

**City University of Hong Kong
Course Syllabus**

**offered by Department of Applied Social Sciences
with effect from Semester A 2015 / 16**

Part I Course Overview

Course Title:	Cognitive-Behavioural Interventions
Course Code:	SS5208
Course Duration:	One Semester
Credit Units:	3
Level:	P5
Medium of Instruction:	English, supplemented by Cantonese/Putonghua in live demonstration, skills rehearsal, and role-play exercises as situation requires
Medium of Assessment:	English
Prerequisites: <i>(Course Code and Title)</i>	Nil
Precursors: <i>(Course Code and Title)</i>	Nil
Equivalent Courses: <i>(Course Code and Title)</i>	Nil
Exclusive Courses: <i>(Course Code and Title)</i>	Nil

Part II Course Details

1. Abstract

This course provides both theoretical understanding of and practical experiences for students to use cognitive behavioral interventions in working with people with mental health problems. Upon completion of the course, students should be able to:

- i. Acquire understanding of the major concepts and frameworks of cognitive behavioral interventions.
- ii. Develop initial skills in using CBIs in assessing and working with people with mental health problems.
- iii. Reflect critically on the strengths and limitations of CBIs in clinical practice

2. Course Intended Learning Outcomes (CILOs)

(CILOs state what the student is expected to be able to do at the end of the course according to a given standard of performance.)

No.	CILOs	Weighting (if applicable)	Discovery-enriched curriculum related learning outcomes (please tick where appropriate)		
			A1	A2	A3
1.	Describe the theoretical framework of CBIs in working with people with mental health problems	20%	√		
2.	Apply CBI models in assessing clients with mental health problems	20%		√	
3.	Apply CBTI intervention models in facilitating changes in clients with mental health problems	20%		√	
4.	Demonstrate initial assessment and intervention skills in working with clients with mental health problems	20%			√
5.	Reflect critically on the different CBI frameworks in working with people with mental health problems	20%	√		
		100%			

A1: Attitude

Develop an attitude of discovery/innovation/creativity, as demonstrated by students possessing a strong sense of curiosity, asking questions actively, challenging assumptions or engaging in inquiry together with teachers.

A2: Ability

Develop the ability/skill needed to discover/innovate/create, as demonstrated by students possessing critical thinking skills to assess ideas, acquiring research skills, synthesizing knowledge across disciplines or applying academic knowledge to self-life problems.

A3: Accomplishments

Demonstrate accomplishment of discovery/innovation/creativity through producing /constructing creative works/new artefacts, effective solutions to real-life problems or new processes.

3. Teaching and Learning Activities (TLAs)

(TLAs designed to facilitate students' achievement of the CILOs.)

TLA	Brief Description	CILO No.						Hours/week (if applicable)
		1	2	3	4	5		
TLA1: Lecture	Lectures will be delivered to help students understand the theoretical foundations and practical skills of CBIs, helping them to critically examine the strengths and limitations of CBIs for different types of mental health problems.	√	√	√		√		
TLA2: Video-viewing/life demonstration	Videos will be played to facilitate students to learn the skills (i.e. selected CBT models) in assessment and intervention.	√	√	√				
TLA3: Role play	Students will be given the opportunity to practice CBI skills with and in front of other classmates.		√	√	√			
TLA4: Group presentation	There will be a chance for students to present in class a CBI model in working with a specific group of people with mental health problems.		√	√	√	√		

4. Assessment Tasks/Activities (ATs)

(ATs are designed to assess how well the students achieve the CILOs.)

Assessment Tasks/Activities	CILO No.						Weighting	Remarks
	1	2	3	4	5			
Continuous Assessment: 100 %								
AT1 Group presentation and skills demonstration	√	√	√	√	√		30%	
Students will be broken into groups and each group will have to present a CBI model: its assessment framework and intervention skills. They have to illustrate how certain assessment and intervention skills work. While the skills demonstration may be conducted in Cantonese/Putonghua, the group presentation must be conducted in English. Since the lecturer will try to summarize the interview in English, only a minimal level								

of Cantonese/Putonghua is expected								
<p>AT2 Reflection paper</p> <p>Following AT1, all students in class will discuss and reflect on the role play demonstration. The presenters will then write an individual reflection paper (no less than 1000 words) to reflect on the insights gained through such an experience and the discussion in class. Critical reflection of the learning experience is stressed. All papers must be submitted in English.</p>		√	√					20%
<p>AT 3 Term paper</p> <p>Students have to write an individual paper of around 2500 words to examine an issue relating to CBI in working with a specific group with mental health problem. In the paper, it must include: (1) how cognitive and behavioural theories conceptualize the chosen mental health problem or issue, (2) what specific CBI assessment and intervention skills that are relevant to the chosen mental health problem or issue, and (3) what are the strengths and limitations of CBI in treating the chosen mental health problem or issue. The target group has to be different from the one that the student has presented in class. All papers must be submitted in English.</p>	√	√	√	√	√			50%
								100%

5. Assessment Rubrics

(Grading of student achievements is based on student performance in assessment tasks/activities with the following rubrics.)

