

SYLLABUS for Advanced Psychotherapy , CLP-6407, Section 7195
UF PHHP Graduate Program in Clinical and Health Psychology
Summer Session C, 2016; Tuesday 1:00 – 4:00 PM, HPNP Building, 3170.
Delivery Format: On-campus live lecture and role-playing exercises.

Course Website: Canvas used for announcements, syllabus updates, and posting grades.

Instructor Information

Robert Guenther, Ph.D., Clinical Professor

Website: <http://chp.phhp.ufl.edu/people/core-faculty/robert-t-guenther-phd/>

Department of Clinical and Health Psychology

Office: G-039 inside Suite G-036, Clinical Faculty Suite, in Shands ground floor

Office Hours: By appointment or just stop by after calling to make sure I'm there.

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Preferred Course Communications: email to set up appointments, in-person visits as needed.

Prerequisites of course: Satisfactory completion of the first year of graduate coursework, Graduate Program in Clinical and Health Psychology, Department of Clinical and Health Psychology, College of Public Health and Health Professions, University of Florida, Gainesville Florida.

Course Overview and Purpose

This class is designed to be a follow-up course to the introduction to psychotherapy and behavior change course, CLP-6407. Through readings, observation of actual therapy sessions, topical presentations, and classroom discussions, the students will enhance their developing skills as psychotherapists-in-training. The course will have a dual focus of a) depth exploration of various approaches to psychotherapy and behavior change, b) enhancement of the skills for understanding the content (what is overtly said and done) and c) the process (what is happening on a conceptual and covert level) of psychotherapy in general. Trainees will present actual ongoing therapy cases, wherein they will review presenting case information, preliminary conceptualizations, and application of state-of-the-art empirically supported treatments. We will discuss issues related to transference, resistance, and management of the "difficult patient." Attention will be directed to the many factors that influence outcome in psychotherapy. Reading assignments are selected to highlight empirical, methodological and practical aspects of psychotherapy, but the goal of the course will be to build skills in advanced case conceptualization.

Relation to Program Outcomes

Graduates of the UF CHP graduate program in clinical psychology are expected to become licensed clinical psychology practitioners in their future positions. They may focus on research but they are also expected to be fully competent psychotherapy practitioners. This is among the Department's advanced courses preparing graduate students as providers of psychological treatments. Dedication to the tasks of this course will prepare our graduate students for that role in graduate school and throughout their careers.

Course Objectives

Upon successful completion of the course, students should be able to:

1. Demonstrate a working appreciation of the distinction between process and outcome in psychotherapy.
2. Demonstrate basic process skills of active listening and empathic responding in actual interactions with patients.
3. Utilize patient response to treatment in order to adjust the treatment approach to better address symptoms.

4. Utilize and describe a conceptual framework for the psychotherapeutic enterprise across the spectrum of psychopathology with actual cases.
5. Demonstrate ability to adjust the treatment “on-the-fly” when encountering resistance.
6. Maintain a guiding conceptual framework for treatment within which intervention adjustments serve as necessary elements of a flexible responsive treatment approach.

Instructional Methods

Trainees are expected to make a series of presentations on topics they select that are relevant to their training goals, which challenge their educational and experiential limitations. They are also expected to present cases in an efficient manner with a focus and goal, not only for treatment, but for each presentation such that efficient utilization of time is maximized.

Course Materials

Please see the Reading List at the end of this document.

Course Policies

Expectations Regarding Course Behavior:

You are expected to attend every lecture well prepared to participate actively in discussions of the reading material. You are responsible for demonstrating your understanding (or lack thereof) of the material via comments that you initiate. Critical comments are welcome as long as they contribute to open ongoing discussion.

Unless otherwise instructed, please refrain from using tablets, laptops, cell phones or any other electronic devices during class as it is distracting and inconsiderate of other students and the instructor.

Please do not arrive late to class or disrupt the class as it is distracting and inconsiderate of other students and the instructor.

