



**LEWIS & CLARK COLLEGE**

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**GRADUATE SCHOOL OF EDUCATION AND COUNSELING**

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**CPSY 561: ASSESSMENT AND PREVENTION IN FAMILY THERAPY  
AND COUNSELING  
SPRING 2010**

Mondays 01:00p.m- 04:15 PM

Location: Rogers 218

Instructor: Sebastian Perumbilly, M.A.(Bioethics), M.A.MFT, Ph.D. Candidate

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Office: Rogers Hall- Office 331

Office Hours: 4:45-6:45 PM, Mondays, or special appointment

**CATALOG DESCRIPTION**

Examination of the theoretical assumptions, values, and cultural frameworks underlying individual, couple, and family assessment approaches. Specific assessment techniques and tools are discussed, evaluated, and practiced. Preventative interventions such as premarital counseling and parent education are also explored and critiqued from a critical multicultural perspective.

**COURSE DESCRIPTION**

This course includes an overview of marital and family assessment approaches and techniques. This course will focus on theoretical underpinnings and corresponding values and biases. The goal of this course is to ensure a firm grasp of how to assess the family and couple through a deep understanding of contextual and systemic dynamics as well as extensive knowledge of approaches and techniques available.

**LEARNING OBJECTIVES**

At the completion of this course, an engaged course participant will:

1. Learn to diagnose and assess client behavioral and relational health problems *systemically* and contextually.
2. Consider issues and debates relative to systems assessment and individual diagnosis.
3. Comprehend individual, marital, couple, and family assessment instruments appropriate to presenting problem, practice setting, and cultural context.
4. Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.
5. Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.
6. Learn to use (e.g., consider when to apply), administer and interpret results, and to discuss results with clients.

7. Learn to do family diagnosis and systems assessment, including individual, marital, couple, and family assessment instruments, understanding the strengths and limitations relative to presenting problems, practice settings, and cultural/social contexts.
8. Learn to assess and manage high risk, crisis, and trauma situations (e.g., suicide prevention, domestic violence safety, disclosure of sexual abuse, disaster response, substance abuse intervention).
9. Learn to routinely consider health status, mental status, other therapy, and other systems involved in the clients' lives (e.g., courts, social services), and to elicit relevant and accurate biopsychosocial history to understand the context of clients' problems.
10. Learn to systematically integrate client reports, observations of client behaviors, client relationship patterns, reports from other professionals, results from testing procedures, and interactions with client to guide assessment and treatment planning process.
11. Gain knowledge and skills relative to high risk situations, including evaluating level of risk; managing crises and emergencies; and defusing intense/chaotic situations to enhance the ability to effectively engage in therapy and ensure the safety of all participants.
12. Demonstrate the ability to identify clients' strengths, resilience, and resources.
13. Understand how and when to share research and provide psychoeducation to couples and families (e.g., education on serious mental illness or other disorders; information on sexual functioning; research on parenting and couple relationships).
14. Understand major trends in family prevention (e.g., pre-marital counseling, divorce-counseling, parent-education, relationship-enhancement) and how prevention plays a part in practice with families.

**ADDITIONAL READINGS:**

Weekly readings will be posted online (MOODLE). These weekly readings are to be completed for the day indicated. The participants are expected to be prepared to discuss the ideas and concepts discussed in the readings, and responsible for all of the assigned readings, whether or not they are discussed in class. Please note that there are more readings assigned for some topics than for others.

**FINAL GRADING**

A = 93-100

B = 83-87

C = 73-77

A- = 90-92

B- = 80-82

C- = 70-72

B+ = 88-89

C+ = 78-79

**PARTICIPATION IN THE LEARNING COMMUNITY**

Participants are required to attend and actively involved in all scheduled class meetings. This includes being on time, being prepared, and engaging with colleagues as fellow professionals. Becoming a couple & family therapist involves looking closely at ourselves, our values, beliefs, and biases. This can be a very personal, and sometimes emotional process. Treating colleagues with respect, listening deeply to their experiences, and being open to diverse world views may encourage a collaborative milieu of care in which we can all challenge ourselves and each other, and to critically examine and develop our skills and perspectives. In order to prepare for each class, students should carefully read and study all assigned materials to be ready to discuss, debate, apply the content of readings, and actively engage in role-playing activities. Class discussion and interaction with colleagues are fundamental to the process of learning to be a therapist and all sessions include necessary information. Therefore, if you must miss a class,

fellow students and the instructor may ask you to contribute to the learning community in another way. According to the Lewis & Clark Counseling Psychology attendance policy, missed class periods may result in lowered final grades and students who miss two class periods may be failed.

