This course is the last in a five-course social work practice sequence and is designed to provide an integrative experience of class and field. Students are given an opportunity to: (1) assess prior learning, and (2) assess and define their learning needs, practice skills and theoretical background. They will plan and develop structured learning experiences. Focus is on the development of an individual social work practice frame of reference. The course draws on the student’s field practicum experiences. Careers and graduate systems are explored with emphasis on skill practices for entry level generalist practice and the post graduate market.

COURSE RATIONALE:

At the completion of this course, the student is expected to:

1. Articulate a clear conception of the domain of social work and competencies required of a
generalist practitioner for the change process.

2. Demonstrate the ability to apply the science of social work, the profession’s knowledge base, and its ethical principles.

3. Delineate the varied roles performed by social workers in delivering services and the specific function associated with those roles.

4. Articulate professional social work values in a manner consistent with personal values and attitudes.

REQUIRED TEXTBOOK


SUPPLEMENTAL TEXTS

All textbooks used throughout the student’s academic career in social work.

COMPETENCIES & LEARNING BEHAVIORS

The following Student Learning Objectives/CSWE EPAS Competencies, Practice Behaviors and Department of Social Work Underpinnings will be assessed in this course, via an Assessment Rubric, which will be either placed on Blackboard or handed out in class.

Obj. I, EP 2.1.1 Identify as a professional social worker and conduct one self accordingly.

Practice Behaviors
PB 2 Practice personal reflection and self-correction to assure continual professional development

Obj. II EP 2.1.2 Apply social work ethical principles to guide professional practice.

PB 8 Make ethical decisions by applying standards of the NASW Code of Ethics, as applicable, of the IFSW/IASSW Ethics in Social Work, Statement of Principle

Obj. III EP 2.1.3 Apply critical thinking to inform and communicate professional judgments

PB 12 Analyze models of assessment, prevention, intervention, and evaluation

Obj. IV EP 2.1.4 Engage Diversity and difference in practice

PB 14 Recognize the extent to which a culture's structure and values may oppress, marginalize, alienate, or create or enhance privilege and power

PB 15 Gain sufficient awareness to eliminate the influence of personal biases and values in working with diverse groups

Obj. V EP 2.1.5 Advance human rights and social and economic justice
PB 18 Understand the forms and mechanisms of oppression and discrimination

Obj. VI EP 2.1.6 Engage in research-informed practice and practice-informed research.

PB 21 Use practice experience to inform scientific inquiry

PB 22 Use research evidence to inform practice

Obj. VII EP 2.1.7 Apply knowledge of human behavior and the social environment

PB 23 Utilize conceptual frameworks to guide the processes of assessment, intervention, and evaluation

Obj. VIII EP 2.1.8 Engage in policy practice to advance social and economic well-being and to deliver effective social work services

PB 25 Analyze, formulate, and advocate for that advance social well-being

Obj. IX EP 2.1.9 Respond to contexts that shape practice.

PB 27 Continuously discover, appraise, and attend the changing locales, populations, scientific and technological developments, and emerging societal trends to provide relevant services

PB 28 Provide leadership in promoting sustainable changes in service delivery and practice improve the quality of service

Obj. X EP 2.1.10(a) Engagement

PB 29 Substantively and affectively prepare for action with individuals, families, groups, communities and organizations

Obj. X EP 2.1.10(a) Assessment

PB 32 Collect, organize, and interpret client data

PB 33 Assess client strengths and limitations

PB 35 Select appropriate intervention strategies

Obj. X EP 2.1.10(c) Intervention

PB 36 Initiate actions to achieve organizational goals

PB 37 Implement prevention interventions that enhance client capabilities
PB 38 Help clients resolve problems

PB 39 Negotiate, mediate, and advocate for clients

Obj. X 2.1.10(d) Evaluation

PB 41 Critically analyze, monitor, and evaluation interventions

Department of Social Work Underpinnings

1. **Strengths Perspective** – Internal or external features and assets that, if identified, mobilized or enhanced may be used by a client system to achieve positive change.

2. **Empowerment Perspective** — The process the social worker applies in order to help individuals, families, groups, organizations, and communities obtain power so that they gain greater control over their well-being presently and in the future.

3. **Rural Perspective** — The understanding that people who are nurtured and live in rural communities have unique folkways and mores that shape some of their expectations and behaviors differently than people from other milieus.

