.
- Address a beginning theological framework for your theory of change. For instance, what place does religion or spirituality play in your theory of change? How do your theological/religious beliefs influence what you expect and what you believe you know about therapy, clients, life, change, etc.
- In Class: A presentation demonstrating how you will describe your theory of change to one or more of the following
  - A prospective clinical director interviewing you for a job
  - A supervisor deciding whether to accept you as a supervisee
  - A colleague who challenges you on your understanding of change
  - A client who wants to know how you decide what to do in therapy and how that is expected to help them change
  - Be creative—you may speak to the whole class, use a "fishbowl" conversation using a classmate to demonstrate (for instance) a job interview or conversation with client, etc.
- Key:
- 9-10 Exceeds Expectations for level of training
- 6-8 Meets expectations
- 3-5 Marginal
- 0-2 Unacceptable

Score	9-10	6-8	3-5	0-2	SLOs and Competencies
Theory of change is well grounded in a nuanced, critically analyzed use of MFT theory.					SLO: 2. MFTC:2.1.6, 2.4.2, 3.1.1
Epistemological assumptions and commitments framing the argument for the student's theory of change are identified and justified with insight and critical thought.					SLO: 2, 4 MFTC: 4.5.3, 2.1.6, 2.4.2, 4.5.3
Student relates theory of change directly to preferred models of therapy in a nuanced, critically evaluated way. Shows clear evidence and examples that demonstrate how theory of					SLO: 2 MFTC: 4.1.2, 3.1.1, 4.1.1

change influences and directs therapeutic action.	
Demonstrates coherence between concepts,	SLO: 1, 2
theory of change, practice.	MFTC: 4.1.2, 3.1.1, 4.1.1
Theory of change demonstrates clear attention to	SLO: 4
multicultural, multireligious and other contextual	MFTC: 2.1.6, 3.1.1, 4.1.1,
factors that frame and influence family therapy.	
Paper attends directly to theological and spiritual	SLO: 5
factors related to theory of change. Good use of	MFTC: 4.5.1
theological thought in addressing human change,	
appropriate use of personal faith tradition and	
understanding of religious diversity.	
Classroom presentation is consistent with written	SLO: 2
theory	MFTC: 4.1.2, 3.1.1, 4.1.1
Classroom presentation demonstrates a	SLO: 2.
professional ability to appropriately articulate a	MFTC:2.1.6, 2.4.2, 3.1.1
theory of change to employers, colleagues and	
clients	

# Primary Competency Domain Summary

	Competency Domain 1: Foundations of Treatment Knowledge of system concepts, skills to establish therapeutic relationships. Demonstrates the ability to use a specific MFT theoretical lens to observe and describe family structure, power dynamics, and processes.	Domain Score
	SLO 1, 4	
Ass	Competency Domain 2: Clinical Assessment and Diagnosis ess activities focused on the identification of the problems and concerns to be addressed in therapy.	Domain Score
1.	Demonstrates the ability to conceptualize a family structure using theoretical language that illuminates the client problem within the context of family and larger systems.	
2.	Utilizes appropriate therapeutic assessment tools to complete client diagnosis and treatment planning, considering multi-cultural and diverse frameworks with the assistance of supervision.	
	SLO 1, 2, 4	
	Competency Domain 3: Treatment Planning and Case Management Treatment planning with client/client family:	Domain Score
1.	Establishes appropriate client treatment goals using observation, assessment, and	
	conceptualization skills including client feedback (ORS/SRS etc.) and supervisory consultation.	

2.	Demonstrates ability to appropriately administrate developing client case load at LSCC and other Practicum sites.	
	SLO 1, 2, 4, 5	
	<u>Competency Domain 4: Therapeutic Interventions</u> All activities designed to ameliorate the clinical issues identified.	Domain Score
1.	Establishes and utilizes theoretically-based interventions to work toward accomplishment of client treatment goals.	
2.	Utilizes client feedback in therapy (ORS/SRS) to assess progress	
	SLO 1, 3, 4, 5	
	<b>Competency Domain 5: Legal Issues, Ethics, and Professional Standards</b> All aspects of therapy that involve statutes, regulations, principles, values, and mores of MFTs.	Domain Score
1.	Demonstrates awareness of ethical and legal issues that arise in the course of therapy including establishing boundaries in the therapeutic relationship and maintaining role of self as therapist.	
2.	Demonstrates knowledge of LSCC policies and procedures and those of other Practicum sites.	
	SLO 1, 3, 4, 5	
	Competency Domain 8: Theological and Spiritual Reflection and Integration Attention to pastoral, theological and spiritual dimensions of therapy and therapist-client interactions	Domain Score
	Demonstrates increasing ability to reflect pastorally and theologically to clinical work and manage religious and spiritual content in therapy.	
	Practicum Objective 7, 11 – SLO 5	
	Competency Domain 9: Multi-contextual engagement.	Score
	SLO 1, 3, 5	