

**PONCE HEALTH SCIENCES UNIVERSITY
CLINICAL PSYCHOLOGY PSY.D. PROGRAM**

SYLLABUS

COURSE TITLE	Short-term Psychotherapy
CODING	PSY 667
CREDIT HOURS	2 credits
CONTACT HOURS	30
PREREQUISITE	None
PROFESSOR	Job Description: Intervention - Psychotherapy
TEACHING ASSISTANT	
OFFICE HOURS	
EMAIL ADDRESS	
SEMESTER	

COURSE DESCRIPTION

Short-term psychotherapy (brief psychotherapy, time-limited psychotherapy) is focused from a variety of philosophical perspectives, but all share the emphasis on the practicality of rapid conflict resolution. During the course, we will include several of these approaches to short term psychotherapy in the belief that an effective psychotherapy must have two components. First, the therapist must be knowledgeable and skilled in the techniques. Second, the therapist must have a varied armamentarium, so as to match the approach to the patient's specific needs.

GENERAL OBJECTIVES:

Upon completion of this course, the student will become familiar with the theoretical concepts, rationale and techniques or strategies that apply to the presented approaches. The student will also develop a general understanding of the psychotherapies in order to match the best approach to the patients' needs and sociocultural background using evidence based practices as a foundation.

SPECIFIC OBJECTIVES

By the end of the course the student will understand and will be ready to apply the theoretical concepts, rationale and techniques of the following approaches:

- Short term Dynamic Psychotherapy
- Narrative Therapy
- Solution Focused Psychotherapy

COURSE OUTLINE

Unit I

Course Introduction,

1. Presentation of the syllabus and discussion of objectives of the course.
2. Introduction to Psychotherapy: Defining Psychotherapy and its goals
3. Implicit and Explicit factors operating in different methods of psychotherapy
4. Introduction to Short Term Dynamic Psychotherapy STDP
5. Description of the Case Study Report to be presented by the end of the course, based upon Short Term Dynamic Psychotherapy (STDP).

Unit II

Assessment and Basic Concepts on Short-term psychotherapy

1. Dynamic Assessment in STDP
 - a. Ego Organization (structure), Character Style, Adaptive Levels
2. Brief History and basic assumptions of STDP – L. Bellak approach
3. Brief and Emergency Psychotherapy
 - a. Crisis Intervention with Psychotic Patients

Unit III

Short-term and Emergency Psychotherapy, Leopold Bellak approach

1. Theory and premises of the model
2. First and second Sessions of STEP

Unit IV

Short-term and Emergency Psychotherapy, Leopold Bellak approach

1. The progression of therapy sessions with STEP
2. STEP Techniques for the treatment of depression, anxiety and psychotic disorders

Unit V

Narrative Therapy

1. Philosophical Foundation
2. Effects of dominant stories
3. Externalizing Conversations
4. Deconstruction
5. The cultural context

Unit VI

Narrative Therapy

6. Unique outcomes
7. Thick and rich descriptions: Alternative stories
8. Thickening alternative stories
9. Social Justice and narrative therapy

Unit VII

1. Video demonstration of Narrative therapy
2. Case discussion – Narrative Therapy

Unit VIII

Solution Focused Brief Therapy

1. Background history and philosophy
2. Main techniques
3. Practical applications

Unit IX

Solution Focused Brief Therapy

1. On becoming a solution oriented therapist
2. Practice Exercises

Unit X

Summary and Integration

STUDENT'S EVALUATION CRITERIA AND GRADING SYSTEM:

1. Written case summary of a patient seen and treated with STDP. Three sessions will be summarized, a case conceptualization will be formulated and a treatment plan will be designed for the patient. Summary and results component will be included. Relevant literature will be presented to support the model to be used and to provide a foundation for the conceptualization and treatment strategies selected and implemented. Details of the case summary format will be provided as a guide = 50 points
2. Group oral and written presentation on Narrative Therapy video evaluation = 25 points
3. Dyad Presentation on Solution Oriented Therapy = 25 points

