

PSYC358 Introduction to Family Therapy
American University of Beirut,
Department of Psychology
Fall 2019

Instructor: Dr Tania Bosqui
 Office: 103D Jesup
 Ext: 4370
 Email: tb33@aub.edu.lb

Class Time: Th 09:00-11:30
 Class Location: 107 Jesup
 Office Hours: T9.00-10.00, Th11:30-12:30

'Feelings of worth can flourish only in an atmosphere where individual differences are appreciated, mistakes are tolerated, communication is open, and rules are flexible - the kind of atmosphere that is found in a nurturing family.'

Virginia Satir

Course Description

This course is designed to give students a thorough understanding of the theories and practices of family and couples psychotherapy. The main course objectives include: (1) an understanding of the major approaches to family psychotherapy including Bowenian, Structural, Strategic, Cognitive Behavioral and Solution Focused and Narrative approaches, (2) a thorough understanding of the interpersonal processes that take place within family and couples psychotherapy, (3) exposure to family research (4) an exploration of the ethical issues and struggles that arise during the practice of family psychotherapy.

Student Learning Objectives

Upon completion of the course, students will be able to:

1. Identify and explain the theoretical and empirical bases of a variety of family systems interventions (PLO1c,2b)
2. Apply family systems theories to case formulation and treatment (PLO2a,2b,4c)
3. Demonstrate family systems clinical skills using various techniques associated with family systems interventions (PLO2a,2b,4c)
4. Demonstrate a solid knowledge base of the ethical standards of clinical research and practice with families (PLO4a,4c)
5. Discuss the application of family systems interventions with diverse populations (PLO2b)
6. Communicate complex and contrasting psychological ideas in verbal and written form (PLO6a,6b)

Required Reading

Core texts:

Goldenberg, H, & Goldenberg, I. (2013). Family Therapy: An Overview (Eighth or Ninth Edition). Belmont, CA: Brooks/Cole. ISBN:1305092961
 Patterson, J., Williams, L., Edwards, T., Chamon, L., & Grauf-Grounds, C., (2009). Essential skills in family therapy: From the first interview to termination (Second or Third Edition). New York: Guilford Press. ISBN: 9781462533435



Other primary texts (excerpts provided in class):

- Dattilio, F. (2010). *Cognitive-Behavioral Therapy with Couples and Families: A Comprehensive Guide for Clinicians*. New York: Guilford Press.
- Hughes, D. (2007). *Attachment-Focused Family Therapy*. New York: W.W. Norton.
- Kerr, M., & Bowen, M. (1988). *Family Evaluation*. New York: W.W. Norton.
- Minuchin, S. (1974). *Families and Family Therapy*. Boston, MA: Harvard University Press.
- Napier, A., & Whitaker, C. (1988). *The Family Crucible: The Intense Experience of Family Therapy*. New York: Harper.
- Palazzoli, M., Boscolo, L., Cecchin, G., & Prata, G. (2004). *Paradox and Counterparadox: A New Model in the Therapy of the Family in Schizophrenic Transaction*. Lanham, MD: Rowman & Littlefield.
- Satir, V. (1983). *Conjoint Family Therapy (Third Edition)*. Ann Arbor, MI: University of Michigan Press.
- White, M., & Epston, D. (1990). *Narrative Means to Therapeutic Ends*. New York: W.W. Norton.

Additional required and recommended reading will be assigned week by week in class and uploaded to Moodle.

Class time has been designed to elaborate on reading material, to apply it to real case examples, and to stimulate critical thinking and discussion. Classes will *not* be a point by point summary of the reading, therefore, in order to benefit the most from classes you must read the assigned reading *before* the corresponding class.

Class Format and Environment

Classes will be divided into a theoretical and clinical practice section. This is to provide opportunities to apply theory to practice and role-play related clinical techniques.

Classes will be made up of lectures, group activities and discussions, role-plays and the extensive use of clinical material.

All students are strongly encouraged to be brave in expressing thoughts, opinions and ideas, and to be open-minded and respectful in allowing others to express their thoughts, opinions and ideas, even if they are different from your own. With this in mind, I also respectfully request no cell phone usage in class, as well as no laptop or tablet use unless related to the class (i.e. note taking). If you need to leave your phone on for personal reasons, please do let me know before the class and step out of the class if you need to take a call. It is important to me that classes are useful and interesting to all students, and therefore any informal and constructive feedback throughout the semester on how to improve the class or its content, is warmly welcomed.

