

Principles and Techniques of Psychotherapy
Spring 2022

PSY 67000-001
CRN 18505
3 credit hours

Instructor: Kelly L. LeMaire, Ph.D., HSPP

Course time: Wednesdays 1:30-4:20pm

Location: PSYC 3102

Office Hours: By appointment (please feel free to schedule with me as needed—truly happy to meet!)

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Course Descriptions and Goals

Principles and Techniques of Psychotherapy is designed to provide an intensive didactic grounding in the psychological treatment of distress and disordered behavior. The course will present major approaches and techniques that can manage and ameliorate such conditions, and help students appreciate how to identify, apply, and evaluate such interventions. As such, this course provides an overview of evidence-based practice (EBP) in clinical psychology, and surveys the theoretical and applied aspects of various evidence-based, cognitive-behavioral intervention treatments and approaches. These therapies will include but are not limited to traditional Cognitive Behavior Therapy (CBT), the Unified Protocol (UP), Motivational Interviewing (MI), Behavioral Activation (BA), Acceptance and Commitment Therapy (ACT), Dialectical Behavior Therapy (DBT), and Exposure and Response Prevention (ERP).

This course is designed to complement other courses offered in the clinical psychology PhD program (e.g., Assessment Practicum, Adult Services Practicum). Thus, the focus is on treatment for adults, though EBP and many of the treatments covered in this course have applications for youth and families. This course is oriented toward preparing students for eventual supervised clinical practicum experience.

Learning Outcomes and Core Competencies

Overall course objectives are that students will demonstrate knowledge of:

1. major orientations to psychotherapeutic practice, including their histories and underlying principles;
2. current primary evidence-based psychotherapeutic techniques for common complaints;
3. empirical evaluation of psychotherapeutic interventions, as well as research findings about the effectiveness and efficacy of major approaches and specific techniques;
4. how to organize case material efficiently and appropriately for treatment planning;
5. selection and application of basic appropriate interviewing and psychotherapeutic interventions given case material; and,
6. key legal, liability, and practical issues associated with providing psychotherapy services.

Statement about Course Content

As a clinical psychologist, you will be faced with patients who have maladaptive emotional, cognitive, and behavioral patterns that interfere with their lives. Thus, in this class, students will

discuss a variety of clinical issues relating to the typical and unusual functioning of the adults, adolescents, and children they will see in professional training settings.

Some topics are sensitive and may be unpleasant as they relate to homicidal and suicidal thoughts, anger and aggression, homelessness, poverty, mental illness, love and attachment, dating and intimate relationships, sexuality and sexual behaviors, religious beliefs, delusions, and so forth. ***During role plays, you will be asked to play the role of patients with a variety of clinical concerns such as these, and/or to interview others who present with these kinds of concerns.*** It is noteworthy that clinical psychologists often carry out research or work with persons who regularly use profanity, have poor personal hygiene, use drugs and alcohol, carry weapons, possess a variety of prejudiced / misogynistic / misanthropic beliefs, and engage in various kinds of aggression, including intimate partner violence. Therefore, an important goal of this class is to introduce you to these topics and concerns.

Evaluation

There are four different types of assignments that will influence student's grades in the course. They are detailed below. Participation will not be directly scored, but effective and consistent participation, including demonstration of completing the readings will be considered throughout the course.

1) Home practice and reflections (up to 50 points): Many of the evidence-based interventions we will discuss in class require clients to complete home practice assignments in between sessions. Engaging in these home practice assignments yourself will help you to better understand the value of these intervention components. Five times throughout the semester you will be given a clinical home practice assignment relevant to that week's readings (e.g., self-monitoring, behavioral activation, etc.) The more completely and honestly you engage with these exercises, the more you will get out of them as a clinician in training.

Students will be expected to complete all take-home assignments before the designated class period and come to class prepared to discuss these assignments. As much as possible, you should read early in the week (with each week leading up to a class period) to allow ample time/days to experience the exercise before we discuss it in class. To encourage your openness with these exercises, we will not focus on the personal content of these assignments (e.g., your negative automatic thoughts), but rather on your experiences and learning. As you do these assignments, keep the following in mind, and jot down some reflections along with the exercise. Please reflect on the following questions:

- What did you find helpful about the exercise/intervention? What did you like?
- What did you find challenging about this exercise/intervention? What didn't you like?
- How did the practice influence your future clinical practice?

