PSYC*6610, Course Outline: Fall 2019

General Information

Course Title: Advanced Child and Adolescent Psychotherapy

Course Description:

This course is designed to add breadth and depth to earlier coursework and practica in the Clinical Child and Adolescent Psychology program. Specifically, students will add depth in integrating the science and art of therapy through discussions of common factors, evidence-based practice and diversity, exploring their own identity and style as a clinician, and learning about the application of CBT in a health psychology context. Breadth will be achieved by introducing Acceptance and Commitment Therapy (ACT), Dialectical Behavioral Therapy (DBT), and Emotion Focused Family Therapy (EFFT).

Credit Weight: 0.5

Academic Department: Psychology

Semester Offering: Fall 2019

Class Schedule and Location: Mondays from 2:30 to 5:20 pm in Crop Science Room 101. Please note that our last class is a replacement for Thanksgiving Monday and is scheduled for Friday November 29th, 2:30-5:20 pm.

Instructor Information

Instructor Name: C. Meghan McMurtry Instructor Email: cmcmurtr@uoguelph.ca

Office location and office hours: MacKinnon Extension Room 4004. By appointment.

Course Content

Specific Learning Outcomes (LO):

At the end of this course, successful students will be able to:

- 1. Identify and describe common factors in psychotherapy.
- 2. Delineate the difference between empirically-supported and evidence-based practice and describe diversity considerations in these contexts.
- 3. Explain the basics of ACT, DBT, and EFFT including identifying the basic principles, common techniques, appropriate populations and diversity issues, and evidence-base.
- 4. Identify considerations for psychotherapy within a health psychology context through interdisciplinary care of pediatric chronic pain as an exemplar.
- 5. Interpret the course content in the context of their own professional development, reflecting on their development as a clinician.

- 6. Explain and demonstrate a specific psychotherapy technique or skill of interest to developing clinicians with consideration of diversity issues.
- 7. Be a fully engaged participant in activities demonstrating aspects/techniques of psychotherapy.
- 8. Actively reflect on their strengths and challenges as a developing clinician, interpersonal styles, biases, and coping strategies.
- 9. Demonstrate appropriate academic independence, tolerance of a degree of uncertainty, personal organization, and time management in completing assigned course tasks.

Through the above learning outcomes, this course is intended to address several CCAP Competencies as outlined in the table below.

CCAP (Competencies and Facets	Level*	Specific LO
Profes	sionalism & Interpersonal Relationships		
1.	Demonstrates knowledge of theories and empirical data regarding relationships (e.g., interpersonal relationships, power relationships, therapeutic alliance, interface with social psychology, etc.)	Advanced	1, 2
2.	Demonstrates knowledge of self (e.g., motivation, culture, resources, values, personal biases, factors that may influence the professional relationship such as limits)	Advanced	5, 7, 8
4.	Engages in a professional level and style of conduct and deportment (e.g., organization, timeliness, dress and hygiene, practicing within one's competence)	Advanced	5, 6, 7, 8, 9
7.	Engages in reflective practice and adjusts personal approach, as needed, in professional contexts (e.g., self-care, communicating with colleagues, seeking supervision or feedback)	Intermediate	1, 5, 6, 7, 8, 9
Interv	ention & Consultation		
1.	Demonstrates knowledge of major evidenced-based intervention theories and approaches with individuals and systems (e.g., children, families, groups, organizations). This includes demonstrating respect for the positive aspects of all major intervention approaches, with an openness to varied viewpoints and approaches.	Advanced	1, 2, 3, 4, 6, 7

Lecture Content:

The course format is a combination of lecture-based and more active learning. Attendance and active participation in the class are expected. Whenever possible, experiential activities will be prioritized and will include: role-plays, discussion, and analyses of demonstrations. Each guest

lecturer will be asked to identify experiential components for their class. Together, we will practice and discuss various psychotherapy techniques. Toward the end of the semester, I hope to bring in Theatre students to act as clients for technique practice. To facilitate and fully benefit from these experiential components, a willingness to engage and take risks is required. None of us is perfect and we can only make progress through practice of skills.

