PRE 740: Counseling and Interviewing Skills  
Fall, 2012

COURSE INSTRUCTORS:  Karen D. Multon, Ph.D.  kmulton@ku.edu  
Office:  103N JRP  785-864-3577  
Office Hours: Mondays 9-10 and 1:30-2:30  
Thursdays 9-10  
Or by appointment (can arrange by e-mail)  
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COURSE GOAL: To introduce counseling process through lecture, discussion, practice,  
observation, and supervision.

OBJECTIVES: Each student will be expected to:

1. demonstrate basic counseling skills.*  
2. critically evaluate his/her own counseling style.  
3. give constructive (i.e., helpful) feedback to other counselors.  
4. begin to integrate his/her counseling skills with a theoretical framework.  
5. demonstrate a basic understanding of ethical principles and multicultural issues in the  
context of individual counseling

* Note: If in the judgement of the instructor the student has failed to successfully demonstrate at least  
adequate counseling skills, the student may be required to repeat the class or participate in  
individualized remediation sessions.

REQUIRED TEXT:


Additional readings may be assigned.

COURSE REQUIREMENTS AND EVALUATION:

Attendance: Attendance will be noted in lecture, lab, and supervision sessions.  
Excessive absence and/or tardiness may result in lowering the final grade. If for some  
extraordinarily good reason, you will not be able to attend class, please inform me ahead of time (e- 
mail is fine).

Lectures and “Mini” Labs: The topics to be covered are included at the end of this syllabus. Part  
of the class will be small or large group lab exercises (including discussions), most of them from the  
Hill textbook. Please bring your textbook to every class.

Readings: Do the readings ahead of time and contribute to the class discussions. Bring at least one
specific comment or questions to each class.

**Book Chapters and/or Articles Outline:** Read three chapters from a book (or books) and/or journal articles. All three selections should be related in some way (e.g., psychoanalytic psychotherapy, working with difficult clients, Gestalt techniques, counseling efficacy, counseling ethics). The end of this syllabus has references for books you can select from, but you are not limited to that list. Some good journals to consider are the *Journal of Counseling Psychology*, *The Counseling Psychologist*, and *Journal of Psychotherapy*. Outline the book chapters and/or articles and provide a brief critique of each of your three selections. Your three selections must be approved by Dr. Multon to make sure that no one in the class is has the same three readings. So it is to your advantage, to get your selections approved early! Your outline/critique will be sent electronically to all class members (including the two instructors). Just send it to me and I can do this. Then in the next class session, you will give a brief summary (about 5 minutes) of some of things you learned from your readings. We hope to provide a broad overview of major topics in counseling (according to class members interests) with this assignment. Specific due dates will be discussed in class since they will be staggered (however, all reports will be due in October).

**Session Tapes:** You will conduct a minimum of two 20 minutes sessions with your counseling partner. The third session will be longer (about 40 minutes) and may be conducted with a volunteer client (depending on whether we can get enough volunteers). The session with the volunteer client will be observed by your partner. These sessions will be conducted and recorded in the Center for Psychoeducational Services (CPS) on the 1st floor of JRP. Details about this process will be given in class. These sessions will be done on your own time.

**Formulations:** In your work with your “client(s)”, you will be expected to write a formulation after each counseling session. The format of this formulation will be discussed in class. You must turn in the formulation to me within one week after your session. We will return one copy of the formulation to you within a week or so after it is received with specific feedback for you.

**Session Transcript:** The final project will include a transcript of your final session. As soon as you complete your final session you should begin transcribing it because it will take several hours.

**Major Paper:** You will turn in a paper (8 to 12 pages, approximately) analyzing the transcript using your knowledge of the readings (particularly the Hill book) to discuss your work with the client. You must also include a summary of your current strengths and weaknesses as a counselor and state a plan for your further growth. This paper, a copy of your session transcript, and the session formulation, must be turned in no later than the last day of class in a manila folder. Please see the grading criteria outlined in this syllabus.

**Thought Papers:** In addition to the final project, you will be expected to write 4 "thought papers" during the first part of the semester. Each paper should be one to two typewritten pages. At least one of these papers must be on your work with a volunteer “client” (i.e., your partner) in terms of something you have been learning about in class and/or in the text. The other three papers may be on any topic related to counseling (e.g., you experience as a client, skills you find challenging). Grading will be based on how well these papers are written. Due dates will be given in class.

