



Course Name, Number and Section: MSC 617 – Advanced Techniques in Counseling

Academic Term: Spring 2024

Number of Credit Hours Earned: 3 credit hour

Course Day(s) and Time(s): Saturday & Sunday, March 16th and 17th

Course Location: Online Via Moodle

Instructor Name: Dr. Susan Stuntzner PhD, LPC, LMHC, ACS, LCPC, CRC, NCC, BC-THM, CGP

Instructor Contact Information: susan.stuntzner@uprovidence.edu

Instructor Office Location & Office Hours: By appointment

I. Course Description

- A. Catalog Description - MSC 617 focuses on advanced theories and techniques in the process of counseling. Emphasis is placed on learning and applying specific techniques of counseling to the therapeutic process. This course will focus on the theoretical foundations and techniques required to address a wide variety of mental health issues.
- B. Instructor's Elaboration - This course will be taught as a graduate seminar, with lecture and group discussion, small group exercises, role-play, presentations, and experiential exercises. It is expected that students will have read all readings and be prepared to engage in a discussion regarding major points and application of the readings. Students are expected to be respectful of others' opinions, share perspectives, and engage in role playing, critical thinking, and ethical practices.

II. Prerequisites to this Course and/or Requirements this Course Fulfills

- 1. This is a required course for MSC students and has co-requisites MSC 500, MSC 512, and MSC 517. Students must earn a B or better to proceed to the next semester of coursework.

III. Required and/or Recommended Texts and Course Materials

- 1. Conte, Christian (2009) Advanced Techniques for Counseling and Psychotherapy, Springer Publishing, ISBN# 978-0-8261-0451-9
- 2. Erford, Bradley (2015). 40 Techniques every counselor should know, 2nd Ed., Hoboken, NJ: Pearson Education, Inc.

RECOMMENDED TEXTS

3. American Psychological Association (2009). Publication manual of the American Psychological Association, Sixth Edition, 2nd printing, published by the American Psychological Association. ISBN: 978-1-433-80561-5

IV. Course Requirements

A. Professional Dispositions

Students will be evaluated on their ability to demonstrate and progress in the following professional dispositions in this course and throughout the program:

- **Mindfulness.** Active, open attention on the present; observing one's thoughts and feelings without judgment
- **Engagement.** Involvement and commitment to one's own and other's personal and professional development
- **Reflexivity.** An awareness and exploration of one's own belief systems and values, and their impact on relationships with self and others
- **Curiosity.** Eagerness to know, discover, and generate; interest leading to inquiry
- **Integrity.** Consistent commitment to professional ethics and values of the counseling profession; holding steadfastly true to one's commitments
- **Empathy.** The action of understanding, being aware of, being sensitive to, and vicariously experiencing the feelings and thoughts of another
- **Professionalism.** Maintaining conduct and qualities that characterize a counseling professional.

All students will be expected to model these dispositions during class meetings.

B. Assignments

1. CLASS Participation – Block and Scheduled Roleplays (20%)

Each student is required to attend the live, online class block meetings and scheduled role plays. In order to get full credit, students must meaningfully contribute to discussion in class. The online, block class meetings will be conducted in a seminar style with role plays and presentations. Class format is designed to help the student become familiar with, understand, and practice the application of advanced theories and techniques of counseling including the indications and contraindications of psychopharmacological

medications. This part of the course will include material from both required texts and may also include additional resources from the counseling literature.

Students will be prepared for the block class by completing course readings and required assignments. Students who miss classes due to participation in a university sanctioned event are required to make up any work or assignments they have missed in an equitable manner determined by the instructor and should not have their grade affected by the absence itself. It is important to inform the professor in advance about such an event. In isolated cases involving family or medical emergencies, students are encouraged to speak with the instructor. The instructor may require documentation of family or medical emergencies.