You will share your exercises as well as an integrative reflection papers (~.5 page/200-300 words single spaced) with me on Purdue Box in a shared folder. The reflection should include responses to the three questions above (although those don't have to be in equal length), along with any other reflections you might have regarding the exercise.

Bring your exercises and reflections to each class period for discussion (either electronically on your laptop or a hard copy—whatever works better for you). If there is any personal information that you do not wish for me to see, feel free delete it or black it out in the Box file. There will be 6 homework assignments—you will receive 5 points for each completed exercise (3 points for completion and up to 2 more points for quality) and 5 points for each completed reflection (3 point for completion and up to 2 more points for quality).

2) Case conceptualization and treatment plan (up to 50 points): Students will be given a clinical vignette and write a case conceptualization and treatment plan for “your client.” The paper should include a rationale for treatment selection to address identified concerns, a very brief overview of relevant references, clearly specified goals and objectives for each concern, and an outline of proposed activities and materials by session. Students may choose to utilize a single manualized treatment (e.g. Prolonged Exposure for PTSD), principle-based treatment (e.g. ACT), or a customized treatment plan consisting of various evidence-based treatment elements (e.g. distress tolerance skills, exposure, and mindfulness techniques). All papers should detail 3-4 different interventions you would utilize to treat your “client” and how they would apply to their presenting concern. This does not mean 3-4 different full treatments or protocols (e.g. DBT, BA, traditional CBT, and MI), rather, 3-4 different skills or elements of treatments. For example, if you choose exposure therapy, you might detail in vivo, interoceptive, and imaginal exposure as well as grounding skills (4 total interventions). If you choose ACT, you might detail how values clarification, committed action, defusion, and mindfulness would apply to the client. The paper should be between 4-6 pages double spaced and in APA format.

Because some students in the class will be given the same vignette, it is essential to uphold values of academic integrity. This means that you should not consult with other students who have your same case. There will be more than one appropriate treatment plan possible for each vignette.

3) Intervention role plays (up to 50 points): Four times during the semester, students will be paired with another student to role play (twice role playing the client and twice role playing the clinician) evidence-based strategies that have been presented in class. Students will video-record these role-plays to present in class and/or to turn in as homework. Presentations will last 20-25 minutes and will include:

- a. A brief introduction to the client’s presenting difficulty (≤ 5 minutes)
- b. An introduction of the evidence-based technique the therapist will demonstrate including a rationale given the presenting concern (presented to the client in the video)
- c. Role play of the intervention being enacted

You are responsible for ensuring adequate audio/video quality; if the class is unable to see/hear the session you will not receive credit. In general, your vignettes should include the rationale for the interventions presented to the client in terms and language that he/she/they/ze can understand and the identified intervention component. Consider also preparing some brief orientating remarks to the class so that they can understand the focus of each intervention component and what therapy elements may precede and/or follow the technique that you demonstrate. I expect that the assigned readings will be a starting point in preparing your presentation, but that you

may need to acquire additional materials (e.g., treatment manuals, papers elaborating on the treatment methods) to generate an accurate and realistic depiction of the intervention. Please feel free to consult me about additional materials if that would be helpful.

Although you should model your vignettes after published sources, it is important that you create original dialogue rather than copying already existing therapy vignettes. Along these lines, **please do not read a script**. This is an opportunity for me to be able to evaluate your therapy skills, so the closer to real life the vignette is, the better.

Each student will engage in 4 role plays, twice as the therapist and twice as the client. Students can earn up to 20 points for each therapist role play (for a total of 40 points) and up to 5 points for each client role play (for a total of 10 points).

4) Final presentations (up to 50 points): Students will present a treatment for a particular disorder or class of disordered behaviors. Students will present a particular treatment and its applicability to particular difficulties/disorders to the class. The presentation should include: 1) a description of criteria and/or key features of the disorder/class of behaviors, 2) a description of the key components of the treatment, 3) an explanation of how the various treatment elements apply to the identified disorder/difficulty/class of behaviors, 4) indicators and contraindicators of using the approach, 5) a critical and thoughtful discussion of empirical support for the utility of the approach, and 6) a demonstration of at least one treatment element. Students may choose to demonstrate the treatment element(s) in a live or recorded role play or using a video of an expert clinician. Presentations will take place on the last two class periods of the semester and should take about 40 minutes (give or take 5 minutes) including time for questions.