**Quizzes:** Quizzes will be given occasionally to help you understand the some concepts from the lectures. These quizzes will not count toward the final grade but will help you assess your own knowledge.
Readings: Two texts (although one is really a reference) are required readings for this course. We suggest that all of you purchase a DSM-IV-TR sometime during your program as it is an important resource. As noted previously, you will also have three self-selected readings for a class assignment. We may assign further readings.

GRADING:

Note: Due dates will be given in class. Points may be deducted for late papers.

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<tr>
<th>Assignment</th>
<th>Possible Points</th>
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<tr>
<td>Thought Paper # 1</td>
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<td>Thought Paper # 2</td>
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<td>Thought Paper # 3</td>
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<td>Thought Paper # 4</td>
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<tr>
<td>Formulation # 1 (1 week after session)</td>
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<td>Formulation # 2 (1 week after session)</td>
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<td>Formulation # 3</td>
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<td>(turned in with final paper and transcript)</td>
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<td>Book Chapters and/or articles Outline</td>
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<td>and Critique</td>
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<td>Major Paper &amp; Transcript</td>
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TOTAL POSSIBLE POINTS 500

A = 461 to 500 points  
B = 420 to 459 points  
Below 420 points is a failure (You MUST show some mastery of these skills and concepts)

PROPOSED LECTURE TOPICS:

Note: No class or office hours the week of Thanksgiving (Thanksgiving is Nov. 22nd)

These topics may be revised somewhat depending on the particular needs of the class members. The topics are listed in the order (tentative) in which they will be covered. Counseling research will be integrated into lectures on most topics.

1. Overview of Class and Requirements
2. Overview of Helping
3. Supervision: Making the most of it
4. Confidentiality in the Counseling Relationship
5. Dual Relationships
6. The formulation
7. First Contact: What to do and say
8. Overview of Exploration Stage
9. Listening and Observing: How to
10. The Working Alliance
11. Exploring Thoughts
12. The Role of Empathy
13. Overview of the Insight Stage
14. Confrontation of Resistance
15. Interpretation: Tact, Timing, and Dosage
16. Transference: Positive and Negative
17. Countertransference: Uses and Abuses
18. Action Stage: Overview
19. Termination: How to Say Goodbye
21. Conceptualization of the client: Overview
22. Referral
23. DSM IV-TR: An Overview
24. Intake Procedures, including the Mental Status Examination
25. Multicultural Issues: An Overview
26. Suicidal Clients: How to Recognize the Signs and What to Do About It
27. Other Difficult Clients
Please note the following:

1. The KU Office of Disability Resources (DR) coordinates accommodations and services for all eligible students with disabilities. If you have a disability and wish to request accommodations and have not contacted DR, please do so as soon as possible. Their office is located in 22 Strong Hall and the phone number is 785-864-2620. Information about their services can be found at http://www.disability.ku.edu

2. **SOE Mission Statement**: The primary mission of the School of Education is to prepare leaders in education and human service field. As stated in the school code: Within the university, the School of Education serves Kansas, the nation, and the world by (1) preparing individuals to be leaders and practitioners in education and related human service fields; (2) expanding and deepening understanding of education as a fundamental human endeavor; and (3) helping society decline and respond to its educational responsibilities and challenges. The components that frame this mission for our initial and advanced programs are Research and Best Practice, Content Knowledge, and Professionalism. These interlocking themes build our conceptual framework.
General Evaluation Criteria for Graduate Coursework

While it is impossible to be completely objective in evaluating papers, testing reports, essay tests, etc., it is important for you to understand the general performance parameters I use to arrive at grades. Grades reflect my best judgement of the quality of your work. Included in this estimate are judgements relative to facts, the integration of class/reading material, the organization of responses and the quality of your writing. Below is a qualitative division of three general levels of performance.

EXCELLENT TO VERY GOOD ( A+ to A- )

All facts are correct and are clearly differentiated in terms of their importance .... high level of theoretical knowledge .... high evidence of preparation .... superior level of responsiveness to the question of issue at hand .... highly cogent and creative response .... excellent connectedness between/among concepts .... very high level understanding of material, especially similarities and differences in theoretical material .... organization of response reflects excellent differentiation between the major and minor points as they pertain to the question or theme of the paper .... very elegantly written response .... creative and clear presentation of material and personal judgements .... writing reflects high levels of knowledge and integration, as well as a superior level of understanding .... very articulate with respect to structure and content of language, reflecting excellent talent and achievement.