To the extent permitted by facility rules and restrictions, you may bring food and/or beverages to class as long as it does not interfere with your ability to work and/or participate in class and as long as it does not interfere with your ability to work and participate in class, and it does not annoy others. You will be expected to clean up after yourself and dispose of all trash before leaving the room.

Policy related to make-up work:

Attendance of class is mandatory. Three or more unexcused absences will result in failure of the course. Missed classes due to illness will require demonstration of making up missed work and experiences. If students must be absent, it is expected they will contact the instructor as soon as possible and be responsible for any missed material. Students who miss lectures are expected to acquire lecture notes or recordings (be very careful regarding PMI) from other students who attended.

We expect you to attend and to be prepared to participate in all class sessions. Personal issues with respect to class attendance or fulfillment of course requirements will be handled on an individual basis. If you must miss a class because of a foreseeable conflict (i.e., professional conference, athletic competition, religious observance, etc.) you are expected to notify us immediately to arrange topic coverage and complete assigned tasks prior to the date when you will be absent.

Please note all faculty are bound by the UF policy for excused absences. For information regarding the UF Attendance Policy see the Registrar website for additional details:

<https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>

Note that requests to be excused from class for events such as family celebrations and/or reunions, vacation-related travel with friends or family, and other such events may be refused. Requests without sufficient advance warning may also be refused.

Reporting illnesses and family emergencies:

In the event you experience an unexpected illness, family, or otherwise personal emergency please notify us immediately to set up alternative arrangements. You must provide clear evidence that you have made up any and all work and training experiences that you missed.

What is expected of you:

Each student is required to make a number of presentations during this course. Case presentations will be according to a structure that will be provided in advance. Some presentations will be brief, problem-focused, and will require the ability to present the case in a very concise manner. Other case presentations may be more relaxed and less structured so as to encourage broad discussion of various issues. All presentations must include a statement of the purpose of the presentation, case problem list, treatment plan, session number, current progress, and topic of focus. Recorded material from the sessions will accompany the presentation and must be applicable to the topic of focus. Quality of the case presentations as subjectively assessed by instructor will count for 60% of the course grade.

Each student is required to make three presentations from the published literature on topics relevant to the cases we are discussing. Such presentations will be oral, will include a brief review of the literature, key skill or technique being described, application to an actual case, and statement of the range of applicability, benefit and potential costs of the technique. Quality of the presentations as subjectively assessed by the instructor will count for 20% of the course grade.

The student is expected to participate in classroom discussions. Participation as subjectively assessed by the instructor will count for 20% of the course grade.

Extra Credit:

No extra credit is offered for this course.

Grading Scale:

Points earned	93-100	90-92	87-89	83-86	80-82	77-79	73-76	70-72	67-69	63-66	60-62	Below 60
Letter Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E

Final Grades:

Grade	A	A-	B+	B	B-	C+	C	C-	D+	D	D-	E	WF	I	NG	S-U
Points	4.00	3.67	3.33	3.00	2.67	2.33	2.00	1.67	1.33	1.00	0.67	0.00	0.00	0.00	0.00	0.00

We will utilize little technology for this course. However, if problems are encountered, please contact the UF Help Desk for technical support at:

- Learning-support@ufl.edu
- (352) 392-HELP - select option 2
- <https://lss.at.ufl.edu/help.shtml>

Academic Support:

If you feel that you need additional academic support in this class please contact the instructor immediately. Please do not wait until it is too late to ask for assistance (i.e., last day of class or when your grade is very low and may be unrecoverable). Come and discuss issues with your instructor during office hours or by appointment.

Standards of Academic honesty:

It is expected that you will abide by the University of Florida's honesty policy.

Academic Integrity:

Students are expected to act in accordance with the University of Florida policy on academic integrity. As a student at the University of Florida, you have committed yourself to uphold the Honor Code, which includes the following pledge:

“We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.”