My role and responsibilities are as follows: To engage your interest, develop your understanding, and support your exploration of issues in psychotherapy. To facilitate your learning by assigning relevant readings, delivering brief lecture-based material (either myself or via an appropriate expert), and focusing on active practice. Encourage and foster an open class environment that facilitates lively discussion and role-plays. Be available to answer your questions in class, by email, and by appointment. Provide fair evaluation. Adhere to this syllabus. In exceptional circumstances, changes may need to be made to the syllabus. In such cases, I will announce the changes in class as soon as possible as well as on Courselink.

The class is intended to be a safe environment for people to take risks and reflect on their approach. Inspired by Arlene Young's PSYC6020 course outline, all students are asked to agree to the following:

- 1) come to class ready to encourage themselves and others in their attempts to challenge themselves;
- 2) contribute to a kind, supportive and constructive class environment with a balance of positive and specific constructive feedback to build skill and confidence in others;
- 3) respect the privacy of class members and volunteers. Any private information including personal information shared in discussions or role-plays, feedback received by or from another student, and anything recorded (if applicable), is to be considered private and not to be shared with anyone outside this course or small group discussion.

Schedule

Class	Date	Topic	Readings
1	Sept 9	Introduction Common factors, personal models of change	 Karver, M.S., De Nadai, A.S., Monahan, M., & Shirk, S.R. (2018). Meta-analysis of the prospective relation between alliance and outcome in child and adolescent psychotherapy. Psychotherapy, 55, 341- 355.
		Guest facilitator: Michael Grand	 DeRubeis, R.J., Brotman, M.A., & Gibbons, C. J. (2005). A conceptual and methodological analysis of the nonspecifics argument. Clinical Psychology: Science and Practice, 12, 174-183. Wampold, B.E. (2015). How important are the common factors in psychotherapy? An update. World Psychiatry, 14, 270-277.

2	Sept 16	Trauma Guest facilitator: Michael Grand	0	Briere, J., and Lanktree, C. (2008). Integrative Treatment of Complex Trauma for Adolescents (ITCT-A): A Guide for the Treatment of Multiply Traumatized Youth. National Child Traumatic Stress Network. https://keck.usc.edu/adolescent-traumatraining-center/about-itct-a o Chapters 1-4
3	Sept 23	Empirically supported vs. evidence-based therapy Intro to DBT	0 0 0	Weisz, J. R., Kuppens, S., Ng, M. Y., Eckshtain, D., Ugueto, A. M., Vaughn-Coaxum, R., & Weersing, V. R. (2017). What five decades of research tells us about the effects of youth psychological therapy: a multilevel meta-analysis and implications for science and practice. American Psychologist, 72(2), 79-96 (rest is references). Huey, S. J., Tilley, J. L., Jones, E. O., & Smith, C. A. (2014). The contribution of cultural competence to evidence-based care for ethnically diverse populations. Annual Review of Clinical Psychology, 10, 305-338. Lovasz, N. & Clegg, J.W. (in press). The social production of evidence in psychology: A case study of the APA task force on evidence-based practice. Chapter in Rathus, J. H., & Miller, A. L. (2014). DBT® skills manual for adolescents. Guilford Publications. ○ → Chapter 1
4	Sept 30	Dialectical behaviour therapy: Application 1 Guest facilitator: Kaitlyn McLachlan	0	Rathus, J. H., & Miller, A. L. (2014). DBT® skills manual for adolescents. Guilford Publications. ○ → Chapters 2-4
5	Oct 7	Dialectical behaviour therapy: Application 2 Guest facilitator: Kristel Thomassin	0	McCauley, E., Berk, M. S., Asarnow, J. R., Adrian, M., Cohen, J., Korslund, K., & Linehan, M. M. (2018). Efficacy of dialectical behavior therapy for adolescents at high risk for suicide: a randomized clinical trial. JAMA psychiatry, 75(8), 777-785.
		THANKSGIVING MONDAY NO CLASS	0	None

