

Family Therapy--Theory and Practice Syllabus

PC 304
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Course Description

This course provides procedural, theoretical and theological foundations for the practice of family therapy. In this course, students will explore the nature and development of family therapy, its impact on understanding human motivation and relationship systems, and explore its application in clinical practice. This will include a focus on family organization, family subsystems, and trans generational processes as these apply to assessment, case conceptualization, treatment and theological understandings of family therapy. Through exploring contemporary family therapy approaches, students will have the opportunity to experience a variety of intervention methods and begin the process of formulating a theologically and personally integrated model of family therapy.

Student Learning Outcomes

1. Demonstrate an understanding of the nature and development of family therapy theory. (SLO 1a, 1b, 2, 3, &4)
2. Demonstrate an understanding of the purpose and limitation of psychotherapeutic theory as it applies to producing change in human systems. (SLO 1a, 1b)
3. Understand the interaction of class, race, gender, and cultural experience on theory development and intervention procedures. (SLO 1, 3)
4. Articulate a broad understanding of family assessment, including interview, genogram and formal tools of evaluation. (SLO 3)
5. Discuss a cross-section of historical and contemporary methods of family therapy. (SLO 3)
6. Demonstrate a beginning understanding of the basic processes of counseling from intake to termination of therapy. (SLO 1, 3)
7. Demonstrate a beginning ability to write an intake assessment and plan a course of treatment for a family. (SLO 1)
8. Demonstrate the ability to use systemic categories to conceptualize family organization, family subsystems and trans generational processes in a therapeutic context. (SLO 1)
9. Demonstrate an understanding of narrative and brief solution-focused therapy in class discussions and case demonstrations. (SLO 1)
10. Articulate a statement of how faith, spirituality and theology can be integrated into a personal philosophy and clinical practice of family therapy, and describe/discuss your personal philosophy in at least one clinical case. (SLO 4)

Th.M. and D.Min. Additional Objectives:

1. Th.M. and D.Min. students are expected to complete all of the above objectives at an advanced, rather than beginning level;
2. Th.M. and D.Min. students will demonstrate more complete behavioral scientific and theological analysis in their class assignments;
3. Th.M. and D.Min. students will demonstrate advanced levels of theological and pastoral reflection and relate this work to their current ministry location.

Course Method

The course methodology will include discussion, media resources, role play, weekly quizzes, and case study demonstrations in a movement toward the integration of theory, theology, and clinical practice.

Course Requirements

- Complete required reading, participate in class discussions and lead presentations.(10 points)
 - A. Purpose and objectives of assignment**

By completing this assignment, students will:

 1. Become oriented to the basic literature of family therapy.
 2. Demonstrate that they have completed assigned reading and have organized their thoughts about the reading into a coherent summary;
 3. Become competent in discussing basic theoretical and practical issues in the practice of family therapy.
 - B. Tasks**

Each week, students will complete required reading and participate in class discussion.
 - C. Evaluation**

Students will demonstrate completion of reading assignments by participating in class conversations. Students will document completion of reading assignments each week.
- Reflection Assignments. (20 points)
 - A. Purpose and objectives for this assignment**

By completing this assignment, students will

 1. Engage in conscious, reflective thought with colleagues about spiritual, cultural, religious, and theological issues related to the reading assignment;
 2. Begin to develop personally and theologically integrated stands related to family therapy and clinical practice.
 3. Learn to conceptualize theological reflections on clinical/theoretical material that demonstrates depth of thinking about these matters.
 - B. Tasks**

Each student will prepare for and participate in a reflection group of 3-5

colleagues. This group will meet, discuss, and describe a theological understanding of “family.” What is family? Why? What are your sources of authority for conceptualizing the family? How is family to be understood in the light of scripture, church history, and contemporary theology? What issues are at stake? How does a theological understanding intersect with contemporary American life? With your practice as clinicians? Be sure to include some consideration of the intersection of race, class, and cultural as a part of this discussion.

At the time of presentation/class discussion the paper must be presented to the professor with all names on the cover sheet. The paper should not exceed six double spaced pages and will be presented in class as a group project. (Turabian or APA format).

Papers due September 26. Class discussion leadership for the assignment will be scheduled by the professor.

Th.M. students are expected to consult with the professor for instructions.

- Critical Book Review due at beginning of class (20 points) **October 24.**

A. Purpose and objectives for this assignment

By completing this assignment, students will

1. Gain a firm beginning understanding of one model of family therapy and how it is applied clinically;
2. Begin to think critically about family therapy theory.

B. Tasks

Step One: In dialog with your professor, select a book with a therapeutic focus. Books are on reserve in the library, and are listed in the syllabus.

Step Two: Write a critical review of the book (page length: No more than 3 double-spaced pages.)