You are expected to exhibit behavior consistent with this commitment to the UF academic community, and on all work submitted for credit at the University of Florida, the following pledge is either required or implied:

“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”

It is your individual responsibility to know and comply with all university policies and procedures regarding academic integrity and the Student Honor Code. Violations of the Honor Code at the University of Florida will not be tolerated. Violations will be reported to the Dean of Students Office for consideration of disciplinary action. For additional information regarding Academic Integrity, please see Student Conduct and Honor Code or the Graduate Student Website for additional details:
<https://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>
<http://gradschool.ufl.edu/students/introduction.html>

Please remember that cheating, lying, misrepresentation, or plagiarism in any form is unacceptable and inexcusable behavior.

SUPPORT SERVICES

Accommodations for Students with Disabilities

If you require classroom accommodation because of a disability, you must register with the Dean of Students Office <http://www.dso.ufl.edu> within the first week of class. The Dean of Students Office will provide documentation of accommodations to you, which you must then give to me as the instructor of the course to receive accommodations. Please make sure you provide this letter to me by the end of the second week of the course. The College is committed to providing reasonable accommodations to assist students in their coursework.

Counseling and Student Health

Students sometimes experience stress from academic expectations and/or personal and interpersonal issues that may interfere with their academic performance. If you find yourself facing issues that have the potential to or are already negatively affecting your coursework, you are encouraged to talk with an instructor and/or seek help through University resources available to you.

- The Counseling and Wellness Center 352-392-1575 offers a variety of support services such as psychological assessment and intervention and assistance for math and test anxiety. Visit their web site for more information: <http://www.counseling.ufl.edu>. On line and in person assistance is available.
- You Matter We Care website: <http://www.umatter.ufl.edu/>. If you are feeling overwhelmed or stressed, you can reach out for help through the You Matter We Care website, which is staffed by Dean of Students and Counseling Center personnel.
- The Student Health Care Center at Shands is a satellite clinic of the main Student Health Care Center located on Fletcher Drive on campus. Student Health at Shands offers a variety of clinical services. The clinic is located on the second floor of the Dental Tower in the Health Science Center. For more information, contact the clinic at 392-0627 or check out the web site at: <https://shcc.ufl.edu/>
- Crisis intervention is always available 24/7 from:
Alachua County Crisis Center:
(352) 264-6789
<http://www.alachuacounty.us/DEPTS/CSS/CRISISCENTER/Pages/CrisisCenter.aspx>

Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone so do not be afraid to ask for assistance.

Online Faculty Course Evaluation Process

We often struggle with soliciting high levels of course evaluation completion. Your feedback is very important to us. We use it to guide course development. We read your comments and we take them very seriously. They also are crucial to faculty promotion and tenure. Students are expected to provide feedback on the quality of instruction in every course by completing online evaluations at <https://evaluations.ufl.edu>. Evaluations are typically open during the last two or three weeks of the semester, but students will be given specific times when they are open. Summary results of these assessments are available to students at <https://evaluations.ufl.edu/results/>.

Calendar of Topics and Readings

Day Date	#	Topics to be selected by students	Reading assignment
Tu 5/12	1	Introduction to course	
Tu 5/19	2		
Tu 5/26	3		
Tu 6/2	4		
Tu 6/9	5		
Tu 6/16	6		
Tu 6/23	7		
Tu 6/30	8		
Tu 7/7	9		
Tu 7/14	10		
Tu	11		

7/21		
Tu 7/28	12	
Tu 8/4	13	

The schedule is subject to change. It is your responsibility to stay informed of any changes to the schedule.

IMPORTANT: University of Florida policies and procedures for the completion of course requirements, calculation of course grades, reporting of grades to the Registrar, and effect of different grade assignments on the GPA and eligibility to have awarded a degree are complex and periodically revised. You should ALWAYS be aware of those policies and procedures as you attend classes at UF. You can find those policies and procedures at <http://gradcatalog.ufl.edu/index.php> and in the CHP Student Handbook at <http://chp.php.ufl.edu/academics/doctoral-in-clinical-psychology/student-handbooks/>

Suggested readings from which students may select for presentation:

- Antony, M. M., Craske, M. G., & Barlow, D. H. (1995). *Mastery of Your Specific Phobia*. Oxford University Press.
- American Psychological Association. (2002, August). Guidelines on multicultural education, training, research, practice and organizational change. Approved as Policy by the APA Council of Representative, August, 2002.
- American Psychological Association. (2004). Guidelines for psychological practice with older adults. *American Psychologist*, 59, 236-260. doi: 10.1037/0003-066X.59.4.236
- American Psychological Association. (2007, February). Guidelines psychological practice with girls and women. Approved as Policy by the APA Council of Representative, February, 2007.
- American Psychological Association. (2011). Practice guidelines regarding psychologists' involvement in pharmacological issues, *American Psychologist*, 66, 1-15.
- American Psychological Association. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, 67, 10-42.
- American Psychological Association. (2014, DRAFT). Guidelines for clinical supervision in health service psychology. Draft not yet approved as APA policy – not for circulation.
- Baldwin, K. M., Baldwin, J. R., & Ewald, T. (2005). The relationship among shame, guilt, and self-efficacy. *American journal of psychotherapy*, 60(1), 1-21.
- Barrett, M. S., & Berman, J. S. (2001). Is psychotherapy more effective when therapists disclose information about themselves? *Journal of Consulting and Clinical Psychology*.
- Basson, R. (1996). Sexuality and Parkinson's disease. *Parkinsonism & Related Disorders*, 2(4), 177–185. doi:10.1016/S1353-8020(96)00020-X
- Beck, J. S. (2011). *Cognitive Behavior Therapy, Second Edition*. (S.I.) : Guilford Press.
- Beck, A. T., & Rector, N. A. (2003). A cognitive model of hallucinations. *Cognitive Therapy and Research*. 27, 19-52
- Betan, E., Heim Kegly, A., Ditell Conklin, C., & Westen, D. Countertransference phenomena and personal pathology in clinic practice: An empirical investigation. *American Journal of Psychiatry*, 162, 890-898.
- Bloomgarden, A. and Mennuit, R.B. (eds) (2009). *Psychotherapist Revealed: Therapists speak about self disclosure in psychotherapy*. New York: Routledge.
<http://books.google.com/books?hl=en&lr=&id=zzyy0KnBpHAC&oi=fnd&pg=PA3&dq=therapist+self+disclosure&ots=HwWcSjFp2Q&sig=gNZfMilwPrQpMKxWV7n2eAkauhY#v=onepage&q=therapist%20self%20disclosure&f=false>