### **NON-DISCRIMINATION POLICY/SPECIAL ASSISTANCE**

Lewis & Clark College adheres to a nondiscriminatory policy with respect to employment, enrollment, and program. The College does not discriminate on the basis of race, color, creed, religion, sex, national origin, age, handicap or disability, sexual orientation, or marital status and has a firm commitment to promote the letter and spirit of all equal opportunity and civil rights laws.

### **SPECIAL NEEDS/ ACCOMMODATIONS**

Please see me individually at the beginning of the semester if you require any special accommodations as a result of a documented disability.

### **ABSENCES**

Please notify the instructor if you have to miss a class. Missing any class time may result in an additional class assignment at the discretion of the instructor. It is the student's responsibility to contact the instructor to discuss the make-up work. Missing more than two classes may result in failure to complete class, (any exceptional circumstances may be considered by the instructor).

### **CONFIDENTIALITY**

Because of the nature of classroom work and group dynamics it is expected that "personal" information shared by students will be kept in confidence. Students are not required to share personal information as part of the classroom dynamics, or as a requirement for any evaluation or for grading purposes. Students are asked to be intentional about what they choose to share with other students in the class during classroom-activities.

### **LAPTOPS AND CELL PHONES**

Due to the experiential nature of the class laptops may be used only when designated by the instructor. Cell phones must be silenced and text messaging is not allowed during class time. If there is an emergency you may exit the class to use your cell. Laptops and cell phones may of course be used on breaks. Please come prepared to take hand-written notes. If an alternate learning ability requires the use of a laptop please let the instructor know at the beginning of the semester.

### **ASSIGNMENTS**

Your successful course participation and completion will be evaluated based on the following FOUR modes of assessment:

#### **1. Reaction papers to weekly readings (20 points):**

In order to stimulate and facilitate informed and engaging discussion during the class every week, every course participant is expected to send a **one-page** reflection/ reaction

paper (single spaced) on the weekly assigned topic to the instructor by e-mail ([perumbil@lclark.edu](mailto:perumbil@lclark.edu)). These e-mails would uncover some of the most significant points/ themes emerging from the assigned readings for that class. These e-mails are expected to reach my e-mail inbox by 8:00 AM that specific Monday, and the themes emerged from those e-mails will be integrated into the class discussion that afternoon. In order to help me track your class contribution and to give you credit for your reflection for that class, please indicate the following on the subject column of your e-mail: topic, your name and the paper number. For instance, if I were to write the third paper, it would look something like this: **PTSD-Perumbilly-Paper#3**. Each participant is expected to send a total of 10 papers during this semester, and each relevant paper will score 2 points towards the final course grade.

## **2. A paper about interviewing clinical assessment professionals (20 points):**

As part of this coursework, you will visit a mental health clinic in your community, and interview several clinical professionals there, and write a 5-6 page (double spaced) paper about the clinical assessment procedures and the use of clinical assessment instruments at that center. In the final section of this paper, you will include your critique of the assessment protocol at that center. **Due: March 15**

## **3. Class presentation—movie/ novel analysis, clinical assessment & treatment plan (25 points)**

For this assignment, you will pick a clinically relevant movie/ novel of your choice. Imagine that you are the MCFT therapist for this relational unit (family or couple in that movie/ novel). After making a systemic analysis of the case by using a *genogram*, you will create a clinical assessment document (i.e., clinical knowledge base about the case), and prepare a treatment plan. In order to do clinical assessment and treatment plan you need to be rooted in one or more systemic theoretical lenses (e.g., Structural, Strategic, Solution-Focused, etc). On the assigned date, you will present the case with your *clinical assessment* along with a *treatment plan*. On the day of your presentation, you will give me a hard copy of the outline of your presentation. Please check the CLASS SCHEDULE to know the date of your presentation.

Your class presentation will have the following components:

- ❑ A clear description of the storyline with a presenting problem
- ❑ A comprehensive clinical assessment: clinically relevant information about the identified patient (IP), family members and their background; family's life setting; their strengths and resilience; clinically relevant family history and genogram; and family's involvement with other systems
- ❑ Problem conceptualization using one or more systemic theoretical lenses; and
- ❑ A treatment plan consistent with the clinical assessment using the same theoretical lenses you used for clinical assessment. Your treatment plan will also be supported by the relevant research from peer reviewed journal articles related to the field of MCFT

Your presentation will last 15 minutes. After your presentation, the course participants and I will give you feedback on your **clinical assessment** and **treatment plan**, and you may consider including them for your final paper and the role play on a DVD format.