4. **Global Perspective** – An approach to helping that embraces the commonalities and differences that exist personally, communally, culturally and religiously that all citizens in the world share regardless of their place of birth or citizenship.

5. **A Black Perspective for Social Work Practice** – A prototype for understanding the unique experiences and world views associated with being of African genetic origin in the United States that can be used in practice with other oppressed client systems.

COURSE REQUIREMENTS

1. Classroom Attendance
2. Professional participation in classroom discussions and activities. (Students will use required readings, journal articles, and other professional documents to document).
3. Satisfactory completion of scheduled assignments (inability to do so will result in grade reduction or failure)
4. Assigned course readings.

The specific semester’s grade will be determined by several exercises, two papers, and class participation. *Unexcused absences* will constitute 5% of the participation grade.

ATTENDANCE POLICY

Since regular class attendance is a vital part of the educational process, students are required to attend all classes and to be present throughout the class period. The Office of the Provost and Vice President for Academic Affairs issues excuses for students who are absent from classes.
while participating in official University related activities or on University related travel. *If the absence is excused by the Office of the Provost and Vice President for Academic Affairs for the student’s participation in official University related activities, all work [tests, quizzes, due assignments, etc] may be made up.* In all other cases, only the instructor can approve a student’s request to be absent from class. A student’s final grade in a course will not be reduced solely because the student has incurred absences. (This policy is consistent with University Policy, effective Spring 2000.)

In this course, the student is responsible for requesting approval, in writing, ahead of time when an absence is *planned*. In the event of an unexpected absence, the student needs to advise the instructor as soon as possible after that absence. Unapproved absences and absences, without timely written notification to the instructor, will *not be excused*.

**MAKE-UP POLICY FOR EXAMINATIONS AND ASSIGNMENTS**

Each student is expected to take tests/exams and submit written assignments on the scheduled date and time that such work is due. Exams will be given either using blackboard or paper and pen/pencil. Make up exams are given only in extreme cases and only after the student provides adequate documentation of circumstances beyond the student’s control. A student who is not able to take a test as scheduled, must notify the instructor in advance and then must schedule and take a make-up test within three (3) days. A student who does not follow this procedure will receive a grade of zero on the test. Also, in fairness to students who take the exam on time, 10% will be deducted from makeup exams. Quizzes (announced or unannounced) may not be made up. All papers and case-analyses are due in class on the assigned dates. Due dates for some of the papers and assignments will be indicated on the assignments. A point a day will be deducted for late papers. If the absence is excused by faculty/staff/advisor for the student’s participation in official University related activities, all work (tests, quizzes, due assignments, etc.) may be made up. The instructor reserves the right to make exceptions to this make-up policy in case of inclement weather, recognized religious holidays, and extenuating circumstances. *The instructor does not print or photocopy papers for students.*

**STUDENTS’ RESPONSIBILITY FOR INCOMPLETE GRADES**

Students are expected to complete all course requirements and stay on track with the course, regardless of his or her presence in class. Failure to meet these responsibilities may result in a grade of “I” (Incomplete) that automatically turns into an “F” after six (6) weeks into the next semester. An Incomplete grade will be given if:

1. At least 80% of the course work has been successfully completed so that a passing grade can be earned.

2. The student has made arrangement with the instructor prior to the time that final grades are assigned.

3. The student has provided information necessary to satisfy the instructor that circumstances beyond the control of the student has prevented him or her from completing the required work by the established deadline(s).

4. The students have met the minimum requirement for attendance.

**STATEMENT ON EQUAL OPPORTUNITY**
Delaware State University is an equal opportunity institution committed to extending educational equality and non-discrimination in all programs and services of the University to all persons, regardless of race, religion, gender, creed, color, national origin, ancestry, age, marital status, sexual orientation, disability, veteran status, genetic information or other legally protected classification. This policy is in compliance with Titles III and VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Delaware Code. General Equal Opportunity inquiries/complaints (whether informal or formal) should be directed to: the Assistant Vice President of Human Resources and Legal Affairs, 325 Administration Building, Delaware State University, Dover, Delaware 19901 or to the applicable coordinator listed in the directory.

