



**COU 602**  
**Theories of Counseling and Practice II**  
**Spring Term, 2015**

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### **Course Description**

A study of basic theories, principles, and techniques of counseling and of their application to therapeutic settings. Students actively practice counseling skills.

### **Texts**

#### *Required*

Gehart, D. R. (2013). *Theory and treatment planning in counseling and psychotherapy: A competency-based approach to applying clinical theory in practice*. Pacific Grove, CA: Cengage/Brooks-Cole.

#### *Required Reference*

American Psychological Association. (2010). *Publication manual of the American Psychological Association, (6<sup>th</sup>ed)*. Washington, D.C.: Author.

Journal articles as assigned

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**Course Objectives, CACREP Standards, and Assessments:** course objectives are aligned with CACREP 2009 Standards which are posted at the 'Introduction to Counseling' Blackboard site

The Doane MAC program requires students demonstrate competency in knowledge and skills in the eight common core counseling curricular areas, including: professional orientation and ethical practice; social and cultural diversity; human growth and development; career development; helping relationships; group work; assessment; and research and program evaluation (CACREP II G). In addition, competency and accountability are assessed through performance of not only the student, but also of the Doane MAC program by collecting data, assessing that data, along with a thorough evaluation process which provides for an open, ongoing assessment practice.

Each Doane MAC course requires 36 hours of instruction in the classroom with an estimated minimum of 50 to 60 hours of out-of classroom preparation.

## Course Learning Objectives

1. Write case conceptualizations using core concepts from a single theory.
  - To be measured on the Case Conceptualization in the Group Presentation
  - To be measured on the Case Conceptualization on the Theory Paper.
2. Write professional quality treatment plans using a single theory.
  - To be measured on the Case Conceptualization in the Group Presentation
  - To be measured on the Case Conceptualization on the Theory Paper.
3. Develop theory-specific techniques to address client concerns.
  - To be measured on the Case Conceptualization in the Group Presentation
  - To be measured on the Case Conceptualization on the Theory Paper.
4. Select appropriate and/or adapt theories for application with diverse populations.
  - To be measured on the Case Conceptualization in the Group Presentation
  - To be measured on the Case Conceptualization on the Theory Paper.
5. Select an appropriate theory to address client concerns using the evidence base for counseling and psychotherapy theories.
  - To be measured by the choice of theory for the Theory Paper.
  - To be measured by the final role play in weeks 8- 9.
  - To be measured on the Final Exam.
6. Distinguish major schools of counseling and psychotherapy theory and describe their basic premises, processes and techniques.
  - To be measured on the Final Exam.

## Instructional Philosophy

This instructional philosophy used in this course and the primary text, *Theory and Treatment Planning in Counseling and Psychotherapy* (Gehart, 2013), include a learning-centered, outcome-based approach, which is briefly summarized below:

- *Learning Centered.* A cross-disciplinary, constructivist pedagogical model, learning- or learner-centered education refers to designing educational curricula that focus on promoting active student learning of specific skills and knowledge. In this approach, learning is the focus of curriculum design; thus, student learning is frequently measured to determine whether students are meaningfully engaging the material. Students are active in this process, applying and using knowledge rather than trying to memorize or analyze it. Clearly defined learning objectives and criteria are used to facilitate student learning and democratize the student-teacher relationship. In this course, students will be learning theory using clinically relevant case documentation.
- *Outcome-Based:* Closely related to learning-centered pedagogy, outcome-based learning refers to designing curriculum around the final learning outcomes or objectives. Rather than simply following the textbook chapter by chapter, the learning objectives drive the curriculum. In the case of this course, the learning objectives focus on learning aspects of theory that are relevant to everyday therapy practice. Thus, learning is measured using common clinical case documentation.

## Instructional Format

This course will be conducted primarily as a seminar and will include experiential components. For this process to be successful, students are expected to participate fully by reading assigned materials, attending class, and participating in class exercises and discussions.

## Overview of Learning Activities

*Detailed instructions for each activity are at the end of the syllabus*

- Theory Summaries: Total of 10 submitted via LiveText
- Group or individual presentation of case conceptualization and treatment plan and written presentations submitted via LiveText
- Theory paper with case conceptualization and treatment plan submitted via LiveText
- Final exam
- Participation

## Instructions for Learning Activities

**Theory Summaries:** Students will develop summaries for each of the 10 chapters on theories (Chapters 4-13); these will be due on the day of the lecture (e.g., the psychodynamic theory summary is due at the beginning of class on psychodynamic theory). **This document needs to be handed in to the instructor as well as uploaded via LiveText.** Students will use these to prepare for the lecture, the final exam, and eventually their comprehensive exams (if applicable). These summaries should be 3-5 typed pages. In addition, a review of three journal articles needs to be integrated into the summary and cited using the current APA format. Each of these summaries are to be compiled into a Theory Study Guide APA format that will be handed in as a hard copy and uploaded via LiveText at the end of the course for final review by the instructor.