	1	I		
6	Oct 21	Emotion focused family therapy: Intro Guest facilitator: Tamara Berman	0	Foroughe, M. (2018). Emotion focused family therapy with children and caregivers: A traumainformed approach. Routledge. O Chapters 1-2 Any other(s) TBA
7	Oct 28	Emotion focused family therapy: Application Guest facilitator:	0	Foroughe, M. (2018). Emotion focused family therapy with children and caregivers: A traumainformed approach. Routledge. O Chapters 3-4
8	Nov 4	Tamara Berman Psychotherapy and health psychology: Chronic pain as an exemplar	0	Jensen, M.P. & Turk, D.C. (2014). Contributions of psychology to the understanding and treatment of people with chronic pain. Why it matters to all psychologists. American Psychologist, 69(2), 105-118.
			0	Birnie, K.A., Boerner, K.E., & Chambers, C.T. (2013). Families and pain. In PJ McGrath et al. (Eds), Oxford Textbook of Paediatric Pain. Oxford UP: pp. 111-118. Logan, D.E., Coakley, R.M., & Garcia, B.N.B. (2013).
				Cognitive-behavioural interventions. In PJ McGrath et al. (Eds), Oxford Textbook of Paediatric Pain. Oxford UP: pp. 519-530. o Focus on the chronic pain content
9	Nov 11	Psychotherapy and health psychology: Chronic pain as an exemplar	0	McCracken, L.M. & Vowles, K.E. (2014). Acceptance and commitment therapy and mindfulness for chronic pain. American Psychologist, 69(2), 178-187.
			0	Liossi, C. et al. (2019). Effectiveness of interdisciplinary interventions in paediatric chronic pain management: A systematic review and subset meta-analysis. British Journal of Anaesthesia, 123(2), e359-371.
			0	Abstract only of this systematic review on psychological therapies (Fisher et al., 2018, Cochrane Database of Systematic Reviews): https://www.cochranelibrary.com/cdsr/doi/10.100 2/14651858.CD003968.pub5/abstract
10	Nov 18	Acceptance and commitment therapy: Intro	0	Hayes, L.L. & Ciarrochi, J. (2015). The thriving adolescent. Using Acceptance and Commitment Therapy and positive psychology to help teens manage emotions, achieve goals, and build connection. Context Press.

		Guest facilitator: Barb Morrongiello		o Chapters 1-4
11	Nov 25	Acceptance and commitment therapy: Application Guest facilitator: Barb Morrongiello	0 0	Hayes, L.L. & Ciarrochi, J. (2015). The thriving adolescent. Using Acceptance and Commitment Therapy and positive psychology to help teens manage emotions, achieve goals, and build connection. Context Press. o Chapters 5-7 Hacker, T., Stone, P., & MacBeth, A. (2016). Acceptance and commitment therapy—do we know enough? Cumulative and sequential meta-analyses of randomized controlled trials. Journal of affective disorders, 190, 551-565.
12	Nov 29	Health psychology and wrap up	0	None © Note that this is a FRIDAY CLASS (rescheduled from Thanksgiving)

Course Assignments and Tests:

Assignment or	Due Date	Contribution to	Learning Outcomes
Test		Final Mark (%)	Assessed
Class	Throughout semester; divided into	30%	1, 2, 3, 4, 7, 8, 9
participation	first half (15%) and second half		
	(15%). Feedback will be given on		
	the first half of the semester by		
	October 25 th		
Reflection	Throughout semester, by 11:59 pm	50%	1, 2, 3, 4, 5, 8, 9
papers	on:		
	- Sept 22	Submit up to 6	
	- Oct 6	and the top 5	
	- Oct 20	will be chosen.	
	- Nov 3	Each reflection	
	- Nov 17	is worth 10%.	
	- Dec 1		
Presentation of	Throughout semester; resource is	20%	3, 6, 8, 9
a psychotherapy	due the Sunday before your		(possibly 4
technique/skill	assigned class by 11:59 pm		depending on topic)

Additional Notes (if required):

Topics discussed in the course may elicit unexpected emotions, previous personal experiences, challenges, and run counter to your opinions. Your grade in the class does not depend on your

willingness to disclose any highly personal thoughts, ideas, and experiences. However, you are expected to contribute to the class discussion frequently in an informative and thoughtful manner, and are expected to engage with the readings and the materials in a way that enhances your own and your colleagues' learning. In other words, grades will be based on willingness to participate and engage, rather than willingness to disclose personal details.

