COURSE OUTLINE

Counseling Theories and Practice
PSYC 310

Prepared by: Bruce A. Kenna
PSYC 310 – Counseling Theories and Practice

A. **TITLE:** Counseling Theories and Practice

B. **COURSE NUMBER:** PSYC 310

C. **CREDIT HOURS:** 3

D. **WRITING INTENSIVE COURSE:** N/A

E. **COURSE LENGTH:** 15 Weeks

F. **SEMESTER(S) OFFERED:** Fall and/or Spring

G. **HOURS OF LECTURE, LABORATORY, RECITATION, TUTORIAL, ACTIVITY:** 3 hours lecture per week

H. **CATALOG DESCRIPTION:** A survey of the major theories of psychological counseling and common issues and principles in the practice of the helping professions. A critical presentation of the theoretical models will focus on the concepts, principles, techniques, goals, and contributions of each approach to counseling. The uses and limitations of each theory will be discussed. Issues related to the helping professions will include standards of professionalism, ethics, and legalities.

I. **PRE-REQUISITES/CO-COURSES:** Minimum of 9 credits of psychology with a “C” or better average, including Introductory Psychology, Abnormal Psychology, Child Development or Human Development, or permission of the instructor.

J. **GOALS (STUDENT LEARNING OUTCOMES):** The student completing this course will be able to:

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<th>Course Objective</th>
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| a. Describe the assumptions, principles, concepts, goals, and methods of at least five major approaches to counseling. | 1. Communication  
2. Crit. Thinking  
3. Prof. Competence               |
| b. Explain the application of each approach to the practice of counseling and helping. | 1. Communication  
2. Crit. Thinking  
3. Prof. Competence               |
| c. Demonstrate the application of each theory to practice cases in conceptualizing each case, setting goals, and creating a counseling/helping plan. | 1. Communication  
2. Critical Thinking  
3. Prof. Competence               |
| d. Compare and contrast each theory, distinguishing the strengths and weaknesses of each and evaluating their contributions and shortcomings in helping. | 1. Communication  
2. Crit. Thinking  
3. Prof. Competence               |
| e. Identify and describe basic principles of ethics and apply these to resolve hypothetical examples. | 1. Communication  
2. Crit. Thinking  
3. Professional Competence  
4. Inter/Intrapersonal Skills       |
| f. Demonstrate values consistent with professional and paraprofessional roles in the helping professions. | 1. Communication  
2. Crit. Thinking               |
g. Formulate an approach to helping or counseling that integrates the theoretical models with the student’s own beliefs and values.

K. **TEXT(S):** Determined by Instructor; suggested texts:
   - Counseling and Psychotherapy by Carol Austad, McGraw Hill.
   - Theory and Practice of Counseling and Psychotherapy by Gerald Corey, Wadsworth.
   - Theories of Psychotherapy and Counseling by Richard Sharf, Brooks/Cole

L. **REFERENCES:** (including, but not limited to)
   - Systems of Psychotherapy: A Transtheoretical Analysis by Prochaska and Norcross
   - Ethics in Counseling and Psychotherapy, by Welfel, Cengage
   - The Art of Integrative Counseling, by Corey, Cengage

M. **EQUIPMENT:** To be determined by Instructor

N. **GRADING METHOD:** A – F

O. **MEASUREMENT CRITERIA/METHODS:** To be determined by the instructor.
   Grading will be based on a combination of objective and essay exams, literature research and writing assignments, class presentations, and class participation at the discretion of the instructor.

P. **DETAILED TOPICAL OUTLINE:**

Counseling Theories and Process

I. The current state of counseling, psychotherapy, and other helping professions.
   A. Helping in the age of managed care.
   B. The diverse roles and qualifications in the helping professions.
   C. Limits of each level of training and scope of practice

II. Professionalism, Ethics and legal issues in the helping professions

   B. Ethical Issues
      1. Competence and scope of practice
      2. Informed consent
      3. Confidentiality
      4. Duty to warn and protect
      5. Involuntary commitment and client rights
      6. Dual relationships and creating boundaries
      7. Record keeping and HIPAA guidelines
      8. Malpractice
      9. Diversity and multiculturalism

III. Psychodynamic Models
   Classical Psychoanalysis of Sigmund Freud
   A. History and development: Freud, Jung, Horney, Adler, Object Relations
   B. Key concepts: Id, Ego, Superego
1. Libido, cathexis, conflict, and psychodynamics
2. Levels of consciousness, defense mechanisms, repression
3. Transference and counter transference
C. Neo-Freudians: Jung, Horney, Adler, and Object Relations
   1. Jung: collective unconscious, compensation, archetypes
   2. Adler: Basic inferiority, family constellation, early decisions, mistaken beliefs, fictional goals, lifestyle
3. Object relations
D. Therapeutic relationship
E. Assessment, goals, and techniques, therapeutic process
   1. Making the unconscious conscious, uncovering unconscious meaning, release from fixation, working through transference,
   2. Interpretation, analysis of transference, dreams & fantasies, ego strengthening
F. Applying psychodynamic concepts and principles
   1. Defining normality and abnormality
   2. Assessment, therapeutic goals and techniques
   3. The therapeutic process
   4. Short-term practice and psychodynamic approaches
   5. Critique and evaluation