Your critical review should include the following:

2. A brief summary of the author’s reason for writing the book. (thesis)
3. A depth description of the model of therapy the author is proposing. Please note that you should not try to rewrite the book in this paper. Instead, distill the model in a form that *you* understand and in which *you* emphasize what is important and de-emphasize what is not important.
4. A critical assessment of the book and theory. Be sure to address what *you* consider the strengths and weaknesses of the theory and how the author(s) use of the material. Point out where the author(s) themselves suggests that this theory or approach has limitations and strengths.
5. The final section of your critical review should be your

theological/spiritual/ethical analysis in the light of the theory.

Th.M students are expected to collaborate with the professor concerning the assignment.

- Clinical Case Study due at the beginning of class **December 5** (20 points)
 - A. Purpose and objectives for this assignment**

By completing this assignment, students will

 1. Gain a firm beginning understanding of one model of family therapy and how it is applied clinically;
 2. Gain the ability to articulate their critical thought processes about family therapy in written professional documents;
 3. Begin to apply family therapy theoretical concepts to clinical case contexts;
 4. Form a beginning ability to reason clinically about case material, informed by one theory;
 5. Gain experience organizing clinical reasoning from one theoretical foundation into basic clinical documents that demonstrate a recursive, inferential connection between theory, observation, assessment, treatment planning, clinical procedures, and evaluation.
 - B. Tasks**
 1. Identify the family to be assessed as assigned by the professor.
 2. Follow directions in “Case Study Integration Guide”
 3. Write a pastoral/theological evaluation of the case that demonstrates your reflective thinking about the client, the problem and the process of helping.

Th.M students consult with the professor prior to due date regarding the assignment.

- Final examination (30 points) Finals week.
 - A. Purpose and objectives for this assignment**

By preparing for the final examination and taking the final examination, students will

 1. Demonstrate their mastery of the primary body of knowledge presented during the semester and how this knowledge applies to clinical contexts;
 2. To gain experience preparing for professional body of knowledge and competency evaluations.
 - B. Tasks**
 1. Students will prepare for a computerized final examination by using the practice CD distributed during class and other materials necessary to prepare for a comprehensive final examination.
 2. Students will take the final examination during the week of finals on computer in the library computer lab. This is a closed book final.

Required Texts

- Boyd-Franklin, N. *Reaching Out in Family Therapy: Home-based, School, and Community Interventions*.
- Nichols, M. and R. Schwartz, eds. *Family Therapy: Concept and Method*, 9th. Ed.
- Stone, H. *Strategies for Brief Pastoral Counseling*
- Walsh, F., ed. *Spiritual Resources in Family Therapy*

Library Reserve

- Journal of Marital and Family Therapy* Volume, 35, Number 1,2,3,4; Volume 36, Number 1, 2, 3, 4; Volume 37, Numbers 1, 2, 3.
- Boyd-Franklin, N. *Reaching Out in Family Therapy: Home-based, School, and Community Interventions*.
- Nichols, M. and R. Schwartz, eds. *Family Therapy: Concept and Method*, 9th. Ed.
- Stone, H. *Strategies for Brief Pastoral Counseling*
- Walsh, F., ed. *Spiritual Resources in Family Therapy*

Suggested book review titles (on library reserve)

- De Shazer, Dolan, et.al., Editors. (2007) *More than Miracles: The State of the Art of Solution Focused Brief Therapy*. Haworth.
- Freeman, David, Epston & Lobouits.(1997) *Playful Approaches to Serious Problems. Narrative Therapy with Children and Their Families*. W. W, Norton & Company.
- Freedman, Jill & Gene Combs, Editors. (1996) *Narrative Therapy: A Social Construction of Preferred Realities*. W.W. Norton & Company.
- Hoyt. *Interviews with brief therapy resources*. (2001). Brunner-Routledge.
- Monk, Winslade, et, al. Editors.(1997) *Narrative Therapy in Practice. The Archaeology of Hope*. Josey-Boss.
- Nelson, Thomas. (2007) *Handbook of Solution Focused Brief Therapy*. Haworth.
- Neuger, C. *Counseling Women: A Narrative Approach*
- White, David & D. Epston. (1990) *Narrative means to therapeutic ends*. Norton.
- White, Michael. (2007). *Maps of Narrative Practice*. W.W. Norton & Company.
- Wimberly, Edward P., *Pastoral Counseling and Spiritual Values*