- Borkovec, T. D., Newman, M. G., Pincus, A. L., & Lytle, R. (2002). A component analysis of cognitive-behavioral therapy for generalized anxiety disorder and the role of interpersonal problems. *Journal of Consulting and Clinical Psychology, 70*(2), 288.
- Campbell, L. F., Norcross, J.C., Vasquez, M.J.T., & Kaslow N.J. (2013). Recognition of psychotherapy effectiveness: The APA Resolution. *Psychotherapy, 50*, 98-101.
- Carta, M. G., Hardoy, M. C., Carpiniello, B., Murru, A., Marci, A. R., Carbone, F., ... & Mariotti, S. (2005). A case control study on psychiatric disorders in Hashimoto disease and Euthyroid Goitre: not only depressive but also anxiety disorders are associated with thyroid autoimmunity. *Clinical Practice and Epidemiology in Mental Health, 1*(1), 23
- Chadwick, P. D. J., & Lowe, C. F. (1990). Measurement and modification of delusional beliefs. *Journal of Consulting and Clinical Psychology, 58*(2), 225-232.
- Chaudhury, S. (2010). Hallucinations: Clinical aspects and management. *Industrial Psychiatry Journal, 19*(1), 5. doi:10.4103/0972-6748.77625
- Christensen, A., Atkins, D.C., Baucom, B., & Yi, J. (2010). Marital status and satisfaction five years following a randomized clinical trial comparing traditional versus integrative behavioral couple therapy. *Journal of Consulting and Clinical Psychology, 78*, 225-235. doi: 10.1037/a0018132
- Christensen, A., Wheeler, J. G., & Jacobson, N. S. (2007). Couple Distress. In Barlow, D. H. (2007). *Clinical Handbook of Psychological Disorders, Fourth Edition* (662-689). Guilford Press.
- Cimmarusti, R. A. (1996). EXPLORING ASPECTS OF FILIPINO-AMERICAN FAMILIES. *Journal of Marital and Family Therapy, 22*(2), 205-217.
- Clark, D. M. (1999). Anxiety disorders: Why they persist and how to treat them. *Behaviour research and therapy, 37*, S5-S27.
- Clark, P., Cole, C., & Robertson, J. M. (2013). Creating a safety net: Transferring to a new therapist in a training setting. *Contemporary Family Therapy*. doi: 10.1007/s10591-013-9282-2
- Cloitre, M., Miranda, R., Stovall-McClough, K.C., & Han, H. (2005). Beyond PTSD: Emotion regulation and interpersonal problems as predictors of functional impairment in survivors of childhood abuse. *Behavior Therapy, 36*, 119-124.
- Cloitre, M., Stovall-McClough, K.C., Miranda, R., & Chemtob, C.M. (2004). Therapeutic alliance, negative mood regulation, and treatment outcome in child abuse-related posttraumatic stress disorder. *Journal of Consulting and Clinical Psychology, 72*, 411-416. DOI: 10.1037/0022-006X.72.3.411.
- Cox, M. (1974). The psychotherapist's anxiety: Liability or asset? With special reference to the offender-patient. *The British Journal of Criminology, 14*, 1-17.
- Crowe, M., & Luty, S. (2005). The process of change in Interpersonal Psychotherapy (IPT) for depression: a case study for the new IPT therapist. *Psychiatry: Interpersonal & Biological Processes, 68*(1), 43-54
- Cuijpers, P., Driessen, E., Hollon, S. D., van Oppen, P., Barth, J., & Andersson, G. (2012). The efficacy of non-directive supportive therapy for adult depression: a meta-analysis. *Clinical psychology review, 32*(4), 280-291.
- Dahl, J., Wilson, K.G., Luciano, C. , & Hayes, S.C. (2005). The therapeutic relationship in ACT. In: J. Dahl, K.G. Wilson, C. Luciano, & S.C. Hayes (Eds.), *Acceptance and Commitment Therapy for Chronic Pain* (pp. 75-90). Reno, NV: Context Press
- D'Ardenne, P. (2004). The couple sharing long-term illness. *Sexual and Relationship Therapy, 19*(3), 291-308. doi:10.1080/14681990410001715427
- Davis, L. (1990). *The courage to heal workbook: A guide for women and men survivors of childhood sexual abuse*. New York, NY: HarperCollins Publishers.
- Davison, G.C. (2001). Conceptual and ethical issues in therapy for the psychological problems of gay men, lesbians and bisexuals. *Psychotherapy in Practice, 57*, 695-704.