Since this is a very time-consuming project, I would strongly recommend that you start preparing for it as soon as you can. **Due: March 29 & April 5, 2010**

#### **4. Final project: Final Paper & Clinical Assessment in Action (35 points)**

Your final paper will have the following components:

- Presenting problem
- A comprehensive clinical assessment: clinically relevant information about the family members and their background; family's life setting; strengths and resilience of the family system; clinically relevant family history and genogram; involvement with other systems;
- Problem conceptualization, assessment and treatment plan using one or more systemic theoretical lenses;
- Your treatment plan will be supported by the relevant research from peer reviewed journal articles (at least five) related to the field of MCFT.
- A brief description about your experience and the lessons learned through this clinical exercise

You will submit your final paper (15-16 pages) along with the role play (30 minutes visual recording on a DVD format) of the **clinical assessment session**.

**NOTE:** For this final project, you will be evaluated based on your performance as a Marriage, Couple and Family Therapist, and the scholarly quality of your paper.

Papers should be professionally written, double spaced, 12 pt font, organized into sections with appropriate headings, and referenced according to APA 5/ 6 guidelines. This paper will be graded for thorough consideration of all areas of the paper, clarity and organization of ideas, use of extensive literature, critical thinking, and writing and referencing according to APA 5/6.

#### **Due: April 26**

The Lewis and Clark Writing Center has prepared a brief guide to APA referencing:

[http://www.lclark.edu/dept/wstudio/objects/apa\\_style.pdf](http://www.lclark.edu/dept/wstudio/objects/apa_style.pdf)

#### **TEXTS**

Cierpka, M., Thomas, V., & Sprenkle, D. (2005). *Family assessment: Integrating multiple clinical perspectives*. Cambridge, MA: Hogrefe.

Sperry, L. (2004). *Assessment of couples and families: Contemporary and cutting- edge strategies*. New York, NY: Brunner- Routledge.

### CLASS SCHEDULE

January 11	<ul style="list-style-type: none"> <li>❑ Course orientation, syllabus &amp; course expectation</li> <li>❑ <u>Introduction to Family &amp; Couple Assessment</u> <ul style="list-style-type: none"> <li>❑ Cierpka, Thomas &amp; Sprenkle (2005). Chapter 1 (pp. 4-14)</li> <li>❑ Sperry (2004). Chapters 1 &amp; 2 (pp. 3-29)</li> </ul> </li> </ul>
January 18	Martin Luther King Jr. Day (NO CLASS)
January 25	<p><u>Interviewing clients for assessment: individual, couples and families</u></p> <ul style="list-style-type: none"> <li>❑ Cierpka, Thomas &amp; Sprenkle (2005). Chapters 3, 4, 5</li> </ul> <p>Rigazio-DiGilio, S.A. (2000). Relational diagnosis: a co constructive-developmental perspective on assessment and treatment. <i>Psychotherapy in Practice</i>, 56, 1017-1036</p>
February 1	<p><u>Family and couples assessment—Part-I: examining levels of functional systems; context; family’s social world; multi-general perspectives; family life cycle; parenting styles and behavior; child and family assessment; and systemic assessment</u></p> <ul style="list-style-type: none"> <li>❑ Cierpka, Thomas &amp; Sprenkle (2005). Chapters: 2, 6, 7, 8, 9 10 &amp; 11</li> <li>❑ Sperry (2004). Chapter: 8</li> </ul>
February 8	<p><u>Family and couples assessment—Part-II:</u></p> <ul style="list-style-type: none"> <li>❑ Sperry (2004). Chapters: 3 &amp; 11: Strategies and prospects of assessment</li> </ul> <p>Beavers, W. R., &amp; Hampson, R. B. (2003). Measuring family competence: the Beavers Systems Model. In F. Walsh, <i>Normal family process: growing diversity and complexity</i> (pp. 487-514). New York, NY: The Guildford Press.</p> <p>Chevret, M., Jaudinot, E., Sullivan, K., Marrel, A., &amp; Solesse, A. (2004). Quality of sexual life and satisfaction in female partners of men with ED: Psychometric validation of the Index of sexual life (ISL) questionnaire. <i>Journal of Sex and Marital Therapy</i>, 30, 141- 155.</p> <p>Epstein, N. B., Ryan, C. E., Bishop, D. S., Miller, I. W., &amp; Keitner, G. I. (2003). The McMaster Model: A view of healthy family functioning. In F. Walsh, <i>Normal family process: growing diversity and complexity</i> (pp. 515- 539). New York, NY: The Guildford Press.</p> <p>Mumford, D. J., &amp; Weeks, G. R. (2003). The money genogram. <i>Journal of Family Psychotherapy</i>, 14(3), 33- 44.</p> <p>Olson, D. H.; &amp; Gorall, D. M. (2003). Circumplex model of marital and family systems. In F. Walsh, <i>Normal family process: growing diversity and complexity</i> (pp. 459-486). New York, NY: The Guildford Press.</p>