Students will actively participate in role plays and provide/receive constructive feedback and evaluation periodically throughout the semester. The schedule for student roleplays is provided in the Course Schedule section of the syllabus. Students will be divided into groups of three and will rotate through counselor, client, and observer roles. Each role play will last 20 minutes (not including feedback/processing). Students will access Collaborate in Moodle for role-plays. Student groups will independently establish their role play schedule during the week it is assigned. Students will share or discuss their role play experience in Moodle. **Unlike the weekly Moodle Discussion Forum, your role play discussion will be due Sunday of the week of the role play, and responses to other students' postings are not required.**

2. MOODLE Discussion Participation (30%)

Students are encouraged to be active on the Collaboration/Discussion forum to learn from each other. Moodle participation is designed to help students become familiar with the various theories and techniques of counseling and to develop a personal approach to counseling. Focus will be on assigned readings from the two required texts. The instructor may require additional reading and responses to current academic articles relevant to the treatment of mental health issues.

Please sign-in to the course every other day (at a MINIMUM). **Please be sure to read, contemplate, and respond to the postings provided by other students because reading, thinking and discussing what other students have to say will deepen your learning of the material.** If the professor of the course poses a question, you are expected to respond. Your initial posting must be completed by the date that is provided on Moodle of any given week. **Your posting should reflect your own thoughts, ideas, and assertions and should not simply be supportive of other posts.** Support is a very important part of your postings, but you must factually argue why you are supportive based on material that is pertinent to the course. Points are mostly based on your ability to assert your ideas with supporting rationale, including factual information and your own personal

reactions. As with all writing in the course, adhere to APA style. **Initial posts are due Thursday by 11:55PM. A response to another's post is due by Sunday at noon and is an expected part of course discussion for full points.**

3. Oral Presentation (20%)

Each student will give a **10 to 15-minute** oral presentation during the online/in-person block that articulates and demonstrates a specific theory-based counseling intervention or interventions for a specific population or issue. **The student will also provide a 5-minute video-recorded role play that demonstrates the technique or intervention.** The presentation will be linked to the student's academic paper but will use interactive and experiential activities and examples as opposed to a strictly research-based work. The presentation will be a summary of the theory and practice paper that you will write for this course. **Due during the Block by March 16th prior to the block starting.**

Your evaluation will be based on the described aspects below:

- (a) **Power Point Presentation.** Prepare a power-point presentation to be used during the block class. Remember, power-point slides are meant to be "bullet points." Do not simply read off the slides.
- (b) **Role play Demonstration.** Students will demonstrate the application of the technique(s) through a video-recorded role play. Role plays should clearly reflect the appropriate use of your technique with a well-defined population (you may consider children, youth, adults, or families, etc.) to achieve a clearly stated treatment objective.
- (c) **Quality of Information** You should judiciously choose the material you present so that someone who is not a member of the course would clearly understand your theory-based counseling approach/technique. The content should clearly demonstrate that you understand the helping relationship and that you are able to weigh and apply the empirical research evidence relevant to your theory and intervention.
- (d) **Attention to Additional Counseling Concerns** You should demonstrate an awareness of how heritage/cultural issues, variations in client abilities, family dynamics, and the developmental status of your client may impact the application and/or effectiveness of your technique/intervention.
- (e) **Presentation Skills.** You should strive to effectively address the questions described below and in the rubric:
 1. Does your presentation make sense?
 2. Are there smooth transitions from one idea to another?
 3. Have you introduced your topic at the start of your talk and given your audience a summative conclusion?

4. Does your PowerPoint presentation integrate effectively with and set the stage for your role play demonstration? Does the role play part of the presentation clearly and effectively demonstrate the use of the technique/intervention?

Your evaluation will be based on the provided rubric below.