This class draws on real case material. To protect confidentiality, all cases are presented anonymously with any identifying information omitted or amended. All presented cases have given written consent for material to be used for educational purposes. Material derived from other case examples, that may arise throughout teaching, are heavily anonymised and blended with other case materials to ensure full anonymity. Please respect case material and do not share or discuss material outside of class.

The discussion of family dynamics and childhood can be sensitive and some may, at times, find it distressing. I therefore urge you to take good care of yourselves and to please ask for help when you need it.

Evaluation Methods

Final grades will be based on attendance and participation, two clinical assignments, a critical literature review, and an assessment video and reflective essay. Grades will be calculated as follows and graded out of 100:

- 10% - Attendance and participation
- 20% - Clinical assessment, genogram, and formulation
- 20% - Clinical treatment plan
- 20% - Critical literature review
- 30% - Assessment video and reflective essay

Late submissions will incur a 2 mark penalty for every day the assignment is late, unless the student can provide evidence of extenuating circumstances in which case a new deadline can be negotiated.

Grading will take an average of 2-3 weeks.



All slides and key references will be made available via Moodle. Submission of assignments, detailed guidelines and grading matrixes will also be available on Moodle.

Students are welcome to email me or visit me during my office hours throughout the semester if a grade trajectory is required, or for any other course-related advice or support.

Attendance and Participation

Students are required to attend all classes for their entirety, and to arrive on time. Late arrivals are highly disruptive so please aim to arrive in class for a prompt start. If you are unable to attend class due to valid reasons or unforeseen circumstances, such as illness, your grade will not be affected as long as you provide formal evidence of your reason for absence (e.g. a doctor’s note from AUBMC). Attendance will be taken at each class and will count for 5% of your grade.

Participation, which includes attentive presence, contributing to discussions (especially relating to the weekly required reading), and respectfully listening to others, counts for a further 5%. It is graded at the end of the course as good participation (5%), partial participation (2.5%), or poor participation (0%).

Clinical assessment, genogram, and formulation

It is preferred that you obtain written consent from a family you are working with on your clinical placement to use their *anonymous* information for this educational assignment. However, if this is not possible for any reason, you will be provided with referral and assessment information for a family. You will be asked to detail an assessment plan based on referral information, synthesize assessment information, develop a genogram for the family, and finally create a formulation for the family informed by one of the family systems theories covered in this course. You will need to *explicitly* apply the theory to the assessment material. Please note that all identifying information should be removed prior to submitting the family treatment plan to the course instructor and a statement to this effect should be included on your title page.

Clinical treatment plan

Based on the same or a different clinical case, again ideally from your placement, you will be asked to develop a detailed treatment plan highlighting the family’s presenting problems, treatment goals, treatment objectives, formulation and recommended therapeutic interventions. Treatment plans should be based on one of the family systems theories covered in the course and each section should be consistent with the chosen theory.

Critical literature review

You will be asked to write a critical literature review critiquing one or more theories and their use in modern day Lebanon. You will be required to review and critically analyse the literature for the chosen theory, and to develop a hypothesis or question a major paradigm in the field.

Assessment video and reflective essay

In order to demonstrate your clinical skills you will be required to submit a video or audio recording of you leading an assessment with a family. Again, this would preferably be with a family you are working with on placement who gives you written consent (and verbal assent for children <18) to 1) film (or record and transcribe) an assessment or treatment session and 2) for this video/recording to be used for educational purposes. If this is not possible, role-plays will be set up using detailed case vignettes with students or actors playing family members. The video/recording/observation should be accompanied by an essay that describes in detail the theories and techniques drawn on during the assessment as well as a personal reflection on the internal unseen processes during the assessment. The personal reflection will be graded as Pass or Fail based on reflective skill and not on content.