Bibliography References

- Olsen, D. *Integrative Family Therapy*.
- McGoldrick , M. and Gerson, R. *Genograms in Family Assessment*.
- Graham, L. *Care of Persons, Care of Worlds*.
- L'Abate, L. *Family Assessment: A Psychological Approach*.
- Carter, E. and M. McGoldrick, eds. *The Changing Family Life Cycle*, 2nd ed.
- Gurman, A. and D. Kniskern. *Handbook of Family Therapy*, Vol. 1 and 2.
- Aponte, H. *Bread and Spirit: Therapy with the New Poor*.
- Sprenkle, D. and C. Bailey, eds. *Family Therapy Effectiveness*.
- Walters, M., Carter, B., Papp, P., & Silverstein, O. *The Invisible Web*.
- _____ *Reaching Out in Family Counseling*
- Boyd-Franklin, Nancy, *Black Families in Therapy* . . .
- Payne, Martin. *Narrative Therapy: An Introduction for Counselors*

Grading

A	90-100
B	80-89
C	70-79
D	60-69
F	< 60

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Grading Rubric

	100-90	89-80	79-70	69-71
Depth of Thought & Analysis 20 points	Thesis is clear. Succinct, critical conclusions are laid out based upon logical review. Evaluates, defines and understands sources.	Thesis is clear with some lapses in development of ideas. A degree of analysis, yet not thought through carefully or supported.	Thesis is unclear. Not much evidence of depth thought or analysis. Show lapses in understanding. Show non critical observations.	No thesis on central idea. Random organization. Lack of logical development. Topics may not relate to central idea.
Organization, Content, Synthesis & Congruency 20 points	Logical structure appropriate for the paper. Flow from general ideas to specifics and from section to section.	Logical progression of ideas. Some faulty links. Content relates to central idea but, not covered in much depth.	No logical flow. Subtopics appear random and overly general. Section/ structure may lack coherence.	No logical organization. Content may not relate to assignment. Lacks transition coherence.
Thoroughness of Support 20 points	Appropriate content is covered in depth. Effective, sufficient evidence to convince ones understanding of the subject.	Interprets evidence and explains connection between evidence and main idea.	Major section omitted, ignored, or unduly repeated. Uses generalization and assumes evidence speaks for itself. Lapses in logic are often.	Irrelevant details that lack evidence or support. Summary or report rather than analysis. May be unduly brief.
Personalization 20 points	Integrates own experience with content.	Some connection of own experience to content.	No connection of own experience to content.	No personal experience relevant to assignment.
Clarity of Writing & Mechanics 20 points	Crisp, clear writing. Minimal mechanical errors. Appropriate specificity.	Include some errors that do not impede readers understanding.	Writing is unclear. Several mechanical errors.	Writing is unclear. Many mechanical errors. Readers understanding impeded.

CASE STUDY INTEGRATION GUIDE

Format: Limit case study write up to five (5) page summary. (Three (3) pages to address research/focus of case and two (2) pages to address your research interest). Use 12 point font with 1.5 line spacing. Include your bibliography. Protect confidentiality!

I. Identifying Information

Describe the unit of treatment. Include contextual information that include, gender, class, ethnic, religious, vocational, spiritual, historical, cultural concerns.

II. Presenting Problem

Describe the reason(s) for presenting in counseling,

III. Relevant History

Summarize relevant history that contribute to the formal assessment and conceptualization of the problem.

IV. Pastoral Assessment and Conceptualization

- A. Describe your working pastoral assessment and guiding rationale for the presenting problem.
- B. Include relevant systemic information regarding the family emotional process, and etc.
- C. Provide your clinical summary.

V. DSM Pastoral Diagnosis

- A. Presenting problem
- B. AXIS I- AXIS X
Provide your theoretical and theological rational for diagnosis and treatment. (support your argument)

VI. Summary of Treatment to Date

- A. Treatment plan.
- B. Therapeutic contract.
- C. Treatment strategy to date.
- D. Evaluation of treatment strategy.

VII. Theological reflection

- A. Cultural factors.
- B. Cultural & personal sources of interpretation.
- C. Theoretical ethical considerations.
- D. Theoretical/theological ethical commitments that guide your selection of treatment.

VIII. Countertransference

- A. Tension/countertransference that may bear upon the consideration of the clinical case.
- B. Countertransference(s) that assists you in your understanding of the self development of the clinician.

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 further assistance, http://www.lpts.edu/Academic_Resources/ASC/avoidinggenderbiasinlanguage.asp.

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. Multiple occurrences of plagiarism may result in dismissal from the Seminary. Students unfamiliar with issues relating to academic honesty can find help from the staff in the Academic Support Center. For the Seminary policy, see The Code of Student Conduct, 6.11; the Student Handbook, p. 19.

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 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 papers should follow the Seminary standard, which is based on these guides:

Kate Turabian, *A Manual for Writers of Term Papers, Theses, and Dissertations*, 7th ed. Chicago: University of Chicago Press, 2007.

The Chicago Manual of Style, 15th ed. Chicago, IL: University of Chicago Press, 2003.

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.