GRIEVANCE PROCEDURE UNDER TITLE VI AND TITLE IX

Title VI of the Civil Rights Act of 1964 prohibits discrimination against various protected classes by educational institutions. Title IX prohibits discrimination based on gender. The following grievance procedure should be used by any student or other member of the public that believes that Delaware State University or any member of the College Community has engaged in any form of discrimination in violation of these laws, or otherwise violated the University’s Statement on Equal Opportunity, in any of its programs and services, with two exceptions. This grievance procedure does not apply to any issues involving employment, and there is a separate procedure regarding discrimination against persons with disabilities. In addition to the Assistant Vice President of Human Resources and Legal Affairs, ADA inquiries and/or issues may be directed to Laura Kurtz, Delaware State University’s Director of Academic Support Center and Disability Services, 302-857-6388.


AMERICANS WITH DISABILITIES ACT (ADA) AND SECTION 504 OF THE REHABILITATION ACT OF 1973

In accordance with ADA, Title II and Section 504 of the Rehabilitation Act of 1973, programs at the University must be accessible to all persons with disabilities. To provide academic program accessibility, it may be necessary to reschedule classes to accessible facilities. With respect to nonacademic programs, it may be necessary to schedule appointments and activities in accessible facilities. Delaware State University will make reasonable accommodations for persons with disabilities.

Any student with a disability who needs information or assistance with a disability should contact the Office of Disabilities Services in Room 214A of the William C. Jason Library, 857-7304. The Office of Disabilities Handbook can be found at http://www.desu.edu/sites/default/files/u73/ODS%20handbook.pdf

HONESTY POLICY

Integrity must be practiced in all endeavors and relationships. All acts of dishonesty including, but not limited to, cheating on tests and examinations, plagiarism, unauthorized collaboration, alteration or misuse of college documents, records or identification cards, forgery, misrepresentation, unauthorized use of another’s property, lying, theft, or receiving stolen goods will be considered serious misconduct. Any student violating this policy is subject to dismissal.
UNIVERSITY GRADING SCALE:

90-100  =  A
80-89   =  B
70-70   =  C
60-69   =  D
0-59    =  F

Assessment Criteria for Measuring Learning Objectives/EP Competencies, Practice Behaviors and Department Underpinnings

<table>
<thead>
<tr>
<th>Grade</th>
<th>Score Range</th>
<th>Description</th>
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<tbody>
<tr>
<td>A</td>
<td>95-100</td>
<td>Excellent, perfect/without error, clear readily understandable</td>
</tr>
<tr>
<td>A-</td>
<td>90-94</td>
<td>Extremely well done-errors do not detract from clarity</td>
</tr>
<tr>
<td>B+</td>
<td>85-89</td>
<td>Very well done, some errors and lacks some clarity</td>
</tr>
<tr>
<td>B</td>
<td>80-84</td>
<td>Well done, but amount of errors detract from clarity</td>
</tr>
<tr>
<td>C+</td>
<td>75-79</td>
<td>Good; errors &amp; content are substantial distraction</td>
</tr>
<tr>
<td>C-</td>
<td>70-74</td>
<td>Acceptable, but with major errors and lacks clarity</td>
</tr>
</tbody>
</table>

1. **Advanced**- Students demonstrated an outstanding understanding, clear recognition and sound application of all dimensions of this practice behavior or underpinning.
2. **Proficient**- Students demonstrated an acceptable understanding, recognition and application of all dimensions of this practice behavior or underpinning.
3. **Satisfactory**- Students demonstrated a limited understanding, recognition and application of all dimensions of this practice behavior or underpinning.
4. **Unsatisfactory**- Students demonstrated little to no understanding, recognition and application of all dimensions of this practice behavior or underpinning.

COURSE ASSIGNMENT WEIGHTS

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theoretical Presentation &amp; Paper</td>
<td>20%</td>
</tr>
<tr>
<td>Annotation &amp; Critique of Curriculum</td>
<td>15%</td>
</tr>
<tr>
<td>Assessment Paper</td>
<td>20%</td>
</tr>
<tr>
<td>Individual Frame of Reference</td>
<td>30%</td>
</tr>
<tr>
<td>Application of Theory to Practice</td>
<td>15%</td>
</tr>
</tbody>
</table>

COURSE OUTLINE

(A detailed course outline including, specific dates, etc., will be made available at the third class meeting)

I. Why Theoretical Orientation Is Important
A. A Personal Experience.
B. The Big Puzzle.
C. What is Theoretical Orientation?
D. The Helper’s Tool Belt.
E. What Can A Theoretical Orientation Do For Me?
F. How Have Others Picked A Theoretical Orientation?
G. Once I Have It, How Can I Use It?
H. How Are Theoretical Orientation and Ethics Related?
I. How Can Theoretical Orientation Help Me Examine Values?
J. The Main Points.