Course Schedule (may be subject to change)

Week	Date	Content	Core text reading	Evaluation
Week 1	29 th Aug	Introduction to the course		
		Introduction to family psychology	Goldenberg ch1&2 Patterson ch1	
Week 2	5 th Sept	Assessment and genograms	Patterson ch3&4	

Week 3	12 th Sept	Formulating with families	Goldenberg ch4	
Week 4	19 th Sept	Psychodynamic family therapy	Goldenberg ch7 Patterson ch5	
Week 5	3 rd Oct	Bowenian family therapy	Goldenberg ch8 Kerr ch4 & 6	Clinical assessment, genogram and formulation (4 th Oct @ 5pm)
Week 6	10 th Oct	Experiential family therapy	Goldenberg ch9 Satir ch10 <i>Napier ch1&2 (optional)</i>	
Week 7	17 th Oct	Structural family therapy	Goldenberg ch10 Minuchin ch5&9	
Week 8	24 th Oct	<i>No class due to conference</i>		Clinical treatment plan (25 th Oct @ 5pm)
Week 9	31 st Oct	Strategic family therapy	Goldenberg ch11 Palozzoli ch6&17	
Week 10	7 th Nov	Cognitive Behavioural Family Therapy	Goldenberg ch12 Dattilio ch5&6	
Week 11	14 th Nov	Narrative Therapy and Dyadic Developmental Psychotherapy	Goldenberg ch14 Hughes ch3&6 <i>White 1 & 2 (optional)</i>	
Week 12	21 st Nov	<i>Preparation for video assessment /Role plays</i>	Patterson ch6	Critical literature review (15 th Nov @ 5pm)
Week 13	28 th Nov	Family therapy research and effectiveness Diversity and ethics in family therapy	Goldenberg ch16 Goldenberg ch3 & 6 Patterson ch11	
Week 14	5 th Dec	<i>Reading week/Role plays</i>		
Week 15	12 th Dec	<i>Exam week</i>		Assessment video and reflective essay (13 th December @ 5pm)

Policies

The Student Code of Conduct in the AUB Student Handbook applies to this course and will be strictly enforced. All of your work must be your own. Writing that is copied from published sources (unless referenced), will be considered plagiarism and grounds for a failing grade on the paper. Please be aware that misconduct is vigorously prosecuted and that AUB has a zero tolerance policy. Course policy is that credible evidence of cheating will result in course failure.

AUB strives to make learning experiences accessible for all. If you anticipate or experience academic barriers due to a disability (such as ADHD, learning difficulties, mental health conditions, chronic or temporary medical conditions), please do not hesitate to inform the Accessible Education Office. In order to ensure that you receive the support you need and to facilitate a smooth accommodations process, you must register with the Accessible Education Office (AEO) as soon as possible: accessibility@aub.edu.lb; +961-1-350000, x3246; West Hall, 314.

AUB is committed to facilitating a campus free of all forms of discrimination including sex/gender-based harassment prohibited by Title IX. The University's non-discrimination policy applies to, and protects, all students, faculty, and staff. If you think you have experienced discrimination or harassment, including sexual misconduct, we encourage you to tell someone promptly. If you speak to a faculty or staff member about an issue such as harassment, sexual violence, or discrimination, the information will be kept as private as possible, however, faculty and designated staff are required to bring it to the attention of the University's Title IX Coordinator. Faculty can refer you to fully confidential resources, and you can find information and contacts at www.aub.edu.lb/titleix. To report an incident, contact the University's Title IX Coordinator Trudi Hodges at 01-350000 ext. 2514, or titleix@aub.edu.lb. An anonymous report may be submitted online via EthicsPoint at www.aub.ethicspoint.com.