Final Grads and Corresponding Points Earned

A	200-186	C+	159-154
A-	185-180	C	153-146
B+	179-174	C-	145-140
B	173-166	D	139-120
B-	165-160	F	≤ 119

Class Policies

Attendance and Absence Policy

Attendance is key. You are required to come to class each week and actively participate. Participation means that you are actively asking questions, sharing feedback and insights, engaging in the material, etc. Effective participation also means that you are being mindful of your fellow students and allowing them time and space to participate as well.

Students are responsible for all material from class lectures and discussions, as well as material in the assigned readings. Students should complete assigned readings prior to class and be prepared to actively participate in discussions. Students who miss class should meet with a classmate to get a copy of any notes missed.

When you cannot attend you must contact me in advance so we can plan for your absence. As weekly participation is essential to your learning, if you miss a class, you may be asked to

complete outside work to demonstrate your efforts and understanding of the topics we reviewed in class. This may include but is not limited to reading, reflection papers, deliberate skills practice, or other assignments. Missing more than 2 class periods per semester (attending less than 85% of classes) is cause for concern and may affect student's progress and development. If this is the case, the student should meet with me to discuss the impact of the absences as well as ways to find ways to reduce absences and/or make-up for missed work.

Personal Psychological Concerns

I hope that this course will provide you with valuable *academic and professional* knowledge of psychological difficulties that may help you in your future careers in the health profession. This course is not intended to replace personal psychotherapy when needed or desired, or teach you how to solve your own or someone else's (who is not your client) psychological difficulties. If you are experiencing a concern, please call the Counseling and Psychological Services (CAPS) (494-6995) or another health care provider that you trust.

If you find yourself beginning to feel some stress, anxiety and/or feeling slightly overwhelmed, try [WellTrack](#). Sign in and find information and tools at your fingertips, available to you at any time.

If you need support and information about options and resources, please contact or see the [Office of the Dean of Students](#). Call 765-494-1747. Hours of operation are M-F, 8 am- 5 pm.

If you find yourself struggling to find a healthy balance between academics, social life, stress, etc. sign up for free one-on-one virtual or in-person sessions with a [Purdue Wellness Coach at RecWell](#). Student coaches can help you navigate through barriers and challenges toward your goals throughout the semester. Sign up is completely free and can be done on BoilerConnect. If you have any questions, please contact Purdue Wellness at evans240@purdue.edu.

If you're struggling and need mental health services: Purdue University is committed to advancing the mental health and well-being of its students. If you or someone you know is feeling overwhelmed, depressed, and/or in need of mental health support, services are available. For help, such individuals should contact [Counseling and Psychological Services \(CAPS\)](#) at 765-494-6995 during and after hours, on weekends and holidays, or by going to the CAPS office of the second floor of the Purdue University Student Health Center (PUSH) during business hours.

Safety

In order for this group to function well and meet the needs of each student, a sense of physical and psychological safety must be created and maintained. It is imperative that each student feel respected and supported by the other members. This is ALL of our responsibility. Please keep this in mind when participating. Because vulnerability is encouraged (because you really cannot learn if you are not willing to share and put yourself out there), it is also encouraged that we support our fellow group members. This includes giving feedback that highlights what went well as well as areas for growth and development in ways that is appropriate and constructive rather

than “simply critical.”

In the event of a major campus emergency, course requirements, deadlines, and grading percentages are subject to changes in consideration of a revised semester calendar or other circumstances. All changes will be communicated directly to students by the instructor in class and/or via email.

University Policies

Academic Integrity

“Academic integrity is one of the highest values that Purdue University holds. Individuals are encouraged to alert university officials to potential breaches of this value by either emailing integrity@purdue.edu or by calling 765-494-8778. While information may be submitted anonymously, the more information that is submitted provides the greatest opportunity for the university to investigate the concern.”

Respect for Individuals

Purdue University is committed to maintaining a community which recognizes and values the inherent worth and dignity of every person; fosters tolerance, sensitivity, understanding, and mutual respect among its members; and encourages each individual to strive to reach his or her own potential. In pursuit of its goal of academic excellence, the University seeks to develop and nurture diversity. The University believes that diversity among its many members strengthens the institution, stimulates creativity, promotes the exchange of ideas, and enriches campus life.

Purdue’s nondiscrimination policy can be found at:

http://www.purdue.edu/purdue/ea_eou_statement.html.

Students with Disabilities

Purdue University is required to respond to the needs of the students with disabilities as outlined in both the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 through the provision of auxiliary aids and services that allow a student with a disability to fully access and participate in the programs, services, and activities at Purdue University.