**Rubric–PRESENTATION Theory-Based Counseling Intervention
For a Specific Population**

Criteria	1 Emerging	2 Progressing	3 Proficient	4 Exemplary
<p>SOURCES / QUALITY of Information</p> <p>APPLICATION OF THERORETICAL MODEL Understanding of theories and models of counseling. (S2.F.5.a)</p> <p>20%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Information to present theory-based counsel. approach for clients. (Adlerian play therapy, CBT play therapy, sand tray, psychodrama...)</p>	<p>Integrated concepts from at least 1 cited peer reviewed source to support this section.</p> <p>Addressed 1 of the issues below but not precisely and clear: -Information to present theory-based counsel. approach for clients. (Adlerian play therapy, CBT play therapy, sand tray, psychodrama...)</p>	<p>Integrated concepts from at least 2 cited peer reviewed sources to support this section.</p> <p>Addressed 1 of the issues below in a precise & clear manner: -Information to present theory-based counsel. approach for clients. (Adlerian play therapy, CBT play therapy, sand tray, psychodrama...)</p>	<p>Integrated concepts from at least 2 cited peer reviewed journals to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed 1 of the issues below in an exemplary manner: -Information to present theory-based counsel. approach for clients. (Adlerian play therapy, CBT play therapy, sand tray, psychodrama...)</p>
<p>Demonstration of an INTERVENTION TECHNIQUE</p> <p>10%</p>	<p>Did not explain a theory-based technique or intervention for those with mental health concerns</p>	<p>Presented a technique/intervention but not clearly or fully.</p>	<p>Technique/intervention presented full and clearly.</p>	<p>Technique/intervention presented in an exemplary manner.</p>
<p>SOURCES / QUALITY of Information</p> <p>The impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others (S2.F.2.d)</p> <p>20%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Causes of people's problems in the U.S. related to their heritage and culture. -Describe knowledge, skills and awareness of cultural competences when working with those individuals.</p>	<p>Integrated concepts from at least 1 cited sources to support this section.</p> <p>Addressed one of the issues below but not in a precise & clear manner: -Causes of people's problems in the U.S. related to their heritage and culture. -Describe knowledge, skills and awareness of cultural competences when working with those individuals.</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed all of the issues below in a precise & clear manner: -Causes of people's problems in the U.S. related to their heritage and culture. -Describe knowledge, skills and awareness of cultural competences when working with those individuals.</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed all of the issues below in an exemplary manner: -Causes of people's problems in the U.S. related to their heritage and culture. -Describe knowledge, skills and awareness of cultural competences when working with those individuals.</p>
<p>SOURCES / QUALITY of Information</p> <p>15%</p> <p>Effects of crisis, disasters, and trauma on diverse individuals across the lifespan (S2.F.3.g) (5.C.2.f)</p> <p>20%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Interventions for child maltreatment, grief, depression, & effects of crisis, disasters, trauma (divorce, substance-</p>	<p>Integrated concepts from at least 1 cited sources to support this section.</p> <p>Addressed 1 of the issues below but not in a precise & clear manner: -Interventions for child maltreatment, grief, depression, & effects of crisis, disasters, trauma</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed 3 of the issues below in a precise & clear manner: -Interventions for child maltreatment, grief, depression, & effects of crisis, disasters, trauma</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed 3 of the issues below in an exemplary manner: -Interventions for child maltreatment, grief, depression, & effects of crisis, disasters, trauma</p>

	abusing parent, violent tendencies of children..)	(divorce, substance-abusing parent, violent tendencies of children..)	(divorce, substance-abusing parent, violent tendencies of children..)	(divorce, substance-abusing parent, violent tendencies of children..)
SOURCES / QUALITY of Information Ethical and culturally relevant strategies for promoting resilience & optimum development & wellness (S2.F.3.i) 10%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 1 cited sources to support this section. Addressed 1 of the issues below but not in a precise & clear manner: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 2 cited sources to support this section. Addressed 3 of the issues below in a precise & clear manner: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed 3 of the issues below in an exemplary manner: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.
POWER POINT presentation SLIDES 10%	Insufficiently outlines: Slides and handouts had spelling, grammatical or punctuation errors. Font size and design was not professional & accurate.	Sufficiently outlines: Slides had almost no spelling, grammatical or punctuation errors. Font size & design was part. professional & accurate.	Successfully outlines: Slides were without grammatical spelling or punctuation errors. Font size and design was professional & accurate.	Successfully outlines: Slides were without grammatical spelling or punctuation errors. Font size and design was professional & accurate.
PRESENTATION Skills 10%	Insufficient time management (<12 min). Inappropriate time for each part of the presentation. Lacked in 3 or > areas: Presented with professional dress, effective voice volume, voice pace, language skills, eye-contact, free speech/own words, body language & enthusiasm.	Sufficient time management (>18 min). Appropriate time for most parts of the presentation. Lacked in 1 to 2 areas: Presented with professional dress, effective voice volume, voice pace, language skills, eye-contact, free speech/own words, body language & enthusiasm.	Proficient time management (15 min). Appropriate time for each part of the presentation. Fulfilled all areas: Presented with professional dress, effective voice volume, voice pace, language skills, eye-contact, free speech/own words, body language & enthusiasm.	Excellent time management (15 min). Appropriate time for each part of the presentation. Excellent in all areas: Presented with professional dress, effective voice volume, voice pace, language skills, eye-contact, free speech/own words, body language & enthusiasm.