Clinical assessment, genogram, and formulation

Answer classification	Description of assessment (15 points)	Genogram (30 points)	Description of formulation (15 points)	Formulation: Application of theory to individual (30 points)	Presentation (10 points)
Excellent	Relevant assessment information extracted and synthesized (10-15 points)	Appropriate and detailed genogram spanning at least three generations and includes characteristics, interactions, and patterns (25-30 points)	Formulation clearly described and appropriately reflects assessment information (10-15 points)	Appropriate and thorough application of psychological <i>theory</i> to assessment information (25-30 points)	Meets APA criteria, perfect or near perfect referencing, and few or consistent grammar or spelling errors (7-10 points)
Good	Mostly relevant assessment information extracted and/or limitations in synthesis (5-9 points)	Appropriate genogram spanning at least three generations and includes characteristics, interactions, and patterns, but with some missing detail (20-24 points)	Formulation described but with some lack of clarity or missing links to assessment information (5-9 points)	Application of psychological <i>theory</i> to assessment information but with some gaps or inaccuracies (20-24 points)	Generally meets APA criteria, referencing with minor errors, and/or some grammar or spelling errors (4-6 points)
Limited	Some relevant assessment information extracted but limitations in synthesis (1-4 points)	Mostly appropriate genogram, but with some errors, or missing detail. (15-19 points)	Formulation described but with major lack of clarity or missing links to assessment information (1-4 points)	Application of psychological <i>theory</i> to assessment information but with major gaps or inaccuracies (15-19 points)	Errors based in APA format, referencing with major errors, and/or major grammar or spelling errors (3-6 points)
Poor	Irrelevant assessment information extracted and no synthesis, <i>or missing/inadequate risk assessment</i> (0 points)	Limited genogram, but with major errors, or missing detail. (0-14 points)	Formulation is unclear or inappropriate for the family (0 points)	Limited or no application of psychological <i>theory</i> to assessment information (0-14 points)	Major errors in APA format, referencing with major errors, and/or major grammar or spelling errors, or incomprehensible writing (0-2 points)

Clinical treatment plan

Answer classification	Summary of assessment (20 points)	Summary of formulation (20 points)	Theory description (20)	Treatment plan (30 points)	Presentation (10 points)
Excellent	Relevant assessment information extracted and synthesized (15-20 points)	Formulation clearly described and appropriately reflects assessment information (15-20 points)	The chosen theory is described accurately with clear reference to application for therapeutic use (15-20 points)	Treatment recommendations are <i>appropriate</i> for the family, are clearly <i>linked</i> to the formulation, and with an appropriate and thorough application of psychological <i>theory</i> (25-30 points)	Meets APA criteria, perfect or near perfect referencing, and few or consistent grammar or spelling errors (7-10 points)
Good	Mostly relevant assessment information extracted and/or limitations in synthesis (10-14 points)	Formulation described but with some lack of clarity or missing links to assessment information (10-14 points)	The chosen theory is described accurately, with some missing detail, or with unclear references to application for therapeutic use (10-14 points)	Treatment recommendations are mostly <i>appropriate</i> for the family, are <i>linked</i> to the formulation, but with some missing detail, or with lacking application of psychological <i>theory</i> (20-24 points)	Generally meets APA criteria, referencing with minor errors, and/or some grammar or spelling errors (4-6 points)
Limited	Some relevant assessment information extracted but limitations in synthesis (5-9 points)	Formulation described but with major lack of clarity or missing links to assessment information (5-9 points)	The chosen theory is described accurately, with major missing detail, or with limited or unclear references to application for therapeutic use (5-9 points)	Treatment recommendations are somewhat <i>appropriate</i> for the family, are <i>linked</i> to the formulation, but with some major missing detail, or with some inappropriate application of psychological <i>theory</i> (15-19 points)	Errors based in APA format, referencing with major errors, and/or major grammar or spelling errors (3-6 points)
Poor	Irrelevant assessment information extracted and no synthesis, <i>or missing/inadequate risk assessment</i> (0-4 points)	Formulation is unclear or inappropriate for the family (0-4 points)	The chosen theory is described inaccurately, or with no or severely limited references to application for therapeutic use (0-4 points)	Treatment recommendations are mostly <i>inappropriate</i> for the family, have unclear <i>links</i> to the formulation, or with inappropriate application of psychological <i>theory</i> (0-14 points)	Major errors in APA format, referencing with major errors, and/or major grammar or spelling errors, or incomprehensible writing (0-2 points)