### **Individual Presentation of Assigned Theory (Two Parts)**

- 1) Students will be divided into groups. Each group or individual will present to the class a Case Conceptualization and Treatment Plan based on the assigned theory.
  - A theory-specific case conceptualization based on examples in *Theory and Treatment Planning in Counseling and Psychotherapy*
  - A treatment plan from Chapter 3 of *Theory and Treatment Planning in Counseling and Psychotherapy* (blank templates available on the Cengage website for the textbook or [www.masteringcompetencies.com](http://www.masteringcompetencies.com)).
  - The case conceptualization and treatment plan should address the issues raised in the video for the assigned theory.
  - Presentations should be no longer than 20 minutes.
  - Students must have PowerPoint overheads to facilitate class discussion.
  - Bring a printed handout of the case conceptualization and treatment plan for the instructor to provide written feedback.
  
- 2) Role Play of Theory. Student(s) will prepare a 45-minute role play of an assigned theory. Theory to be role played will be assigned the first class session. The role play should demonstrate how the assigned theory is applied to a counseling session. Session content and dialogue will be created by the student(s). Students will be given 10 minutes to formulate role play content. Students not participating in the role play will be observers of the role play and identify, in writing, the theory and techniques used in the role play.
  - ✓ Focusing and following
  - ✓ Accurate identification and reflection of client emotion
  - ✓ Clear verbal reflecting of the content of interviewee's statements

- ✓ Developing individual style – use of skills appears comfortable and congruent
- ✓ Appropriate communication of feelings and thoughts in the context of the session
- ✓ Noting discrepancies or inconsistencies in client's behavior without value judgment
- ✓ Use of self-disclosure when appropriate
- ✓ Orienting statements, feedback, reframe or other information statement when appropriate
- ✓ Verbally reconstructing the client's narrative to assist in attributing meaning
- ✓ Assist client in examining issues, considering alternative decisions
- ✓ Using verbal/nonverbal skills to decrease client discomfort and to increase cooperation

**Each student will complete a clinical note using the SOAP formatting on the role play(s) for the week.**

- Students will be graded using the CACREP rubrics.

*Approximate time to complete assignment outside of class: 8 hours.*

*Educational Goals:*

- Develop case conceptualization skills.
- Develop treatment planning skills.
- Apply theory to practical problems.
- Demonstrate presentation skills.

### **Theory-based Case Study Paper**

Students will develop an **8-15 page** paper with a theory-specific case conceptualization with treatment plan for their theory of choice. **This document needs to be submitted to the instructor as well as uploaded via LiveText.** Instructions are as follows:

1. **Select Theory for Case Study:** Students will choose one theory from the following: Psychodynamic, Jungian, Adlerian, person-centered, existential, gestalt, cognitive-behavioral, systemic family therapy, solution-based, collaborative, narrative or feminist. Dialectical Behavioral Therapy (DBT) and Interpersonal Therapy (IPT) are also options. Integrative is not an option for this assignment.
2. **Vignettes:** Students will write a brief, one-paragraph vignette for the case client using one of the following:
  - A personal life situation the student is comfortable discussing in the paper (students should choose a situation that is fairly well resolved for this exercise rather than a currently painful issues).
  - A case specified by the instructor (could be from video, a movie, etc.)
  - Any other source of vignette instructor finds appropriate
3. **Case Conceptualization:** Assess the client in the vignette using the case conceptualization concepts from *Theory and Treatment Planning in Counseling and Psychotherapy*. Students should feel free to go beyond the examples in the book to customize the conceptualization for their clients.

[Note: The integrative case conceptualization from Chapter 14 can be used for a more

standardized assignment; templates for this assignment may be found on the Cengage webpage for this book or [www.masteringcompetencies.com](http://www.masteringcompetencies.com).]