4. Theory and Practice Paper (30%)

Each student will write an academic, 5–7-page paper (excluding title and reference pages) that describes one or more specific theory-based counseling techniques/interventions for a specific population with mental health concerns. Remember that the focus is on a technique or intervention, not a theoretical model. For instance, you may explain interventions such as confrontation, modeling, cognitive restructuring, etc. This paper will address the application of the technique/intervention, the evidence supporting the use of the technique/intervention and a discussion of how the technique/intervention may or may not be effective for those with issues related to heritage, culture, family structure, disability, and or trauma.

Each academic paper must be based upon at least 5 research articles from peer-reviewed journals and professional books in the fields of counseling and/or psychology (this includes the textbook). The paper must be written according to the APA style manual. The paper must be a minimum of 5 pages long (excluding the title page, abstract, reference page(s) and any figures or tables).

The expected structure and grading rubric for the paper is in the rubric below. Failure to turn in the paper will result in a failing grade for the course.

**Rubric – Paper Theory-Based Counseling Approach for Children or Other Specific Populations
(300points)**

Criteria	1 Emerging	2 Progressing	3 Proficient	4 Exemplary
SOURCES/ QUALITY of Information 10%	Used no academic peer-reviewed articles/professional books but some Internet links to provide information.	Used one/two academic peer-reviewed articles/professional books but also Internet links to provide and partially support inform.	Used three/four academic peer-reviewed articles/professional books but also Internet links to provide and support information.	Used eight or more academic peer-reviewed articles/professional books to provide and support accurate information.
FORMULATION of Counseling CHILDREN (if relevant) The impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others (S2.F.2.d) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Causes of people's problems in the U.S. related to their heritage and culture. -Knowledge, skills and awareness of cultural competences when working with those individuals.	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear: -Causes of people's problems in the U.S. related to their heritage and culture. -Describe knowledge, skills and awareness of cultural competences when working with those individuals.	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear: -Causes of people's problems in the U.S. related to their heritage and culture. -Knowledge, skills and awareness of cultural competences when working with those individuals.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed all of the issues below in a precise & clear manner: -Causes of people's problems in the U.S. related to their heritage and culture. -Knowledge, skills and awareness of cultural competences when working with those individuals.
The multiple profess. roles & functions of counselors and their relationships with integrated behavioral health care systems & consultation (S2.F.1.b) (5.C.3.d) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Defining ethical, professional, and legal issues in counseling people and discussing principles and ethics.	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear: -Defining ethical, professional, and legal issues in counseling people and discussing principles and ethics.	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear: -Defining ethical, professional, and legal issues in counseling people and discussing principles and ethics.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed all of the issues below in a precise & clear manner: -Defining ethical, professional, and legal issues in counseling people and discussing principles and ethics.
Counselors' roles and responsibilities as members of interdisciplinary and emergency response teams (S2.F.1.c) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Explaining competence, consent, confidentiality, privileged communication, child abuse reporting & applying an ethical decision making-model when counseling people	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear: -Explaining competence, consent, confidentiality, privileged communication, child abuse reporting & applying an ethical decision making-model when counseling people.	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear: -Explaining competence, consent, confidentiality, privileged communication, child abuse reporting & applying an ethical decision making-model when counseling people.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed all of the issues below in a precise & clear manner: -Explaining competence, consent, confidentiality, privileged communication, child abuse reporting & applying an ethical decision making-model when counseling people.