II. Incorporating Theory into Practice

A. Making Theory Useful: A Model for You and Me.
B. Theory Development.
C. OUR Life Philosophy.
D. School of Thought.
E. Theories.
F. Goals and Techniques: Interventions at Work.
G. Further Multicultural Concerns.
H. Resistance to Theories: Eclectic, Integrated, or Just Don’t Know.
I. I Mean, Really, Does it Work?
J. What to Take Home.

III. The Top Ten Ways to Find Your Theoretical Orientation

A. Find Yourself.
B. Articulate Your Values.
C. Survey Your Preferences with the STS.
D. Use Your Personality.
E. Capture Yourself.
F. Let Others Inspire You in Your Learning.
G. Read ORIGINAL Work.
H. Get Real.
I. Study With a Master.
J. Broaden Your Experiences.

IV. Theories of Helping

A. The Schools of Thought and Their Theories.
B. Psychodynamic School of Thought.
C. Psychoanalytic.
D. Analytic Psychology.
E. Individual Psychology.
F. Transactional Analysis.
G. Behavioral School of Thought.
H. Behavioral Therapy.
I. Humanistic School of Thought.
J. Client Centered.
K. Existential.
L. Gestalt.
M. Pragmatic School of Thought.
N. Cognitive Behavioral.
O. Rational Emotive Behavioral Therapy.
P. Reality Therapy.
Q. Contemporary Schools of Thought.
R. Multicultural Counseling & Therapy.
S. Feminist Theory.
T. Narrative Approaches.
U. Solution Focused Brief Therapy.
V. Community Theories for Practice
W. Organization Theories for Practice
X. Additional Theories from other Disciplines

IV. Case Examples for Integrating Theory to Practice

A. Clinician Case Studies.
B. Case One: Tony’s Experience.
C. Case Two: Jill’s Experience.
D. Case Three: Travis’s Story.
E. Case Four: The Singing Counselor.
F. Comment on the Cases.
G. Client Case Studies.
H. Case One: Tim the Graduate Student.
I. Case Two: Miss or Mrs. Barbara.
J. Case Three: Cheryl.
K. Supervisory Case Studies.
L. Case One: Grace the Humanist.
M. Case Two: Dominick Missed It.
N. Case Three: Jason the Joiner.
O. Summary.

V. How Theory is Found

A. Many Can Benefit.
B. The Field.
C. Social Work in the Community
D. Social Work with Organizations
E. Group Case Studies
F. Community Case Studies
G. Organizational Case Studies

VI. Putting it All Together.

VII. Importance Revisited.
I. Theoretical Presentation and Paper

Students, individually or placed in very small groups will review theories previously presented in Human Behavior and Social Environment I and II and in the Social Work Practice II classes as well as research additional selected counseling and social work theories and make an oral report to the class. Each student will provide a written copy of the section completed and will receive an individual, as well as a group grade for both the oral and written report. The report will be completed using the following outline:

1. basic assumptions,
2. views of assessment,
3. goals of intervention and
4. intervention approaches
5. evaluation of Theory, See Bradley.

Oral Presentation Due Date: TBA by class
Typewritten Report Due Date: TBA by class

II. Annotation of Texts and Critique of Curriculum and Courses (Exit Interview) (Group Paper)

An exit interview is conducted in this final practice course, 39-460, Senior seminar. Students are given the opportunity to share their assessment of how well the program has prepared them for a career in professional social work and the relevance of the BSW curriculum.

Students are expected to provide an annotation of each text that was used in their courses in the BSW program. Additionally, they are requested to critique each course they have completed and/or in which they are currently enrolled. The format to be utilized is attached at the end of this syllabus. The completed paper should reflect the opinions of all members of the group.

Due Date: Typewritten Paper to be turned in – TBA by Class

A. Guidelines for Critique of Courses and Annotation of Textbooks

1. Course Number and Title
2. Semester and Year completed
3. Evaluation of Course:
   Critique the course. Identify each course and indicate if the course objectives and expectations were appropriate to your learning needs based on prior courses completed (if first social work courses, did general education requirements prepare you for the content to be covered?). Did the prior social work courses prepare you for this course? Did the course meet the requirements for knowledge noted in the CSWE Curriculum Policy statements? Did the course meet learning objectives?