Purdue University strives to make learning experiences as accessible as possible. If you anticipate or experience physical or academic barriers based on disability, you are welcome to let me know so that we can discuss options. You are also encouraged to contact the Disability Resource Center at: drc@purdue.edu or by phone: 765-494-1247.

<http://www.purdue.edu/drc/faculty/syllabus.html> It is important to note that adjustments will be most effective if made at the beginning of the semester, so please speak with me as soon as possible. Adjustments cannot be made retroactively.

Violent Behavior Policy

Below is Purdue's policy prohibiting violent behavior. See the following website for additional information: http://www.purdue.edu/policies/pages/facilities_lands/i_2_3.shtml

“Purdue University is committed to providing a safe and secure campus environment for members of the university community. Purdue strives to create an educational environment for students and a work environment for employees that promote educational and career goals.

Violent Behavior impedes such goals. Therefore, Violent Behavior is prohibited in or on any University Facility or while participating in any university activity.”

Nondiscrimination:

Purdue University is committed to maintaining a community which recognizes and values the inherent worth and dignity of every person; fosters tolerance, sensitivity, understanding, and mutual respect among its members; and encourages each individual to strive to reach his or her own potential. In pursuit of its goal of academic excellence, the University seeks to develop and nurture diversity. The University believes that diversity among its many members strengthens the institution, stimulates creativity, promotes the exchange of ideas, and enriches campus life.

Purdue University prohibits discrimination against any member of the University community on the basis of race, religion, color, sex, age, national origin or ancestry, genetic information, marital status, parental status, sexual orientation, gender identity and expression, disability, or status as a veteran. The University will conduct its programs, services and activities consistent with applicable federal, state and local laws, regulations and orders and in conformance with the procedures and limitations as set forth in Executive Memorandum No. D-1, which provides specific contractual rights and remedies. Any student who believes they have been discriminated against may visit www.purdue.edu/report-hate to submit a complaint to the Office of Institutional Equity. Information may be reported anonymously.

Protect Purdue Plan

The [Protect Purdue Plan](#) protocols continue to evolve. Please refer to updated policies in Brightspace throughout the semester. Please also communicate with your instructor as soon as possible regarding absences so we can ensure to our best abilities that you are able to get all needed class material.

Any student who has substantial reason to believe that another person in a campus room (e.g., classroom) is threatening the safety of others by not complying (e.g., not wearing a mask) may leave the room without consequence. The student is encouraged to report the behavior to and discuss next steps with their instructor. Students also have the option of reporting the behavior to the [Office of the Student Rights and Responsibilities](#). See also [Purdue University Bill of Student Rights](#).

Basic Needs

Any student who faces challenges securing their food or housing and believes this may affect their performance in the course is urged to contact the Dean of Students for support. There is no appointment needed and Student Support Services is available to serve students 8 a.m.-5 p.m. Monday through Friday. Considering the significant disruptions caused by the current global crisis as it related to COVID-19, students may submit requests for emergency assistance from the [Critical Needs Fund](#)

Online Resources

This course does not utilize Brightspace. Instead, we will use the Purdue Box system (HIPPA compliant). Each student has a personalized folder to upload assignments, presentations, and

video files. Additionally, there will also be a shared folder in which I will upload some assignments and shared documents including readings.

Required Texts

- 1) Beck, J. S. (2011). *Cognitive therapy: basics and beyond*. New York: Guilford Press.
- 2) Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (2011). *Acceptance and commitment therapy: The process and practice of mindful change*. Guilford Press
- 3) Leahy, R. L., Holland, S. J., & McGinn, L. K. (2011). *Treatment plans and interventions for depression and anxiety disorders*. Guilford press.
- 4) Sommers-Flanagan, J., & Sommers-Flanagan, R. (2017). *Clinical Interviewing, with Video Resource Center, 6th Edition*. John Wiley & Sons.

The following reading list is subject to changes. Additional readings may be added and topics may shift weeks depending on the needs of the class. Unless stated otherwise, assignments are due at the beginning of class.