<p>Theories of individual & family development across the lifespan (S2.F.3.a)</p> <p>5%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Describing theories and other explanations of physical, cognitive, emotional, and social development in children (e.g. attachment theory).</p>	<p>Integrated concepts from at least 1 cited source to support this section.</p> <p>Addressed 1 of the issues below but not precisely and clear: -Describing theories and other explanations of physical, cognitive, emotional, and social development in children (e.g. attachment theory).</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed 2 of the issues below but not precisely and clear: -Describing theories and other explanations of physical, cognitive, emotional, and social development in children (e.g. attachment theory).</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed all of the issues below in a precise & clear manner: -Describing theories and other explanations of physical, cognitive, emotional, and social development in children (e.g. attachment theory).</p>
<p>Theories of individual & family development across the lifespan (S2.F.3.a)</p> <p>5%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Counseling strategies & models for people with special needs, discuss. about working with the families of people with disabilities.</p>	<p>Integrated concepts from at least 1 cited source to support this section.</p> <p>Addressed 1 of the issues below but not precisely and clear: -Counseling strategies & models for people with special needs, discuss. about working with the families of people with disabilities.</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed 2 of the issues below but not precisely and clear: -Counseling strategies & models for people with special needs, discuss. about working with the families of people with disabilities.</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed all of the issues below in a precise & clear manner: -Counseling strategies & models for people with special needs, discuss. about working with the families of people with disabilities.</p>
<p>Effects of crisis, disasters, and trauma on diverse individuals across the lifespan (S2.F.3.g) (5.C.2.f)</p> <p>5%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -Defining child maltreatment, its causes, and factors that protect against abuse and neglect.</p>	<p>Integrated concepts from at least 1 cited source to support this section.</p> <p>Addressed 1 of the issues below but not precisely and clear: -Defining child maltreatment, its causes, and factors that protect against abuse and neglect.</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed 2 of the issues below but not precisely and clear: -Defining child maltreatment, its causes, and factors that protect against abuse and neglect.</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed all of the issues below in a precise & clear manner: -Defining child maltreatment, its causes, and factors that protect against abuse and neglect.</p>
<p>A general framework for understanding strategies and differentiated interventions (S2.F.3.h)</p> <p>5%</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p> <p>Addressed none of the issues below: -General framework how family relationships impact the strategies of counseling interventions.</p>	<p>Integrated concepts from at least 1 cited source to support this section.</p> <p>Addressed 1 of the issues below but not precisely and clear: -General framework how family relationships impact the strategies of counseling interventions.</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p> <p>Addressed 2 of the issues below but not precisely and clear: -General framework how family relationships impact the strategies of counseling interventions.</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p> <p>Addressed all of the issues below in a precise & clear manner: -General framework how family relationships impact the strategies of counseling interventions.</p>
<p>A general framework for understanding differing abilities and strategies for differentiated interventions (S2.F.3.h)</p>	<p>Failed to integrate any concepts from other sources in a meaningful way to support this section.</p>	<p>Integrated concepts from at least 1 cited source to support this section.</p>	<p>Integrated concepts from at least 2 cited sources to support this section.</p>	<p>Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity.</p>