4. **Treatment Plan:** Develop a treatment plan using the form in Chapter 3 of *Theory and Treatment Planning in Counseling and Psychotherapy* (blank template available on the Cengage webpage for this book); the rubric in the textbook will be used to score the assignment. Each treatment plan should be designed using a *single theory*, e.g., solution-focused, psychodynamic, Jungian, etc.
5. **Personal Theoretical Orientation:** This section should be dedicated to refining your personal theoretical orientation that you would be comfortable in promoting change of a client. This needs to be supported by evidence based theory, and cited by the text or by use of journal articles.
6. **Social and Cultural Diversity Foundations:** This section should be focused upon illustrating your understanding of the cultural context of relationships, issues, and trends in a multicultural society by integrating these attributes across theories; including all of the following:
  - a. multicultural and pluralistic trends, including characteristics and concerns within and among diverse groups nationally and internationally;
  - b. attitudes, beliefs, understandings, and acculturative experiences, including an understanding of self and culturally diverse clients;
  - c. strengths of specific theories that address multicultural counseling, identity development, and social justice;
  - d. the importance of counselors' roles in eliminating biases, prejudices, and processes of intentional and unintentional oppression and discrimination.

*One Last Hint:* Make sure you choose a theory that is a good fit for treating the presenting problem you choose. You will find certain problems lend themselves to certain theories.

*Approximate time to complete:* 30-40 hours depending on understanding of material and writing ability.

*Grading:* Students will be graded using the CACREP rubrics available on the textbook's website.

*Educational Goals:*

- Develop familiarity with a theory of interest
- Apply concepts studied in class to actual case situations
- Develop assessment skills
- Develop treatment planning skills
- Begin to develop a sense of your personal approach to therapy
- Provide opportunity for personal growth and reflection

*Format Instructions*

All assignments must be typed in accordance with the current edition of the *APA Publication Manual*. Additionally, students should use the following guidelines:

- Papers must be double spaced in 12 point Times New Roman font. Use 1.0 inch margins on all sides; to ensure that everyone has a similar understanding of “one page.”
- Students are encouraged to use *heading* to structure their papers. Please use the format for two levels of heading; Level 1 – centered, boldface; Level 2 – flush left, boldface.

- Papers must be stapled; no binders or plastic covers will be accepted. Please note, the cover page and reference page are *not* included when counting paper length.
- Use full APA coversheet format; no additional information should be added (e.g., class number, professor name, etc.)

All writing submitted to the professor should be a final draft, free of spelling, grammatical, stylistic, and typographical errors. Students are encouraged to allow ample time for writing, keeping in mind the frequency of computer glitches.

Students are encouraged to access the A Quick Guide to APA Style, 10<sup>th</sup> edition (March 2014), compiled by Ray M. Zeisset, PhD., Doane Master of Arts in Counseling faculty. It is an invaluable resource guide, and is found on the ‘Introduction to Counseling’ Blackboard site. The Master of Arts in Counseling Writing Rubric is also found on the ‘Introduction to Counseling’ Blackboard site allowing the student to self-assess their written work.

### **Final Exam**

The final exam is designed to be a culminating experience for the class to solidify the knowledge that has been presented over the course of the term. The exam will be multiple-choice and cumulative, in the hope that it will give students some preparation for the licensing exam.

*Approximate time to complete:* 10 hours of studying in addition to hours preparing study sheets.

### *Educational Goals:*

- Provide opportunity to review and integrate materials
- Provide opportunity to improve test taking skills
- Practice for licensing exam

### **Final Role Play of Student Selected Theory**

The final role play will be up to 20 minutes where the student will demonstrate attributes of a selected theory.

### **Evaluation of Learning**

Students will be evaluated on their understanding of the material presented and on the quality of their participation. The final course grade will be determined by the following:

Course Activity	Value
Individual Theory Presentation (two parts)	25%
Theory Paper	25%
10 Theory Summaries	10%
Final Exam	15%
Final Role Play of Student Selected Theory	15%
Participation	10%
<b>Total</b>	<b>100%</b>

**Grading:** Final letter grades will be assigned based on the following grade equivalents:

A+	98-100	B+	87-89	C+	77-79
A	93-97	B	83-87	C	73-77
A-	90-92	B-	80-82	C-	70-72

Note: This table is given as a general guideline. Course assignments and the exact final letter grade are at the discretion of the instructor. To complete the course satisfactorily, a minimum grade of B- is required.

**Participation:**

A high premium is placed by the instructor on class participation. Ideal class participation, that which earns the highest number of participation points, will exemplify the following:

often articulates fit of readings with the topic at hand and,

**Interaction in classroom discussions:** Always a willing participant; responds frequently to questions; routinely volunteers point of view, and,

**Interaction in classroom learning activities:** Always a willing participant; acts appropriately during all

**Integrating class readings into participation:** Often cites from readings; uses readings to support points; role plays, etc.; responds frequently to questions; routinely volunteers point of view.