TEACHING STRATEGIES AND ACTIVITIES

1. Lectures
2. Small group discussions
3. Dyad presentations
4. Role playing
5. Audiovisual resources
6. Case discussion

RESOURCES

1. Audiovisual aids
2. Assigned readings
3. Vignettes

OTHER IMPORTANT INFORMATION

Diversity Statement

Diversity relates to the acknowledgement of the human condition in all manifestations; its similarities and differences. Diversity seeks to understand different biopsychosocial experiences. It strives towards the human values of equality, respect, and acceptance, within a multicultural world whose boundaries have been overshadowed by technology and globalization. Diversity is the antithesis to oppression in all its manifestations (e.g. sexism, racism, exploitation) and to discrimination in any form, including discrimination due to sexual orientation, physical (dis) Abilities, socioeconomic status, worldviews, places of origin, cultural orientation, primary language, or to any other human characteristic, preference or state.

The notion of diversity is central to the study of human behavior. It requires the development of self-awareness of prejudiced attitudes. It includes understanding of differences in worldviews associated to the psycho-cultural and psycho-economic background of recipients of psychological services. Our training program promotes the awareness of subtle and “invisible” prejudice (e.g. homophobia) acquired during formative years.

Request for Reasonable Accommodations

Students in need of accommodation based on the impact of a disability should contact the professor privately to discuss the specific need. Students with documented disabilities should contact the Academic Deanship Office to coordinate reasonable accommodations.

Attendance Policy

After three absences for a 3 credit course, or 2 absences for a 2 credit course, the student will automatically be dropped from the class unless the professor recommends otherwise. The complete institutional attendance policy is included in the Appendix.

Honor Code Reminder

Any violation of the ethical dispositions of our institution or program will be automatically referred to the corresponding authorities. For the present course, plagiarism may lead to obtaining a grade of “0” on the plagiarized work and this would most probably lead to a failing grade in the course. Students found to violate this policy may be referred to the institutional Promotions Committee with a recommendation of dismissal from the program. The complete plagiarism policy is included in the Appendix.

Note

This syllabus is a guide and is subject to change according to circumstances that may arise during the semester. Students are responsible for all announced changes in the syllabus.

REFERENCE TEXTBOOKS

Bellak, L. (1983). *Brief and emergency psychotherapy*. New York : CPS Inc

Morgan, A. (2000) What is narrative therapy?

O'Hanlon B., & Beadle, S. (1997). *Guide to possibility land*. New York: Norton & Co.

Shapiro, D. (1999) *Neurotic Styles* New York: Basic Books.

BIBLIOGRAPHY

Book, H. (1998). *How to Practice Brief Psychodynamic Psychotherapy: The Core Conflictual Relationship Theme*. American Psychological Association: Washington, DC

Cade, B. & O'Hanlon, W. (1993) *A brief guide to brief therapy*. New York; WW Norton

Cepeda, L.M.; Davenport, D.S. (2006) Person-centered therapy and solution focused brief therapy: an integration of present and future awareness. *Psychology: Theory, Research and Practice*, 43, 1-12.

Coren, A. (2003). *Psicoterapia a Corto Plazo: Un Enfoque Psicodinámico*. El Manual Moderno: Ciudad de Mexico, Distrito Federal.

De Roten, Y., Drapeau, M., & Michel, L. (2008). Are there positive emotions in short-term dynamic psychotherapy or is it all Freude-less?. *Journal of Psychotherapy Integration*, 18(2), 207-221.

<http://www.dulwichcenter.com/>

<http://narrativetherapyonline.com/moodle/course/view.php?id=16>

Kim, J.S. (2007). Examining the effectiveness of solution-focused brief therapy: a meta-analysis. *Research on Social Work Practice*, 18, 107 – 116.

Levenson, H. (2003). Time-limited dynamic psychotherapy: an integrationist perspective. *Journal of Psychotherapy Integration*, 13, 300 – 333.