5%	Addressed none of the issues below: -Differences between healthy and unhealthy family systems and outline therapeutic techniques in family counseling approaches (E.g. play therapy).	Addressed the issues below but unclear: -Differences between healthy and unhealthy family systems and outline therapeutic techniques in family counseling approaches (E.g. play therapy).	Addressed the issues below but not precisely and clear: -Differences between healthy and unhealthy family systems and outline therapeutic techniques in family counseling approaches (E.g. play therapy).	Addressed the issues below in a precise & clear manner: -Differences between healthy and unhealthy family systems and outline therapeutic techniques in family counseling approaches (E.g. play therapy).
Ethical and culturally relevant strategies for promoting resilience & optimum development & wellness (S2.F.3.i) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed 3 of the issues below in a precise & clear manner: -Indicators of people's well-being, resilience, and culturally sensitive counseling and its possibilities.
Theories and models of counseling (S2.F.5.a) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Theory counseling people (Adlerian play therapy, SFT, CBT play therapy, REBT, psychodrama...) to outline the stages of counseling appropriate to individuals.	Integrated concepts from at least 1 cited source to support this section. Addressed the issues below but unclear: -Theory counseling people (Adlerian play therapy, SFT, CBT play therapy, REBT, psychodrama...) to outline the stages of counseling appropriate to individuals.	Integrated concepts from at least 2 cited sources to support this section. Addressed the issues below but not precisely and clear: -Theory counseling people (Adlerian play therapy, SFT, CBT play therapy, REBT, psychodrama...) to outline the stages of counseling appropriate to individuals.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed the issue below in a precise & clear manner: -Theory counseling people (Adlerian play therapy, SFT, CBT play therapy, REBT, psychodrama...) to outline the stages of counseling appropriate to individuals.
Developmentally relevant counseling treatment/intervention plans (S2.F.5.h) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Assessment, process, and developmentally relevant techniques or intervention plans for individuals.	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear: -Assessment, process, and developmentally relevant techniques or intervention plans for individuals.	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear: -Assessment, process, and developmentally relevant techniques or intervention plans for individuals.	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed all of the issues below in a precise & clear manner: -Assessment, process, and developmentally relevant techniques or intervention plans for individuals.
Evidence-based counseling strategies and techniques for prevention and intervention (S2.F.5.j) (5.C.3.b) 5%	Failed to integrate any concepts from other sources in a meaningful way to support this section. Addressed none of the issues below: -Evaluating counseling	Integrated concepts from at least 1 cited source to support this section. Addressed 1 of the issues below but not precisely and clear:	Integrated concepts from at least 2 cited sources to support this section. Addressed 2 of the issues below but not precisely and clear:	Integrated concepts from at least 2 cited sources to support this section. This integration flowed smoothly and showed vast creativity. Addressed all of the issues below in a

	effectiveness, demonstrate universal counseling skills, and explain managed care and evidence-based practices	-Evaluating counseling effectiveness, demonstrate universal counseling skills, and explain managed care and evidence-based practices	-Evaluating counseling effectiveness, demonstrate universal counseling skills, and explain managed care and evidence-based practices	precise & clear manner: -Evaluating counseling effectiveness, demonstrate universal counseling skills, and explain managed care and evidence-based practices
ORGANIZATION and PARAGRAPH CONSTRUCTION 5%	The information appears to be disorganized. Paragraphing structure was not clear and sentences were not related within the paragraphs.	Information is organized, but paragraphs are not well constructed. Paragraphs included related information but were typically not constructed well.	Information is organized with well-constructed paragraphs. Most paragraphs include introductory sentence, explanations or details, and concluding sentence.	Information is very organized with well-constructed paragraphs and subheadings. All paragraphs include introductory sentence, explanations or details, & concluding sentence.
MECHANICS and Academic LANGUAGE 5%	Many grammatical, spelling, or punctuation errors. Use of slang and informal language. The paper is shorter than 10 pages (excluding the title page, abstract, reference page(s)).	A few grammatical spelling or punctuation errors. Use of informal & subjective language. The paper is either shorter than 10 pg. or longer than 14 pg. (exclud. the title page, abstract, reference page(s)).	Almost no spelling, grammatical or punctuation errors. Use of formal language. The paper is 10 pages (excluding the title page, abstract, reference page(s)). The paper has an abstract & title page.	No grammatical, spelling or punctuation errors. Appropriate use of formal and objective academic language. The paper has 10 pages (excluding the title page, abstract, reference page(s))
APA STYLE – SOURCES CITATION 10%	Some sources are not accurately documented in text and reference list.	All sources (information & graphics) are accurately documented, but many are not in the desired APA format.	All sources (information and graphics) are accurately documented, but a few are not in the desired APA format.	All sources (information and graphics) are accurately cited in the desired APA format.

V. Grading

A. Grade Calculation

1. There are 1000 points available for this course:

- (a) 200 points - **CLASS Participation – (BLOCK Attendance and 5 Class Role Plays) (20%-)**
- (b) 300 points - **MOODLE Discussion – (12 Moodle Discussions and Peer Responses) - (30%)**
- (c) 200 points - **Theory-based Intervention Presentation (20%)**
- (d) 300 points – **Theory-based Intervention Paper (30%)**

2. At the end of the quarter, grades will be assigned as follows:

- A = 90 – 100%
- B = 80 – 89%
- C = 70 – 79%
- D = 60 – 69%
- F = 0 – 59%

B. Late or missed work policy

For each calendar day that your assignment is turned in late, the grade will be dropped by 10%.