**Attendance:**

There is no way a student can “makeup” a missed class. If you need to miss a class, notify the instructor as soon as possible. If you miss one class, your grade will drop one grade level (Example, A to A-). Missing more than one class is not acceptable. You will need to drop or retake the course with approval from the instructor and the Graduate Office.

**Professional Performance Evaluation (PPE):** This is the professional performance evaluation by the instructor that is an indirect assessment and considered to be a critical measurement of growth, and is utilized in assessing readiness for promotion to a different level.

**Course Evaluations:** Each student is requested to complete course evaluations to assist with ongoing assessment of curriculum, teaching strategies, e.g.

**Remediation of Identified Deficits:** The student will be responsible for initiating a collaborative process with the instructor to improve any perceived deficits of performance.

**Rubric Descriptions:** Rubrics will be utilized assessing journal submissions, live interviews, critical thinking, and participation that will influence PPE’s.

Rubrics specific to this course are also found at the ‘Introduction to Counseling’ Blackboard site.

**LiveText/Blackboard Usage:**

LiveText and Blackboard will be utilized to collect various artifacts that can represent the student’s body of work. For example, signature artifacts are major assessments of knowledge, skill, and practice that are grounded in CACREP and best practice standards and are associated with various assessment rubrics and are integrated in LiveText.

The online portfolio is maintained in the student's personal file on the LiveText website. There may be a number of artifacts that are appropriate for inclusion—see the instructor for details.

**Website Resources:** Will be identified by instructor as needed.

**Classroom Conduct, Confidentiality & Ethics:** Conduct in the learning environment in the classroom as well as outside the classroom setting is representative of the professional standards and is expected to be of the highest standard. Further explanation of these standards is found at the 'Introduction to Counseling' Blackboard site.

**Cell Phone Use:** Cell phones should be turned off and not visible during class. Disregard for this request may affect your evaluations. If professional and personal reasons necessitates its use, it must be with the instructor's permission, and used discretely.

**Accommodating Students with Special Learning Needs:** Students who believe that they may need accommodations in this class are encouraged to contact the instructor as soon as possible to ensure that accommodations are implemented in a timely fashion.

**Statement about Diversity:** The Master of Arts in Counseling program as a whole is committed to social justice. The Master of Arts in Counseling program cherishes the dignity of each individual regardless of age, culture, faith, ethnicity, race, gender, sexual orientation, language, disability or social class. The department emphasizes the importance of diversity and multicultural influences on development in each course, work and research, as well as throughout the practicum and internship training.

**Questions, Concerns, Grievances:** Students are encouraged to schedule an appointment to talk with the instructor, if you have any issues to discuss; if you feel there is a problem or misunderstanding; or if you have a question or complaint. In addition, you may contact the Dean regarding any concerns. Formal grievance procedures are outlined in the Doane MAC Student Handbook.

**Plagiarism and Collaboration:** The Master of Arts in Counseling program recognizes that the open exchange of ideas plays a vital role in the academic endeavor, as often it is only through discussion with others that one is fully able to process information or to crystallize an elusive concept.

Students who, for whatever reason, submit work either not their own or without clear attribution to its sources will be subject to disciplinary action up to and including requirement to withdraw from the Master of Arts in Counseling program. Further explanation of issues relating to plagiarism is found in the Student Handbook.



## Tentative Schedule\*

<b>Week</b>	<b>Topic</b>	<b>Reading</b>	<b>Direct &amp; Indirect Artifacts: Signature Assessments</b>	<b>Suggested Paper Timeline</b>	<b>Individual Presentation of Assigned Theory (Two Parts)</b>
<b>Week 1</b>	Introduction to class and counseling theories	<b>Gehart Ch. 1, 2, 3</b>			
<b>Week 2</b>	Psychodynamic theories	Gehart Ch. 4	<b>Theory Summary Due</b>	<i>Write Vignette</i>	
	Adlerian theory	Gehart Ch. 5	<b>Theory Summary Due</b>	<i>Skim Ahead to Choose Theory</i>	
<b>Week 3</b>	Person-centered theory	Gehart Ch. 6	<b>Theory Presentation Theory Summary Due</b>	<i>Find Resources at Library and Online</i>	
<b>Week 4</b>	Existential & Gestalt theory	Gehart Ch. 7 & 8	<b>Theory Presentation Theory Summary Due</b>	<i>Read original sources for paper</i>	
<b>Week 5</b>	Behavioral & cognitive theories	Gehart Ch. 9	<b>Theory Presentation Theory Summary Due</b>	<i>Case Concept drafted</i>	
	Systemic theories	Gehart Ch. 10	<b>Theory Presentation Theory Summary Due</b>	<i>Case Concept finalized</i>	
	Solution-based theories	Gehart Ch. 11	<b>Theory Presentation Theory Summary Due</b>	<i>Treatment Plan drafted</i>	