GOOD TO AVERAGE ( B+ to B- )

Major facts are correct .... some minor errors or omissions may be evident .... good level of theoretical knowledge .... good judgement in application of facts to the question or issue at hand .... the relatedness between/among crucial concepts is recognized .... basic elements of the response are meaningfully connected .... accurate perception of the intent of the question .... minor points follow and are used to support major points .... each point is clearly and adequately addressed (in accordance to its importance) .... some aspects of the question may be omitted or less than adequately covered .... theoretical knowledge and judgements are presented in a clear, direct and reasonably elegant manner .... writing clearly reflects an understanding of the thrust of the question .... evidence of articulateness and a good level of psychological writing, both in terms of content and structure.

BELOW AVERAGE TO VERY POOR ( C+ to F )

Facts are virtually nonexistent or severely distorted ....little or no evidence of adequate preparation .... below average to poor recognition of relatedness of theoretical constructs .... basic elements of the response are not meaningfully connected .... no logical flow of information .... reflective of no (or minimal) thought about the material .... basic points, when made, are not in sequence and are not provided in sufficient detail, or, inappropriate facts are given in support for basic points .... evidence of misinterpretation of the question (or issue) at hand .... incoherent, rambling response .... writing is unclear and reflective of high levels of confusion .... poor sentence structure .... incomplete sentences .... writing does not convey accurate understanding of material.
EGO DEFENSE MECHANISMS

FUNCTION: COPE WITH ANXIETY & PREVENT EGO FROM BEING OVERWHELMED

There are many types of defense mechanisms. Below is a list of the most common types.

A. REPRESSION: INVolUNTARY REMOVAL OF EVENTS FROM CONSCIOUSNESS (EX: 1ST FIVE YEARS)

B. DENIAL: CONSCIOUS OR PRE-CONSCIOUS LEVELS (EX: DENIAL OF LOVED ONE'S DEATH)

C. REACTION FORMATION: ACTIVELY EXPRESS THE OPPOSITE IMPULSE (EX: HATE COVERED BY FACADE OF LOVE)

D. PROJECTION: ATTRIBUTE TO OTHERS ONE'S OWN UNACCEPTABLE DESIRES AND IMPULSES (EX: SEES A PARTICULAR PERSON AS HATING, YET REALLY HATES THAT PERSON)

E. DISPLACEMENT: IMPULSES MOVED TO SAFER TARGET (EX: MAN TAKES OUT ANGER WITH BOSS ON HIS WIFE)

F. RATIONALIZATION: EXPLAIN AWAY PAIN (EX: A WOMAN WHO DOES NOT GET A JOB SHE APPLIED FOR MAY SAY SHE NEVER WANTED IT ANYWAY)

G. SUBLIMATION: DIVERTING UNACCEPTABLE IMPULSES INTO SOCIALLY ACCEPTABLE CHANNELS (EX: AGGRESSIVE IMPULSES CHANNELED INTO ATHLETIC ACTIVITIES)

H. REGRESSION: TO AN EARLIER PHASE OF DEVELOPMENT WHEN LIFE WAS "EASIER" (EX: WEEPING)

I. INTRODUCTION: TAKING IN (SWALLOWING) THE VALUES OF OTHERS (EX: THE ABUSED CHILD ABUSES OTHERS)

J. IDENTIFICATION: MEANS OF ENHANCING SELF-WORTH BY IDENTIFYING WITH SUCCESSFUL CAUSES, ORGANIZATIONS, OR PEOPLE

K. SPLITTING THE AFFECT: NO EMOTIONAL RESPONSE TO A PAINFUL EVENT

L. MINIMIZATION: ATTEMPTS TO MINIMIZE THE IMPORTANCE OF AN EVENT

M. UNDOING: TO NEGATE AN ACT OR THOUGHT (EX: UNAVAILABLE FATHER SHOWERS CHILD WITH MATERIAL GOODS)
Suggested Books

The following list is intended to serve as a guide for your selection of books to further your learning. It is certainly not "complete", but I did try to include some "classics". I strongly encourage you to read widely and to re-read materials as you gain more experience as a counselor. I have chosen books that focus on interventions for individual counseling, although sections on theory may also be included. You may select one of these books for your required outline or something else, but your selection must be approved by me.