Assessment Task	Criterion	Excellent (A+, A, A-)	Good (B+, B, B-)	Adequate (C+, C, C-)	Marginal (D)	Failure (F)
1. Group presentation and skills demonstration (30%)	Organisation and quality of material presented <ul style="list-style-type: none"> • Organisation of material was logical • Information presented was sensible/accurate • Material presented demonstrated application and comprehension of material covered in the course • Material presented demonstrated autonomous research effort 	Excellent organisation and quality of material	Good organisation and quality of material	Adequate organisation and quality of material	Marginal organisation and quality of material	Poor organisation and quality of material
2. Reflection paper (20%)	Critical reflection <ul style="list-style-type: none"> • Ability to digest and critically review the comments made in class • Ability to formulate arguments in a coherent manner • Ability to write clearly and logically • Ability to provide counter-arguments 	Outstanding	High	Moderate	Basic	Not reaching marginal
3. Term paper (50 %)	Organisation and quality of material (50%) <ul style="list-style-type: none"> • Organisation of material was logical • Information presented in the paper was sensible/accurate • Material presented in the paper demonstrated application and comprehension of material covered in the course Critical analysis (50%) <ul style="list-style-type: none"> • Ability to digest and critically review the materials read • Ability to formulate arguments in a coherent manner • Ability to write clearly and logically • Ability to provide counter-arguments 	Outstanding	High	Moderate	Basic	Not reaching marginal

Part III Other Information (more details can be provided separately in the teaching plan)

1. Keyword Syllabus

(An indication of the key topics of the course.)

- 1.1 Understanding major CBI frameworks for different types of mental illness
Beck's Cognitive Therapy framework in understanding depression and anxiety, other CBI in conceptualizing eating disorders, personality disorders, psychosis, substance abuse and stress
- 1.2 CBI assessment frameworks in mental illness
Different CBI assessment frameworks for different types of mental illness, assessment skills relevant to the types of mental illness, practising the assessment skills
- 1.3 CBI intervention strategies for mental illness
Different CBI intervention strategies for treating different types of mental illness, practising different intervention skills
- 1.4 Critical reflection on the strengths and limitations of different CBIs
Strengths and weaknesses of different CBIs framework in assessing and working with different types of mental health problems, contrasting their relative effectiveness with other clinical models such as structural family therapy for eating disorders and behaviour therapy for depression and anxiety, research evidence of different types of CBIs and other clinical approaches in treating different types of mental illness

2. Recommended Reading

2. Reading List

2.1 Compulsory Readings

(Compulsory readings can include books, book chapters, or journal/magazine articles. There are also collections of e-books, e-journals available from the CityU Library.)

1.	Beck, J. (2011). <i>Cognitive Behaviour Therapy: Basics and Beyond</i> . New York: Guilford Press.
2.	Cormier, W. H. and Cormier, L. S. (1991). <i>Interviewing Strategies for Helpers: Fundamental Skills and Cognitive Behavioural Interventions</i> . CA: Brooks/Cole Publishing Company.
3.	Dryden, W. and Golden, W. L. (1987). <i>Cognitive-Behavioural Approaches to Psychotherapy</i> . New York: Hemisphere Publishing Corporation.

2.2 Additional Readings

(Additional references for students to learn to expand their knowledge about the subject.)

1.	Clark, D. and Beck, A. T. (1988). Cognitive Approaches. In C. G. Last and M. Hersen (eds.), <i>Handbook of Anxiety Disorders</i> . New York: Pergamon Press.
2.	Wong, F. K. D. (2007). Cognitive behavioral treatment groups for people with chronic depression: A randomized waitlist control design. <i>Depression and Anxiety</i> , 25, 2, 142-148.

3.	Wong, F. K. D., Chau, P., Kwok, A. & Kwan, J. (2007). Cognitive-behavioral treatment group for people with chronic illnesses in Hong Kong: Reflections on culturally sensitive practices. <i>International Journal of Group Psychotherapy</i> , 57, 3, 367-385.
4.	Wong, F. K. D. (2008). Cognitive and health-related outcomes of cognitive behavioral treatment groups for people with depressive symptoms in Hong Kong: A randomized waiting list control study. <i>Australian and New Zealand Journal of Psychiatry</i> , 42, 703-712.
5.	Wong, F. K. D. (2009). A six-month follow-up study of cognitive behavioral treatment groups for Chinese people with depression. <i>Behaviour Change</i> , 26, 2, 130-140.
6.	Wong, F.K.D. (2011). Cognitive behavioural group treatment for Chinese people with depressive symptoms in Hong Kong: The participants' perspective. <i>International Journal of Group Psychotherapy</i> , 61, 3, 439-459.
7.	Wong, F.K.D., Poon, A. & Kwok, S.L.Y.C. (2011). The maintenance effect of cognitive-behavioural treatment groups for Chinese parents with children with developmental disabilities in Melbourne, Australia: A six-month follow-up study. <i>Journal of Intellectual Disability Research</i> , 55, 1043-1053.
8.	情緒管理與精神健康 -- 認知治療小組介入手法與技巧 (2003)
9.	走出抑鬱的深谷：認知治療自學輔助手冊 (2005)
10.	駕馭焦慮：認知治療自學輔助手冊 (2006)
11.	http://beckinstitute.org
12.	http://www.babcp.org/