Critical literature review

Answer classification	Literature review technical approach (15 points)	Critical analysis (30 points)	Structure and development of argument (30 points)	Hypothesis or paradigm (15 points)	Presentation (10 points)
Excellent	Literature systematically review using multiple searches and multiple databases (10-15 points)	Relevant literature synthesized and critically analyzed in detail (25-30 points)	Clear structure and organization, with a building argument rooted in evidence (25-30 points)	Develops new hypothesis from review of existing literature or questions a major paradigm (10-15 points)	Meets APA criteria, perfect or near perfect referencing, and few or consistent grammar or spelling errors (7-10 points)
Good	Mostly relevant assessment information extracted and/or limitations in synthesis (5-9 points)	Mostly relevant literature synthesized and critically analyzed with some missing detail (20-24 points)	Clear attempt at structure and organization, with a building argument rooted in evidence (20-24 points)	Clear attempt to develop a new hypothesis from review of existing literature or a limited but clear attempt to question a major paradigm (5-9 points)	Generally meets APA criteria, referencing with minor errors, and/or some grammar or spelling errors (4-6 points)
Limited	Some relevant assessment information extracted but limitations in synthesis (1-4 points)	Mostly relevant literature synthesized and critically analyzed, with some missing literature or limited critical analysis (15-19 points)	Limited structure and organization, but with an unclear or confused argument and/or lack of use of evidence (15-19 points)	Limited attempt to develop a new hypothesis from review of existing literature or a limited attempt to question a major paradigm (1-4 points)	Errors based in APA format, referencing with major errors, and/or major grammar or spelling errors (3-6 points)
Poor	Irrelevant assessment information extracted and no synthesis (0 points)	Major gaps in included literature, poorly synthesized and/or poor or missing critically analysed (0-14 points)	Poor structure and organization, with an unclear or confused argument and no use of evidence (0-14 points)	No attempt to develop a new hypothesis or question a major paradigm (0 points)	Major errors in APA format, referencing with major errors, and/or major grammar or spelling errors, or incomprehensible writing (0-2 points)

Assessment video and reflective essay

Answer classification	Video (30 points)	Assessment description of theory and techniques (40 points)	Hypotheses for future directions (20 points)	Presentation (10 points)	Reflection (P/F)
Excellent	Demonstrates: 1. Empathy, validating, and/or normalizing 2. Curiosity 3. At least three assessment/question techniques 4. Introduces self and engages family 5. Appropriate contracting 6. Assesses the main presenting problem (30 points) Overall positive feedback from student, actor or supervisor (1 extra credit)	Accurate and detailed description of the underlying theor(ies) and techniques used as part of the assessment and clear rationale for their use (35-40 points)	Appropriate recommendations are made for further assessment and hypotheses for formulation and treatment are suggested, which reflect the assessment information and have a clear theoretical link (15-20 points)	Meets APA criteria, perfect or near perfect referencing, and few or consistent grammar or spelling errors (7-10 points)	The assessment process is reflected on with a clear awareness and consideration for potential personal biases and critical evaluation of one's own work (Pass)
Good	Demonstrates the above 6 skills but with some minor lack of depth such as missing details of contracting or lack of validation in some parts (25-29 points)	Accurate description of the underlying theor(ies) and techniques used as part of the assessment, but with some missing detail or an unclear rationale for their use (25-34 points)	Mostly appropriate recommendations are made for further assessment and hypotheses for formulation and treatment are suggested, but with some lack of clarity in detail in how these link to assessment information and theory (10-14 points)	Generally meets APA criteria, referencing with minor errors, and/or some grammar or spelling errors (4-6 points)	
Limited	Demonstrates at least 4 out of the 6 skills, or all 6 but with major lack of depth such as missing out confidentiality from contracting or lack of demonstrating any curiosity or empathy (10-24 points)	Mostly accurate description of the underlying theor(ies) and techniques used as part of the assessment, but with some significant missing detail or no rationale for their use (15-24 points)	Some appropriate recommendations are made for further assessment and limited hypotheses for formulation and treatment are suggested, but with major lack of clarity or detail in how these link to assessment information and theory (5-9 points)	Errors based in APA format, referencing with major errors, and/or major grammar or spelling errors (3-6 points)	
Poor	Demonstrates less than 4 of the 6 skills, or 5-6 but with major lack of depth in more than 1 skill area	Inaccurate or missing description of the underlying theor(ies) and techniques used as	Inappropriate recommendations are made for further assessment and no relevant hypotheses for formulation and	Major errors in APA format, referencing with major errors, and/or major grammar or	The assessment is discussed academically, indirectly, or with very limited evidence of self-

	(0-9 points)	part of the assessment (0-14 points)	treatment are suggested (0-4 points)	spelling errors, or incomprehensible writing (0-2 points)	awareness or critical evaluation of one's own work (Fail)
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