Psychoanalytic/Psychodynamic


Humanistic/Existential


Cognitive/Behavioral


**Specific Topics**


**Miscellaneous** (These books do not provide specific information about interventions, but are useful for diagnosis, report writing, etc. These can not be used for the outline required.)


Clinical Axioms from:
1. "Theories of psychotherapy should anchor, not drown, the therapist."
2. "A patient is a sufferer who cannot cope and who believes in the therapist."
3. "Diagnosis in psychotherapy means understanding human conditions that are both unique and universal."
4. "Behind the question, What do I want? is the larger question, Who am I?--or even Am I?"
5. "Patients come to treatment in search of a substitute object, if not a substitute self."
6. "The therapist must establish a psychologically safe environment, wherein anything can be said and any feeling experienced."
7. "The therapist establishes the optimum therapeutic environment through a balance of neutrality and empathy."
8. "The therapist and the patient need to share a view--or myth--of illness and its cure."
9. "A shared myth between the therapist and patient may be culturally inherited, but their shared intention must be mutually cultivated."
10. "By heightening or lowering arousal, the therapist enters the patient's world."
11. "The therapist's suspended attention is not only objective but empathic."
12. "The therapist who "completely understands" the patient has stopped listening."
13. "Therapists tend to underestimate the power of listening and overestimate the power of speaking."
14. "Do not strangle the patient's questions by answering them."
15. "The therapist's silence is intended to facilitate treatment; the patient's silence unintentionally resists it."
16. "Silence is not always golden; it can be misused by the therapist and misunderstood by the patient."
17. "Behind the patient's silence is a wish to be understood without verbalizing."
18. "The therapist and the patient develop a communicative intimacy that does not exist in other relationships."
19. "The patient's patterns of relatedness determine the moment-to-moment course of the therapeutic relationship."
20. "The patient's undue dependency on or failure to get close to the therapist represent two sides of a rapprochement conflict."
21. "The therapist's failure to facilitate transference may reflect excessive activity; failure to establish an empathic bond reflects insufficient feeling for the patient."
22. "Psychotherapy communication can begin only where ordinary conversation leaves off."
23. "Only the unconscious can reach the unconscious."
24. "Anything that can't be said concisely is best not said at all."
25. "The therapist must develop a latency of response, then work further to shorten the time."
26. "The patient will be both eager for and resistant to change; the therapist must accept the patient's whole while rejecting dysfunctional parts."
27. "The therapist never rests in the presence of negative transference."
28. "Positive transference can be perilous and is the main culprit in benign premature termination, acting out, and prolonged dependency."
29. "The therapist may be deceived by positive transference of any stage of the therapy, when the therapist's self-image matches the patient's transference disposition."
30. "The therapist's failure to distinguish actual negative feelings from negative transference will enrage the patient and bring the treatment to a rapid end."
31. "The therapist's failure to distinguish actual positive feelings from positive transference will diminish the patient and bring the session to a slow end."
32. "The beginning and ending of sessions tend to be untidy and must be tied together."
33. "Exit and entrance lines reflect the transference-related themes of separation and intimacy."
34. "The therapist must not have a private agenda."
35. "The therapist's task is to experience the patient's dilemma, not to solve the patient's problems."
36. "The careful interpretation meets four criteria: optimum timing, minimum dosage, concrete detail, and individual focus."
37. "Theory-driven interpretations are impersonal and alienating to the patient."
38. "Every interpretation is incorrect on some level."
39. "The therapist's technique bends under the weight of the patient's weakness."
40. "All interpretations are deprivations: good ones bring disappointment and bad ones cause disengagement."
41. "The interpretation of symptoms may dissolve resistance, but the interpretation of character traits may generate it."
42. "Minimum cues should not be met with even minimum confrontations."
43. "Good moments and sudden insights may deceive the patient and derail the therapist."
44. "The success of psychotherapy can be attributed to the patient and its failure to the therapist."
45. "Only when the patient becomes more vulnerable within treatment will he or she become less vulnerable outside treatment."
46. "Therapy, like all relationships, is time-limited."
47. "Psychotherapy is like a slow-cooking process that has no microwave substitute."
48. "Every therapist must be prepared for the element of surprise--which can only come in the psychotherapy experience itself."