Class Participation (30%)

You are expected to attend and to contribute to the discussion and activities in all classes. Your class participation includes both general discussions as well as thoughtful, consistent contributions to the in-class activities (e.g., role plays) that we will complete in class. Although the quantity of your ongoing contributions will be considered, the quality is very important. Participation is worth 30% of your grade; feedback will be provided after the first 6 classes (between October 21st and 25th). Throughout the semester, you will be expected to participate in a number of role plays and other activities. Although this type of activity is often challenging and can be uncomfortable, it is crucial for acquiring new clinical skills. For full participation marks, you are expected to fully engage in the activities. I am committed to creating a safe and respectful atmosphere where you can practice various skills through role-plays comfortably (and of course, I will join in as well!).

	Participation & engagement in large group discussions	Participation & engagement in other activities	Contributions to learning environment	Demonstration of knowledge of material and preparation
5	Outstanding.	Outstanding.	Uniformly positive (e.g., supports others, expertly achieves meaningful participation without dominating).	Outstanding. Has clearly read and engaged with the readings/material at a complex level.
4	Uniformly very good to excellent.	Uniformly very good to excellent.	Positive	Very good to excellent grasp and engagement with the readings / material.
3	Adequate to good. Engagement at times superficial.	Adequate to good. Engagement at times superficial.	Neutral	Regular but at times superficial.
2	Low to variable, superficial.	Low to variable, superficial.	At times may be negative (e.g., difficulty finding the balance between staying quiet and dominating the discussion).	Occasional but often superficial.

0-1	Non-existent to	Non-existent to	Negative (e.g., may	Does not appear to
	very low. Only	very low.	derail discussion or	have engaged with
	when called		activities through	the material or
	upon.		unrelated comments,	prepared for class.
			not supportive of	
			others, unaware of	
			effect on others).	

Reflection Papers (50%); Assignment modified from Michael Grand's journal assignment from earlier versions of this course

Students are asked to write reflections on the material covered in the course. The readings and other course materials will inspire your reflections and you need to demonstrate that you have engaged with the material. However, do not simply describe the material of the course. This form of evaluation is being used to give you free rein to explore, on both a professional and a personal level, the readings and discussions throughout the semester. Possible issues for consideration include but are not limited to the following: factors that influence the course of therapy; goals of therapy; the art and science of therapy; the politics of therapy; ethical concerns; therapeutic models and personal style; your professional areas of strength and areas of discomfort and/or weakness; personal beliefs and blind spots as they relate to delivery of psychotherapy; and possible integration across schools of therapy.

You may use the first person. You do not have to follow APA format. This exercise is not intended to be a series of tightly knit essays but an exploration of your informed views and perspectives on the course content. You can submit up to 6 reflections. The five highest grades will contribute towards the overall grade on this evaluative component and the lowest grade will be dropped. The reflections are to be submitted by 11:59 pm via drop box on Courselink for the following dates: September 22, October 6, October 20, November 3, November 17, and December 1. Each reflection should be no longer than 2 pages single-spaced, or 4 pages double-spaced (font size 12, Times New Roman 0.5-inch margins).

Reflection Rubric (0 to 10; 5 reflections each worth 10% of your final grade)

	Depth of reflection on theories, concepts, strategies presented in course/materials	Incorporation of own voice / perspective / interpretation	Illustration via examples	Implications for own clinical practice
10	Outstanding and complex	Clear and compelling throughout	Clear, detailed, well-chosen	Thoroughly yet succinctly detailed
8-9	Very good to excellent	Generally clear and compelling	Consistent and relevant	Clear and frequent

6-7	Adequate to good	Present at a basic	Occasional and	Occasional and/or
		level	relevant	unclear
3-5	Superficial	Minimal,	Not provided or	Minimal,
		superficial	irrelevant	superficial
1-2	No reflection	Unclear and/or	Not provided	No implications
	present	not present (i.e.,		given
		recitation of facts)		
0	No reflection			
	paper submitted			

Presentation with an active component (20%)

Students are expected to prepare a brief presentation and an engaging class activity on a psychotherapy technique or skill. The presentation and activity should address the technique/skill from start to finish (i.e., how it would be introduced to the client through to debriefing or knowledge check following the technique or skill). The purpose of this assignment is to expand your knowledge about and practice your delivery of therapeutic techniques and skills. You will rate your top 3 choices in the first 2 weeks of class; I will use these ratings to provide the final assigned topics. The topics include various therapeutic techniques that will not otherwise be explicitly practiced in class but are tied to class topics and therefore have constraints on the dates available. I have tried to steer away from techniques that you have likely demonstrated in previous classes; please do not choose a technique that you have been assigned in a previous class. There is a list given below but it is not exhaustive.