Levenson, H. (1995). *Time-Limited Psychotherapy: A Guide to Clinical Practice*. Basic Books: New York.

Lipchik, E. (2002). *Beyond Technique in Solution-Focused Therapy*. The Guilford Press: New York, London.

Magnavita, J. J., & Carlson, T. M. (2003). Short-term restructuring psychotherapy: An integrative model for the personality disorders. *Journal Of Psychotherapy Integration*, 13(3), 264-299.

Nelson, T.S.; Thomas, F.N. (2007). *Handbook of Solution-Focused Brief Therapy: Clinical Applications*. The Haworth Press Inc: New York, London

O'Hanlon, B. (1999) *Do one thing different*. New York: Harper Collins.

Sandler, S. (2007). The reunion process: A new focus in short-term dynamic psychotherapy. *Psychotherapy: Theory, Research, Practice, Training*, 44(2), 121-136.

Skodol, A.E.; Bleiberg, K. (2006). Interpersonal psychotherapy for borderline personality disorder: possible mechanisms of change. *Journal of Clinical Psychology*, 62, 431 – 444.

Stuart, S.; Robertson, M. (2003). *Interpersonal Psychotherapy: A Clinician's Guide*. Hodder Arnold: London

Shazer, S.; Dolan, I.; Korman, H.; Trepper, T.; McCollum, E.; Berg, I.K. (2007). *More than Miracles: the State of the Art Solution-Focused Brief Therapy*. Routledge Taylor and Francis Group: New York, London.

Tishler, C., Gordon, L., & Landry, L. (2000). Managing the Violent Patient: A Guide for Psychologists and Other Mental Health Professionals. *Professional Psychology: Research and Practice*. Washington: American Psychological Association.

Weissman, M.; Markowitz, J.C.; Klerman, G. (2000). *Comprehensive Guide to Interpersonal Psychotherapy*. Basic Books: New York

APPENDIX

INSTITUTIONAL ATTENDANCE POLICY

Attendance at lectures and laboratory exercises is mandatory unless excused because of illness or by previous authorization of the professor in charge of the course. Each department will decide the relative weight to be given to the attendance in calculating the final grade.

Attendance to clinical activities involving patients, patient models, and similar types of activities is considered part of the students' professional responsibility and is mandatory. Absence may be excused after the student consults with the respective department chairperson. Three unexcused absences may adversely affect the final grade for a course.

Incomplete work due to illness or other serious circumstances during the course will be handled according to departmental policies, which must be provided to the students in writing at the beginning of each term. Faculty are not obligated to repeat lecture/laboratory topics that were presented at scheduled times and dates.

PROGRAM POLICY ON ACADEMIC HONESTY AND PLAGIARISM

There are different ways in which a student may incur in one of the various forms of academic dishonesty. Lack of knowledge does not justify academic dishonesty as common sense usually helps to prevent potentially problematic situations. In case of doubt, the standards of academic honesty call for the student to ask the professor or advisor. The most frequent form of academic dishonesty is plagiarism. According to the Random House Webster's college Dictionary plagiarism is: *"the unauthorized use of the language and thoughts of another author and the representation of them as one's own. 2. something used and represented in this manner"*.

Our faculty recognizes that plagiarism in any of its forms and/or manifestation is a serious offense both in the academic and the professional world. Some of the acts that constitute plagiarism are:

- a. Using words or thoughts of authors without giving due credit.
- b. Presenting work done for one course to fulfill the requirements of another course (self-plagiarism).
- c. Taking credit for phrases or ideas of other authors to produce a collage of ideas that have not been created by the student.
- d. Not using quotation marks to identify the exact words of an author.
- e. Taking information from Internet without citing the source.
- f. Buying papers from the Internet or from other sources.
- g. Using another student's paper or clinical report to satisfy course requirements.

Each professor will evaluate alleged cases of academic dishonesty and will proceed to deal with each case according to institutional policies and procedures.