<b>Week 6</b>	Feminist & multicultural theories	Gehart Ch. 13	<b>Theory Presentation Theory Summary Due</b>	<i>Initial draft outlined</i>	
<b>Week 7</b>	Postmodern theories <b>DBT, IPT</b>	Gehart Ch. 12	<b>Theory Presentation Theory Summary Due</b>	<i>Treatment Plan finalized Theoretical Orientation drafted</i>	
<b>Week 8</b>	Feminist & multicultural theories Theory Integration	Gehart Ch. 13, 14	<b>Theory Presentation Theory Summary Due</b>	<i>Complete final draft</i>	
<b>Week 9</b>	Evaluation of course		<b>1-Papers Due 2-Final Role Play of Student Selected Theory 3-Final exam</b>		

*\*The above schedule and procedures are subject to change in the event of extenuating circumstances*

### **List of Psychology Benchmark Competencies\* for Treatment Plan with Theory-Specific Case Conceptualization**

#### 1. Individual and Cultural Diversity

- A. Applies knowledge of others as cultural beings in assessment, treatment, and consultation
- B. Applies knowledge of the role of culture in interactions in assessment, treatment, and consultation of diverse others

#### 2. Relationship

- A. Forms and maintains productive and respectful relationships with clients, peers/colleagues, supervisors and professionals from other disciplines

#### 3. Assessment

- A. Utilizes systematic approaches of gathering data to inform clinical decision-making
- B. Writes assessment reports and progress notes and communicates assessment findings verbally to client

#### 4. Intervention

- A. Formulates and conceptualizes cases and plans interventions utilizing at least one consistent theoretical orientation
- B. Implements evidence-based interventions
- C. Evaluates treatment progress and modifies treatment planning as indicated, utilizing established outcome measures

\*American Psychological Association. (2011, June). Revised competency benchmarks for professional psychology. Retrieved from <http://www.apa.org/ed/graduate/competency.aspx>.

\*Fouad, N. A., Grus, C. L., Hatcher, R. L., Kaslow, N. J., Hutchings, P., Madson, M. B., & Crossman, R. E. (2009). Competency benchmarks: A model for understanding and measuring competence in professional psychology across training levels. *Training and Education in Professional Psychology, 3*(4, Suppl), S5-S26. doi:10.1037/a0015832

The following is a partial list of CACREP standards that are addressed:

2. **SOCIAL AND CULTURAL DIVERSITY**—studies that provide an understanding of the cultural context of relationships, issues, and trends in a multicultural society, including all of the following:

- a. multicultural and pluralistic trends, including characteristics and concerns within and among diverse groups nationally and internationally;
- b. attitudes, beliefs, understandings, and acculturative experiences, including specific experiential learning activities designed to foster students' understanding of self and culturally diverse clients;
- c. theories of multicultural counseling, identity development, and social justice;
- f. counselors' roles in eliminating biases, prejudices, and processes of intentional and unintentional oppression and discrimination.

3. **HUMAN GROWTH AND DEVELOPMENT**—studies that provide an understanding of the nature and needs of persons at all developmental levels and in multicultural contexts, including all of the following:

- a. theories of individual and family development and transitions across the life span;
- b. theories of learning and personality development, including current understandings about neurobiological behavior;
- c. effects of crises, disasters, and other trauma-causing events on persons of all ages;
- d. theories and models of individual, cultural, couple, family, and community resilience;
- e. a general framework for understanding exceptional abilities and strategies for differentiated interventions;

5. **HELPING RELATIONSHIPS**—studies that provide an understanding of the counseling process in a multicultural society, including all of the following:
- c. essential interviewing and counseling skills;
  - d. counseling theories that provide the student with models to conceptualize client presentation and that help the student select appropriate counseling interventions. Students will be exposed to models of counseling that are consistent with current professional research and practice in the field so they begin to develop a personal model of counseling;
  - e. a systems perspective that provides an understanding of family and other systems theories and major models of family and related interventions;
  - f. a general framework for understanding and practicing consultation; and
8. **RESEARCH AND PROGRAM EVALUATION**—studies that provide an understanding of research methods, statistical analysis, needs assessment, and program evaluation, including all of the following:
- e. the use of research to inform evidence-based practice; and
  - f. ethical and culturally relevant strategies for interpreting and reporting the results of research and/or program evaluation studies.