February 15	MCFT Fair—meeting with MCFT faculty and practicum/internship supervisors from various clinical sites.
February 22	<u>Instruments and measures for family and couples assessment: psychological tests, clinical observation, strategies, inventories, and outcome assessment</u> □ Sperry (2004). Chapters 4, 5, 6 & 7
March 1	<p><u>Topics in family and couples assessment: assessing and managing crises— Part I:</u>  <u><i>Intimate partner violence</i></u>          Almeida, R.V., &amp; Durkin, T. (1999). The cultural context model: therapy for couples with domestic violence. <i>Journal of Marital &amp; Family Therapy, 25</i>, 313-324.          Bograd, M., &amp; Mederos, F. (1999). Battering and couples therapy: universal screening and selection of treatment modality. <i>Journal of Marital and Family Therapy, 25</i>, 291-312          Gauthier, L.M., &amp; Levendosky, A.A. (1996). Assessment and treatment of couples with abusive male partners: Guidelines for therapists. <i>Psychotherapy, 33</i> (3), 403- 417.          Greene, K. (2002). The different faces of intimate violence: Implications for assessment and treatment. <i>Journal of Marital and Family Therapy, 28</i> (4), 455- 466</p> <p><u><i>PTSD:</i></u>          Beckerman, N.L. (2004). The impact of post-traumatic stress disorder on couples: a theoretical framework for assessment and intervention. <i>Family Therapy, 31</i>, 129-144          Landau, J., Mittal, M., &amp; Wieling, E. (2008). Linking human systems: strengthening individuals, families and communities in the wake of mass trauma. <i>Journal of Marital and Family Therapy, 34</i>, 193-209          Weiling, E., &amp; Mittal, M. (2008). JMFT Special section on mass trauma. <i>Journal of Marital and Family Therapy, 34</i>, 127-131</p> <p><u><i>Sexual Infidelity:</i></u>          Treas, J., &amp; Giesen, D. (2000). Sexual infidelity among married and cohabiting Americans. <i>Journal of Marriage and the Family, 62</i>, 48-60</p>
March 8	<p><u>Topics in family and couples assessment: assessing and managing crises — Part -II:</u>          □ <i>Problem gambling, substance abuse and sex addiction</i></p> <p>McComb, J.L., Lee, B.K., &amp; Sprenkle (2009). Conceptualizing and treating problem gambling as a family issue. <i>Journal of Marital &amp; Family Therapy, 35</i>, 415-431</p> <p>Rowe, C.L., Liddle, H.A. (2003). Substance abuse. <i>Journal of Marital and Family Therapy, 29</i>, 97-120</p>