VI. Course Learning Outcomes

COUNSELING AND HELPING RELATIONSHIPS

By the end of this program, students will be able to:

- Analyze and apply theories and models of counseling.
- Identify and apply relevant counseling interventions suitable to specific populations of mental health consumers.

RESEARCH AND PROGRAM EVALUATION

By the end of this program, students will be able to:

- Identify and apply evidence-based counseling practices.

VII. Behavioral Objectives for Course / Anticipated Student Competencies / (CACREP Standards)

Upon completion of this course, the successful student will be able to:

KNOWLEDGE/SKILLS/SCHOLARSHIP

1. Define ethical, professional, and legal issues in counseling those with mental health concerns and apply an ethical decision-making model to the counseling process. **(S2.F.1.b) (S5.C.3.d)**
2. Explain competence, consent, confidentiality, privileged communication, and child abuse reporting as they pertain to those with mental health concerns **(S2.F.1.c)**.
3. Identify causes of mental health problems related to clients' heritage and culture and demonstrate the technical skills needed to address culturally related issues. **(S2.F.2.d)**.
4. Demonstrate knowledge, skills, and awareness of cultural competencies when working those with mental health concerns and legal issues (S2.F.2.c) **(S5.C.3.c)**.
5. Become familiar with how family systems impact strategies of intervention for those with mental health concerns. Describe the differences between healthy and unhealthy family systems and outline therapeutic techniques in family counseling approaches **(S2.F.5.b)**.
6. Understand the issues associated with differing abilities and the implementation of differentiated interventions to address differing abilities **(S2.F.3.h)** including psychopharmacology **(S5.C.2.h)**.
7. Analyze counseling theories and outline the stages of counseling appropriate to those with mental health concerns.

8. Explain the core concepts of a variety of counseling theories including the nature of the counseling relationship, theories of change, and the establishment of goals for those with mental health concerns **(S2.F.5.a) (S2.F.5.f) (S2.F.5.g)**.
9. Demonstrate developmentally relevant techniques and intervention plans for those with mental health concerns **(S2.F.5.h)**.
10. Evaluating counseling effectiveness, demonstrate universal counseling skills, and explain the importance of managed care and evidence-based practices in the counseling process **(S2.F.5.j) (S5.C.3.b)**

CACREP STANDARDS – Section 2 (S2)

1. Professional Counseling Orientation and Ethical Practice

- b. The multiple professional roles and functions of counselors across specialty areas, and their relationships with human service and integrated behavioral health care systems, including interagency and inter-organizational collaboration and consultation **(S2.F.1.b)**
- c. Counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management response teams **(S2.F.1.c)**

2. Social and Cultural Diversity

- c. Multicultural counseling competencies **(S2.F.2.c)**
- d. The impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others **(S2.F.2.d)**

3. Human Growth and Development

- h. A general framework for understanding differing abilities and strategies for differentiated interventions **(S2.F.3.h)**

5. Counseling and Helping Relationships

- a. Theories and models of counseling **(S2.F.5.a)**
- b. a systems approach to conceptualizing clients **(S2.F.5.b)**
- f. Counselor characteristics and behaviors that influence the counseling process **(S2.F.5.f)**.
- g. essential interviewing, counseling and case conceptualization skills **(S2.F.5.g)**
- h. Developmentally relevant counseling treatment or intervention plans **(S2.F.5.h)**
- j. Evidence-based counseling strategies and techniques for prevention and intervention with mental health issues **(S2.F.5.j)**

CACREP Standard: Section 5 (S5): C. Clinical Mental Health Counseling

2. Contextual Dimensions

- h. Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications (**S5.C.2.h**)

3. Practice

- b. Techniques and interventions for prevention and treatment of a broad range of mental health issues (**S5.C.3.b**)
- c. Strategies for interfacing with the legal system regarding court referred clients (**S5.C.3.c**)
- d. Strategies for interfacing with integrated behavioral health care professionals (**S5.C.3.d**)