### **CLINICAL MENTAL HEALTH COUNSELING re Case Conceptualization**

- A. 5. Understands a variety of models and theories related to clinical mental health counseling, including the methods, models, and principles of clinical supervision.
- A. 9. Understands the impact of crises, disasters, and other trauma-causing events on people.
- C. 7. Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.
- C. 8. Recognizes the importance of family, social networks, and community systems in the treatment of mental and emotional disorders.
- D. 2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.
- D. 3. Promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities.
- D. 7. Applies current record-keeping standards related to clinical mental health counseling.
- E. 1. Understands how living in a multicultural society affects clients who are seeking clinical mental health counseling services.
- E. 2. Understands the effects of racism, discrimination, sexism, power, privilege, and oppression on one's own life and career and those of the client.

E. 5. Understands the implications of concepts such as internalized oppression and institutional racism, as well as the historical and current political climate regarding immigration, poverty, and welfare.

F. 3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.

H. 1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.

H. 2. Demonstrates skill in conducting an intake interview, a mental status evaluation, a biopsychosocial history, a mental health history, and a psychological assessment for treatment planning and caseload management.

H. 4. Applies the assessment of a client's stage of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria within the continuum of care.

### **CLINICAL MENTAL HEALTH COUNSELING re Treatment Planning**

A. 1. Understands the history, philosophy, and trends in clinical mental health counseling.

A. 5. Understands a variety of models and theories related to clinical mental health counseling, including the methods, models, and principles of clinical supervision.

C. 1. Describes the principles of mental health, including prevention, intervention, consultation, education, and advocacy, as well as the operation of programs and networks that promote mental health in a multicultural society.

C. 5. Understands the range of mental health service delivery—such as inpatient, outpatient, partial treatment and aftercare—and the clinical mental health counseling services network.

C. 7. Knows the principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.

C. 8. Recognizes the importance of family, social networks, and community systems in the treatment of mental and emotional disorders.

D. 1. Uses the principles and practices of diagnosis, treatment, referral, and prevention of mental and emotional disorders to initiate, maintain, and terminate counseling.

D. 2. Applies multicultural competencies to clinical mental health counseling involving case conceptualization, diagnosis, treatment, referral, and prevention of mental and emotional disorders.

D. 3. Promotes optimal human development, wellness, and mental health through prevention, education, and advocacy activities.

D. 5. Demonstrates appropriate use of culturally responsive individual, couple, family, group, and systems modalities for initiating, maintaining, and terminating counseling.

D. 7. Applies current record-keeping standards related to clinical mental health counseling.

- E. 1. Understands how living in a multicultural society affects clients who are seeking clinical mental health counseling services.
- E. 2. Understands the effects of racism, discrimination, sexism, power, privilege, and oppression on one's own life and career and those of the client.
- E. 3. Understands current literature that outlines theories, approaches, strategies, and techniques shown to be effective when working with specific populations of clients with mental and emotional disorders.
- F. 3. Demonstrates the ability to modify counseling systems, theories, techniques, and interventions to make them culturally appropriate for diverse populations.
- G. 1. Knows the principles and models of assessment, case conceptualization, theories of human development, and concepts of normalcy and psychopathology leading to diagnoses and appropriate counseling treatment plans.
- H. 1. Selects appropriate comprehensive assessment interventions to assist in diagnosis and treatment planning, with an awareness of cultural bias in the implementation and interpretation of assessment protocols.
- H. 4. Applies the assessment of a client's stage of dependence, change, or recovery to determine the appropriate treatment modality and placement criteria within the continuum of care.
- I. 3. Knows evidence-based treatments and basic strategies for evaluating counseling outcomes in clinical mental health counseling.
- J. 1. Knows evidence-based treatments and basic strategies for evaluating counseling outcomes in clinical mental health counseling.
- J. 2. Develops measurable outcomes for clinical mental health counseling programs, interventions, and treatments.
- K. 2. Understands the established diagnostic criteria for mental and emotional disorders, and describes treatment modalities and placement criteria within the continuum of care.