Date	Readings	Assignments Due
1/12 Intro to the class, EBP, professional standards and practice	APA Presidential Task Force on Evidence-Based Practice (2006). Evidence-based practice in psychology. <i>American Psychologist</i> , 61, 271-285. [Don't miss the appendix!] APA (2017). Ethical Principles and Code of Conduct with 2010 & 2016 amendments. Retrieved from http://www.apa.org/ethics/code/ethics-code-2017.pdf (esp Standards 2,4,6,10) APA. (2017). Multicultural guidelines: An ecological approach to context, identity, and intersectionality. Retrieved from: http://www.apa.org/about/policy/multicultural-guidelines.pdf Laska, K. M., Gurman, A. S., & Wampold, B. E. (2014). Expanding the lens of evidence-based practice in psychotherapy: A common factors perspective. <i>Psychotherapy</i> , 51(4), 467–481. https://doi.org/10.1037/a0034332	Privately touch base with me about partners if you have concerns
1/19 Case Formulation and Diagnosis	LeMaire, Kurup, Novak, & Oesterle (2021) https://osf.io/7d89u/ (and on Box) (Case conceptualization sections) Sommers-Flanagan, J., & Sommers-Flanagan, R. (2017)—Chapter 11 Beck, J. S. (2011)—Chapter 3, 18	Clinical case con handed out; partners assigned
1/26 Motivational Interviewing	Sommers-Flanagan, J., & Sommers-Flanagan, R. (2017)—Chapter 6 Arkowitz, H., Miller, W. R., & Rollnick, S. (Eds.). (2015). <i>Motivational interviewing in the treatment of psychological problems</i> . Guilford Publications.—Chapter 1, 2, 7	Home practice 1 due

2/2 Second Wave CBT Day 1	Beck, J. S. (2011).—Chapter 9, 11-14	Home practice 2 due
2/9 Second Wave CBT Day 2	Beck, J. S. (2011).—Chapter 17 Leahy, R. L., Holland, S. J., & McGinn, L. K. (2011)— Chapter 9 & 10	Role Play 1 due
2/16 Working with Emotions and EFT	Beck, J. S. (2011).—Chapter 10 Greenberg, L. S., & Paivio, S. C. (2003). <i>Working with emotions in psychotherapy</i> . New York: Guilford Press.--- Chapter 3: Emotion Assessment; Chapter 5: The Process of Change; Chapter 6: The Phases of Emotionally Focused Interventions	
2/23 Values Clarification and Behavioral Activation	Beck, J. S. (2011).—Chapter 6 Martell, C., Dimidjian, S., & Herman-Dunn, R. (2010). <i>Behavioral activation for depression a clinician's guide</i> . New York: Guilford Press.--Chapters 2-6, Available at: https://ebookcentral.proquest.com/lib/purdue/reader.action? docID=471121	Role Play 2 due
3/2 Exposure	Leahy, R. L., Holland, S. J., & McGinn, L. K. (2011)—Chapter 7 & 8 Barlow, D. H. (Ed.). (2014). <i>Clinical handbook of psychological disorders: A step-by-step treatment manual</i> . Guilford publications.—Chapter 1	Home practice 3 due
3/9 Unified Protocol	Farchione, T. J., Fairholme, C. P., Ellard, K. K., Boisseau, C. L., Thompson-Hollands, J., Carl, J. R., ... & Barlow, D. H. (2012). Unified protocol for transdiagnostic treatment of emotional disorders: a randomized controlled trial. <i>Behavior therapy</i> , 43(3), 666-678. UP client workbook Chapters 5-8 (in Box)	Home practice 4 due
3/14-3/18	SPRING BREAK	Enjoy!
3/23 ACT Day 1	Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (2011). <i>Acceptance and commitment therapy: The process and practice of mindful change</i> . Guilford Press.—Chapters 1-4	Case Conceptualization and Treatment Plan due
3/30 ACT Day 2	Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (2011). <i>Acceptance and commitment therapy: The process and practice of mindful change</i> . Guilford Press.—Chapters 7-10, 12	Role Play 3 due
4/6 DBT day 1	Koerner, K. (2012). <i>Doing dialectical behavior therapy: a practical guide</i> . New York: The Guilford Press.—Chapters 1-5	Home practice 5 due

4/13 DBT day 2	Linehan, M. M. (2015). <i>DBT skills training manual</i> . (2nd edition). New York: Guilford.--Chapters 1 (read all), Read introductions (up to “teaching notes”) in chapters 7, 8, 9, and 10. Skim through handouts.	Role Play 4 due
4/20	Presentations Day 1 (4 presentations)	Turn in final presentation materials to Box
4/27	Presentations Day 2 (3 presentations and wrap up)	Turn in final presentation materials to Box
5/4 Finals Week	Focus on all of the other things you need to do. ☺	