- Dolhanty, J., & Greenberg, L. S. (2009). Emotion-focused therapy in a case of anorexia nervosa. *Clinical Psychology and Psychotherapy*, 16, 366-382.
- Elliot, A.N., & Carnes, C.N. (2001). Reactions of nonoffending parents to the sexual abuse of their child: A review of the literature. *Child Maltreatment*, 6, 314-331
- Engle, D.E. & Arkowitz, H. (2006). *Ambivalence in psychotherapy*. New York: Guilford.
- Eriksen, H.F., Gunnarsen, K.F., Sorensen, J.A., Munk, T., Nielsen, T. & Knudsen, U.B. (2008). Psychological aspects of endometriosis: Differences between patients with or without pain on four psychological variables. *European Journal of Obstetrics & Gynecology and Reproductive Biology*, 239, 100-105. DOI: 10.1016/j.ejogrb.2007.10.002
- Fairburn, C. G., Cooper, Z., & Shafran, R. (2003). Cognitive behaviour therapy for eating disorders: A “transdiagnostic” theory and treatment. *Behaviour research and therapy*, 41(5), 509-528.
- Falender, C.A., Cornish, J. A. Erickson, Goodyear, R. Hatcher, R., Kaslow, N. J., Leventhal, G., Shafranske, E. Sigmon, S.T., Stoltenberg, C. & Grus, C. (2004). Defining competencies in psychotherapy supervision: A consensus statement. *Journal of Clinical Psychology*, 60, 771-785.
- Falender, C.A. & Shafranske, E.P. (2004). What makes for good supervision? In *Clinical Supervision: A Competency-based approach*. Washington DC: American Psychological Association, p 37 – 58.
- Fauth, J., Gates, S., Vinca, M.A., Boles, S., & Hayes, J.A. (2007). Big ideas for psychotherapy training. *Psychotherapy: Theory, Research, Training*, 44, 384-391.
- Fava, G. A., & Tomba, E. (2009). Increasing psychological well-being and resilience by psychotherapeutic methods. *Journal of Personality*, 77(6): 1903-1934.
- Finset, A., & Piccolo, L. (2011). Nonverbal Communication in Clinical Contexts. In M. Rimondini (Ed.), *Communication in Cognitive Behavioral Therapy* (pp. 107-128): Springer New York.
- Fleming, G. & Gilliland, S. (1998). A comparison of spousal anticipatory grief and conventional grief. *Death studies*, 22(6), 541-569.
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- Hayes, J.A., Gelso, C.J. & Hummel, A.M. (2011). Managing countertransference. *Psychotherapy*, 48, 88-97 doi: 10.1037/a0022182
- Hayes, S. C., & Smith, S. (2005). *Get out of your mind and into your life: The new acceptance and commitment therapy*. Oakland, CA: New Harbinger Publications.
- Hayes, S. C., Strosahl, K., & Wilson, K. G. (1999). *Acceptance and Commitment Therapy: An experiential approach to behavior change*. New York: Guilford Press.
- Hayes, S.C., Strosahl, K., Wilson, K.G., Bissett, R.T., Pistorello, J., Toarmino, D., ... Polusny, M.A. (2004). Measuring experiential avoidance: A preliminary test of a working model. *The Psychological Record*, 54, 553-578.
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- Hilsenroth, M. J. (2012). Special Issue: Psychodynamic Psychotherapy. [Special issue]. *Psychotherapy* 49, (3).
- Hilsenroth, M. J. (2013). Introduction to the 50th Anniversary Special Issue on Psychology Therapy Outcome: A return to the beginning [Special issue]. *Psychotherapy*, 50, 1-2.
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- Kopp, S.B. (1972). *If You Meet the Buddha on the Road, Kill Him!* New York: Bantam.
- Kazdin, A.E. (2007). Mediators and mechanisms of change in psychotherapy. *Annual Review of Clinical Psych*, 3, 1-27.
- Kazdin, A. E. (2008). Evidence-based treatment and practice: New opportunities to bridge clinical research and practice, enhance the knowledge base, and improve patient care. *American Psychologist*, 63, 146-159. doi: 10.1037/0003-066X.63.3.146
- Keuthen, N.J., Rothbaum, B.O., Welch, S.S., Taylor, C., Falkenstein, M., Heekin, M. ... & Jenike, M.A. (2010). Pilot trial of dialectical behavior therapy-enhanced habit reversal for trichotillomania. *Depression and Anxiety*, 27, 953-959.
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- Knox, A and Hill, C . E. (2003). Therapist self disclosure: Research-based suggestions for practitioners. *J Clin Psychology*, 59, 529-539
- Kraft, Heidi S. (2007). *Rule Number Two: Lessons I Learned in a Combat Hospital*. New York: Little, Brown and Co.
- Ladany, N., Hill, C. E., Thompson, B. J., & O'Brien, K. M. (2004). Therapist perspectives on using silence in therapy: A qualitative study. *Counseling and Psychotherapy Research*, 4(1), 80-89.
- LaFrance, W. C. & Barry, J.J. (2005). Update on treatments of psychological nonepileptic seizures. *Epilepsy & Behavior*. 7, 364-374.
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- Mufson, L., Dorta, K. P., Moreau, D., & Weissman, M. M. (2011). *Interpersonal psychotherapy for depressed adolescents*. Guilford Press.
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