IV. Client-Centered Theory of Carl Rogers
A. History and origins
B. Key concepts: Self, Organism, ideal self, self-actualization, congruence and incongruence, conditions of self-worth
C. Therapeutic relationship: unconditional positive regard, empathy, genuineness, immediacy, mutuality.
D. Assessment, therapeutic goals, techniques, therapeutic process
   1. increasing self-disclosure, increasing self-awareness, increasing self-acceptance, improving personal growth, increasing present-centeredness, increasing flexibility
   2. Aspects of active and reflective listening, feedback, confrontation, encouragement.
E. Applying client-centered concepts, principles, and techniques.
F. Critique and evaluation

V. Existential Therapy of Binswanger, May, Frankl, and Yalom
A. History and origins
B. Key concepts and principles
   1. Four domains of experience: Umwelt, Mitwelt, Eigenwelt, Uberwelt.
   2. Four existential realities: Death & Time, Freedom & Responsibility, Uniqueness & isolation, meaning & meaninglessness
   3. Therapeutic relationship, genuineness, self-transcendence, will to meaning
C. Assessment, goals, techniques, therapeutic process
E. Applying concepts and principles
   1. Confrontation, direct experience, exploration of values, paradoxical intention
   2. Struggle for meaning, existential anxiety, staying present-focused, direct experience, Promoting self-awareness, striving for identity and relationship

VI. Gestalt Therapy of Perls and Gendlin
A. History and origins
B. Key concepts and principles of Gestalt Therapy and Focusing
   1. Contact and resistance, boundary, awareness and centeredness, unfinished business, integrating polarities, focusing, dialogue of polarities, enactment and role playing, role reversal, empty chair, confrontation, exploring nonverbal behavior, homework.
   2. Holism, phenomenological inquiry and experiencing the now, energy blockage, Confrontation, finishing unfinished business
C. Therapeutic relationship
D. Assessment, goals, techniques, therapeutic process
E. Applying concepts and principles
   1. internal dialogue, empty chair, making the rounds, reversal/playing the opposite,
      Rehearsal, staying with the feeling, exaggeration exercise, gestalt dream work
F. Critique and evaluation

VII. Behavior Therapy and Observational/Social Learning Theory
A. History and origins
B. Key Concepts and principles
   1. Reinforcements, punishments, contingencies, behavioral repertoire, shaping,
      modeling, extinction
   2. Principles of classical and operant conditioning
C. Assessment, goals, and techniques
   1. Response blocking, systematic desensitization, reverse conditioning, counter
      conditioning, flooding, negative practice, prompting, modeling, social consequences,
      verbal mediation, vicarious learning, expectancies
D. Applying concepts and principles
E. Critique and evaluation

IX. Cognitive Therapies of Ellis and Beck
A. History and origins
B. Key Concepts and principles
   1. Ellis' Rational-emotive behavior therapy: activating events, irrational beliefs,
   2. "musts", "should", "oughts", confronting and disputing
   3. Beck's Cognitive Therapy: dysfunctional schema, self-talk, cognitive distortions,
      selective perception, disputing and restructuring
C. Assessments, goals, and techniques
   1. Self-report of automatic thoughts & images, charting connections between
      thoughts, feelings, behavior, and results
   2. Identifying irrational beliefs and cognitive distortions
   3. The processes of cognitive restructuring, disputing, semantics, personal
      experiments, checking the evidence

IX. Family Systems Theories and Family Therapies
A. History and origins
B. Key concepts and principles
   1. Systems, subsystems, boundaries, roles, rules, transactional patterns,
      transgenerational patterns
   2. Alignments, detouring, triangulation, coalitions,
C. Assessment
   1. Family Maps, genograms, enactment, joining
   1. Using family maps and genograms, provoking enactment, sculpting,
   D. Applying concepts and principles the system, changing boundaries and patterns,
      reframing,

X. Other Less Dominant Theoretical Approaches
A. Transactional analysis
B. Feminist Therapy
C. Reality Therapy
D. Psychodrama
E. Creative Arts Therapy
F. Narrative Therapy
G. Brief Therapies

XI. Integrating Theoretical Models
Q. LABORATORY OUTLINE: N/A