Skill or Technique	Eligible Dates
Homework assignment and non-compliance	Your choice
Dialectics	DBT: Sept 30, Oct 7
Validation (self and/or others)	DBT: Sept 30, Oct 7
Parent training: explaining antecedent,	Health psych: Nov 4, 11, 29
behaviour, consequences and application of	
differential attention	
Parent training: behavioural reward system	Health psych: Nov 4, 11, 29
Problem solving	Health psych: Nov 4, 11, 29
SMART goals	Health psych: Nov 4, 11, 29
Assertive communication	Health psych: Nov 4, 11, 29
Creative hopelessness	ACT: Nov 18, 25
Values	ACT: Nov 18, 25
Cognitive defusion	ACT: Nov 18, 25

This assignment is to be completed individually. The first portion will be didactic followed by a practical/applied component (e.g., role play); the entire length should be no longer than 30 minutes.

- Didactic Presentation and Accompanying Resource: The presentation should provide a brief introduction to the skill or technique including situating the topic within the relevant theoretical orientation(s). Developmental and diversity considerations should be clearly outlined (e.g., is there a developmental cut off? what kinds of modifications might be needed depending on the population?). The presentation should provide relevant details that would facilitate our understanding (e.g., the who, what, when, where, why, how of the skill or technique); it may help you to think about what YOU would want to know before deciding whether or not to use a given technique or teach a particular skill. This didactic portion should be a maximum of 10 minutes in length, and can include visual aids such as a PowerPoint presentation.
 - You will create a user friendly "cheat sheet" or resource for the class on your topic, including the major points from your presentation and a list of a few key resources, tips, and tricks. The format of this resource is up to you (e.g., copy of your slides, handout) but it should be brief. This resource is due by 11:59 pm the day before your presentation and is to be submitted via dropbox on Courselink.
- Applied Component: The second portion of the presentation will include an
 active/applied component that will "bring the topic to life". The activity chosen for this
 portion of the assignment will vary depending on each topic but should be chosen
 carefully to facilitate further understanding. It can include various activities such as
 individual demonstrations, paired role plays, case studies completed collaboratively
 with classmates, etc. The applied component should be engaging, relevant, and
 informative for the class and be 15 to 20 minutes in length.

Presentation Rubric (out of 63 points worth 20% of your final grade)

Category	Scoring Criteria	Out of
Content	Clear, succinct, accurate overview of technique or skill,	15
	providing the basic information one would need to	
	understand what the technique involves and how to	
	complete it	
	Technique clearly and accurately situated in the context of	2
	the relevant theoretical orientation(s)	
	Developmental and diversity considerations outlined	5
Handout	Handout is well organized, interpretable by the audience,	5
	succinct, and consistent with didactic presentation.	
	Handout provides a list of key resources	1
Activity	Activity is relevant and well designed to teach the	15
	technique or skill to the audience (appropriate level,	
	enhances understanding)	
Delivery	Presentation and activity are well organized and both are	5
	independently delivered within respective time limits	
	Student is an active (vs. passive) facilitator of the activity,	5
	problem-solving and adapting as needed	

	Delivery is engaging (good eye contact, pacing, volume, etc.)	5
Overall	Technique or skill has been described/demonstrated from	5
comprehensiveness	start to finish (via the didactics and/or activity)	

Course Resources

Required Texts:

There are no required texts for this course. Please see the schedule above for the readings. Most of the early readings are journal articles which are available through the library or will be provided to you. The chapters from three therapy-focused books will be provided to you in a manner to be determined.

The readings are to be completed prior to class so that you will derive maximum benefit and can meaningfully contribute to class discussion and activities. Please also note that the Reflection Papers will be, in part, inspired by the readings.