VIII. Tentative Class Schedule and Outline

TENTATIVE COURSE SCHEDULE

Date	Readings	TOPICS	CACREP Standard
WEEK 1 Jan 8 - Jan 14	Conte Chapter 1	Introduction to Advanced Techniques, Counseling Competencies Forum #1 Responses due Thursday	(S2.F.1.b) (S2.F.1.c) (S2.F.5.f) (S2.F.5.g) (S2.F.3.h)
WEEK 2 Jan 15 - Jan 21	Conte Chapter 2 Pages 9-33	Review of Basic Counseling Theories & Techniques Forum #2 Responses due Thursday Role Play from Readings	(S2.F.5.a) (S2.F.5.b) (S2.F.5.g) (S2.F.5.h) (S2.F.5.j) (S2.F.3.h)
WEEK 3 Jan 22 - Jan 28	Conte Chapter 2 Pages 34-62 Erford Section 5	Review of Basic Theories and Skills, Humanistic Techniques No Forum Responses Due Role Play from Readings	(S2.F.5.a) (S2.F.5.b)
WEEK 4 Jan 29 – Feb 4	Conte Chapter 3 Erford Section 1	Use of Metaphor in Therapy, Solution Focused Techniques Forum #3 Responses due Thursday	(S2.F.5.a) (S2.F.5.b) (S5.C.3.b)
WEEK 5 Feb 5 - Feb 11	Conte Chapter 4 Erford Section 3	Creative Therapy Forum #4 Responses due Thursday	(S2.F.5.a) (S5.C.3.b)
WEEK 6 Feb 12 - Feb 18	Conte Chapter 5 Erford Section 2	Psychodynamic Therapy Part I Forum #5 Responses due Thursday Role Play from Readings	(S2.F.5.a) (S5.C.3.b)
WEEK 7 Feb 19 - Feb 25	Conte Chapter 5 Erford Section 2	Psychodynamic Therapy Part II Forum #6 Responses due Thursday	(S2.F.5.a) (S5.C.3.b)
WEEK 8 Feb 26 - Mar 03	Conte Pages 191-199 Erford Section 6	Cognitive Interventions Forum #7 Responses due Thursday Role Play from Readings	(S2.F.5.a) (S5.C.3.b)
WEEK 9 Mar 4 - Mar 8	Spring Break		
WEEK 10 Mar 11-Mar 17	Conte Ch.1-6 Erford Ch.1-6	Review of Readings Preparing for Block Attendance	(S5.C.3.b)
CLASS meets 9 am – 5 pm	Mar 16	Role playing – Discussions – Activities Evaluation of counseling techniques	(S2.F.5.a) (S5.C.3.b)

CLASS meets 9 am – 5 pm	Mar 17	Role playing – Discussions – Activities Counseling techniques, Integrated Care	(S2.F.5.a) (S5.C.3.b) (S5.C.3.d) (S5.C.2.h) (S5.C.3.c)
WEEK 11 Mar 18 - Mar 24	Conte Page 206-222 Erford Sec. 8 ,9	Counseling Parents/Parenting/Child Behavior Forum #8 Responses due Thursday	(S2.F.5.a) (S2.F.5.b)
WEEK 12 Mar 25 – Mar 31	See links on Moodle	Play Therapy with Children and Adolescents Forum #9 Responses due Thursday Role Play from Readings	
WEEK 13 Apr 1 - Apr 7	See links on Moodle Due 04/07	Family Systems Therapy - Genograms Forum #10 Responses due Thursday Final Paper – Theory Based	(S2.F.2.c) (S2.F.2.d) (S5.C.3.c) (S5.C.3.d)
WEEK 14 Apr 8- Apr 14	Erford Section 4	Mindfulness Forum #11 Responses due Thursday	(S2.F.5.a) (S5.C.3.b)
WEEK 15 Apr 15-Apr 21	See links on Moodle	DBT, EMDR, Animal Assisted Therapy Forum #12 Responses due Thursday	(S2.F.5.a) (S5.C.3.b)
WEEK 16 Apr 22-Apr 26	FINAL Week	Assessment of Change	

IX. University Policies and Information (Please review the university policies provided at this link) <https://www.uprovidence.edu/academics/>

This Link includes access to the following important University Information: \ Academic Catalog (University Policies and Information) Academic Calendar, Library Services, Registrar’s Office, Student Academic Support Services and more.