March 15	<p><u>Topics in family and couples assessment: assessing and managing crises — Part III</u></p> <ul style="list-style-type: none"> <li>❑ Child custody and divorce assessment: impact of system-reorganization/ restructuring</li> <li>❑ Domestic violence, child abuse, suicide and homicide <ul style="list-style-type: none"> <li>○ Sperry (2004). Chapters 9 &amp; 10</li> </ul> </li> </ul> <p>Murray, C.E. (2006). Controversy, constraints, and context: understanding family violence through family systems theory. <i>The Family Journal: Counseling and Therapy for Couples and Families</i>, 14, 234-239</p> <p>Sanchez, H.G. (2001). Risk factor for suicide assessment and intervention. <i>Professional Psychology: Research and Practice</i>, 32, 351-358</p> <p>deCastro, S., &amp; Guterman, J. (2008). Solution-focused therapy for families coping with suicide. <i>Journal of Marital and Family Therapy</i>, 34, 93-106</p> <p>❑ <b>Interview Paper DUE in class</b></p>
March 22	SPRING BREAK (NO CLASS)
March 29	<b><u>Class presentations:</u></b> Sara, Anne, Nicole, Nicky, Sheena, Kim & Sarah
April 5	<b><u>Class presentations:</u></b> Freyja, Danielle, Gillian, Erin, AJ & Steve
April 12	<p><u>Prevention programs—Part I: Philosophical assumptions and current debate</u></p> <p>Hage, S.M., Romano, J.L., Conyne, R.K., Kenny, M., Matthews, C., Schwartz, J., &amp; Waldo, M. (2007). Best practice guidelines on prevention practice, research, training and social advocacy for psychologists. <i>The Counseling Psychologist</i>, 35, 493-566</p> <p>Liddle, H.A. &amp; Hogue, A. (2000). A family-based, developmental-ecological preventive intervention for high-risk adolescents. <i>Journal of Marital and Family Therapy</i>, 26, 265-279</p> <p>Murray, C.E. (2005). Prevention work: a professional responsibility for marriage and family counselors. <i>The Family Journal: Counseling and Therapy for Couples and Families</i>, 13, 27-34</p>
April 19	<p><u>Prevention programs—Part II: Premarital counseling, marriage enrichment programs, and parenting education</u></p> <p>Larson, J. (2002). Clinical update: premarital assessment. <i>Family Therapy Magazine</i>, 1, 36-42</p> <p>Larson, J., Newell, K., Topham, G., &amp; Nichols, S. (2002). A review of three comprehensive premarital assessment questionnaires. <i>Journal of Marital and Family Therapy</i>, 28, 233-239</p>
April 26	❑ Course Overview (summarizing) & final comments



	<ul style="list-style-type: none"><li data-bbox="373 189 1396 231">❑ <b>DUE: Final Project Submission (Final Paper &amp; DVD)</b></li><li data-bbox="373 231 1396 266">❑ Course Evaluation</li></ul>
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**COURSE OBJECTIVES-MCFT CORE COMPETENCIES EVALUATION SHEET**

Upon Completion of CPSY 561, please rate each item according to how much you learned about the competency through your work in this class.

TERM: Fall 2009

INSTRUCTOR: Sebastian Perumbilly

Please circle the rating corresponding to your assessment:

1=objective not met 2=objective somewhat met 3=objective adequately met 4. Objective more than met

Learn to diagnose and assess client behavioral and relational health problems systemically and contextually. Consider issues and debates relative to systems assessment and individual diagnosis.

1 2 3 4

Comprehend individual, marital, couple, and family assessment instruments appropriate to presenting problem, practice setting, and cultural context.

1 2 3 4

Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.

1 2 3 4

Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.

1 2 3 4

Learn to use (e.g., consider when to apply), to administer and interpret results, how to discuss results with clients, family diagnosis and systems assessment, including individual, marital, couple, and family assessment instruments, understanding the strengths and limitations relative to presenting problems, practice settings, and cultural/social contexts.

1 2 3 4

Learn to assess and manage high risk, crisis, and trauma situations (e.g., suicide prevention, domestic violence safety, disclosure of sexual abuse, disaster response, substance abuse intervention).

1 2 3 4

Learn to routinely consider health status, mental status, other therapy, and other systems involved in the clients' lives (e.g., courts, social services), and to elicit a relevant and accurate biopsychosocial history to understand the context of clients' problems.

1 2 3 4

Learn to systematically integrate client reports, observations of client behaviors, client relationship patterns, reports from other professionals, results from testing procedures, and interactions with client to guide assessment and treatment planning process.

1 2 3 4

Gain knowledge and skills relative to high risk situations, including evaluating level of risk; managing crises and emergencies; and defusing intense/chaotic situations to enhance the ability to effectively engage in therapy and ensure the safety of all participants.

1 2 3 4

Demonstrate the ability to identify clients' strengths, resilience, and resources.

1 2 3 4

Understand how and when to share research and provide psychoeducation to couples and families (e.g., education on serious mental illness or other disorders; information on sexual functioning; research on parenting and couple relationships).

1 2 3 4

Understand major trends in family prevention (e.g., pre-marital counseling, divorce-counseling, parent-education, relationship-enhancement) and how prevention plays a part in practice with families.

1 2 3 4