Recommended Texts:

You may wish to purchase the three therapy books (DBT, ACT, EFFT) but this is not required.

Course Policies

Grading Policies

This course follows the University-wide grading interpretation as outlined in the <u>Graduate</u> <u>Grade interpretation</u> and in the table below:

Percentage Grade	Letter Grade	Description	
90-100	A+	Outstanding. The student demonstrated a mastery of the course material at a level of performance exceeding that of most scholarship students and warranting consideration for a graduation award.	
80-89	A- to A	Very Good to Excellent. The student demonstrated a very good understanding of the material at a level of performance warranting scholarship consideration.	
70-79	В	Acceptable to Good. The student demonstrated an adequate to good understanding of the course material at a level of performance sufficient to complete the program of study.	
65-69	С	Minimally Acceptable. The student demonstrated an understanding of the material sufficient to pass the course but at a level of performance lower than expected from continuing graduate students.	

Percentage Grade	Letter Grade	Description
0-64	F	An inadequate performance.

Explicit marking guides have been provided elsewhere in the syllabus.

Assignment or Test	Due Date	Manner of Submission	Late Penalty
Reflection papers	Throughout semester by 11:59 pm on the day specified: - Sept 22 - Oct 6 - Oct 20 - Nov 3 - Nov 17 - Dec 1	Courselink dropbox Submit up to 6 and the top 5 will be chosen. Each reflection is worth 10%.	3 points immediately. 3 additional points taken off for each day of lateness.
Presentation of a psychotherapy technique or skill	Resource is due the Sunday before your assigned class by 11:59 pm	Courselink dropbox	Resource: 3 points immediately. 3 additional points taken off for each day of lateness.
	Presentation in assigned class (by 2:30 pm start time)	In class	Unless arrangements can be made, no presentation on the assigned date means a 0 on the assignment.

Please note that these policies are binding unless academic consideration is given to an individual student.

Course Policy regarding use of electronic devices and recording of lectures:

Electronic recording of classes is expressly forbidden without consent of the instructor. When recordings are permitted they are solely for the use of the authorized student and may not be reproduced, or transmitted to others, without the express written consent of the instructor.

University Policies

Academic Consideration

When you find yourself unable to meet an in-course requirement because of illness or compassionate reasons, please advise the course instructor in writing, with your name, id#, and e-mail contact. See the academic calendar for information on regulations and procedures for

Academic Consideration:
Grounds for Academic Consideration

Academic Misconduct

The University of Guelph is committed to upholding the highest standards of academic integrity and it is the responsibility of all members of the University community, faculty, staff, and students to be aware of what constitutes academic misconduct and to do as much as possible to prevent academic offences from occurring.

University of Guelph students have the responsibility of abiding by the University's policy on academic misconduct regardless of their location of study; faculty, staff and students have the responsibility of supporting an environment that discourages misconduct. Students need to remain aware that instructors have access to and the right to use electronic and other means of detection. Please note: Whether or not a student intended to commit academic misconduct is not relevant for a finding of guilt. Hurried or careless submission of assignments does not excuse students from responsibility for verifying the academic integrity of their work before submitting it. Students who are in any doubt as to whether an action on their part could be construed as an academic offence should consult with a faculty member or faculty advisor.

The Academic Misconduct Policy is detailed in the <u>Graduate Calendar</u>:

Accessibility

The University of Guelph is committed to creating a barrier-free environment. Providing services for students is a shared responsibility among students, faculty and administrators. This relationship is based on respect of individual rights, the dignity of the individual and the University community's shared commitment to an open and supportive learning environment. Students requiring service or accommodation, whether due to an identified, ongoing disability or a short-term disability should contact <u>Student Accessibility Services</u> as soon as possible.

For more information, contact SAS at 519-824-4120 ext. 54335 or email accessibility@uoguelph.ca or the Student Accessibility Services Website

Course Evaluation Information

Please refer to the Course and Instructor Evaluation Website.

Drop date

The last date to drop one-semester courses, without academic penalty, is November 29, 2019. For regulations and procedures for Dropping Courses, see the <u>Current Graduate Calendar</u>