4. Additional Comments on the Course:
   Would you recommend that any changes or modifications be made to the course? Did this course duplicate prior knowledge? Are there additional topics that should be covered? Any topics that should not be covered? Other comments.
B. GUIDELINES FOR ANNOTATION OF TEXTBOOKS

For each course, complete the following:
1. Author(s) and Title of Text(s)
2. Main Thesis of Text(s):
   State in logical sentences what you consider to be the author(s) purpose for writing this text.
3. Key Ideas of Text(s):
   Extract and list the ideas explicit in the text in complete sentences. It may require several sentences to convey these ideas. State them in your own words. Do not copy. Use Arabic numbers to identify each idea.
4. Evaluation of Text(s):
   State whether the textbook was appropriate for the course. Did it meet the needs for providing the information necessary to meet the objectives of the course? Of the CSWE curriculum statement for that sequence? Your learning needs? Your justification should be based on what you extracted as key ideas.

The assignment should include a cover sheet on which should be listed the course number, (39-460), title of the course, (Senior Seminar), semester and year, date, and assignment (see title above).

III: ASSESSMENT PAPER

There are three (3) options for the assessment paper required for this class. Each permit the student an opportunity to demonstrate the integration of theory with practice. Hence, field practicum experience should be used to illustrate and support the content of your paper. This paper is a major analytical project dealing with various aspects of your field experience. You may choose between the social problem, the agency or the community/organization aspect.

Two (2) copies of your written report are to be turned in. With your permission, one copy will be forwarded to your field practicum site instructor for his or her perusal.

A. Format

Most analytical reports fall into two categories: (1) a specific problem you deal with or (2) an analysis of the workings of the agency/organization/institution. If you wish to write a paper on another aspect of your field study, you must present a content outline for approval. Papers will be discussed in class.

What follows are the points the papers should address:
1. A report that deals with a specific problem(s) should include:
   a. An explanation of the nature of the problem (i.e., How did the problem evolve: How extensive is the problem? Who is affected?).
   b. A description and an analysis of past and present attempts to deal with the problem. This should be restricted to major efforts which have a direct effect on present policy.
   c. What have been the organization’s efforts to deal with the problem(s)?
   d. A description of the organization’s present policies that are intended to solve the problem. How were they devised? What was their intention? (Descriptive)
e. How **effective has the implementation of initiatives** to resolve the problem been? What are the consequences? (Assessment)

f. **How would you improve** on the policies? What are your proposals? (Prescriptive)

2. A report that discusses **organizational problems** should include:
   a. **A description the origin of the organization** (this term will be used interchangeably with agency or institution; it refers to your practicum site). How and why was it established?
   b. **Analysis of the organization structure.**
   c. **With what other organizations does it interface?**
   d. **Definition and description of the real workings of the organization** (i.e., Is there a difference between the formal structure and the informal lines of communication, power and influence?)
   e. **Analysis of organizational programs.** Do they do what they are designed to do?
   f. **Prescription.** What is your prescription (solutions/proposals) for ensuring that the organization do what it was designed to do?

3. **Assessment of Agency – Format**
   a. **The Organizational Context of Practice** – Identity your practicum organization. Describe the purpose and goals of the organization and the services provided. Are there significant limitations to the service the organization can provide? How is eligibility for services determined? Indicate via specific examples how the policies and established procedures of our organization influence your activities and the services you were able to provide.

   b. **The Community Context of Practice** – Describe the community context of your practicum experience. Were your services directed toward any specific subgroup or special social problems within the community? Are there unique characteristics of the region, community or segment of the community which have particular relevance for your practice? What are the predominant problems, issues, and concerns of the people you were serving? To what degree were these concerns a function of the broader community or social issues?

   c. **Assessment of Existing Social Policy** – Identify the major social policies and programs which affect the concerns of the population you were serving. Assess the impact of these policies upon the problems in question. If existing social policy is not adequate, describe what is needed and indicate how you, your organization and other resources have attempted to address the need for new or revised social policies and programs.

   d. **Utilization of Community Resources** – Describe the formal and informal social resource networks within the community which were relevant to your practice. Include a description of at least three resources. These need not be restricted to formal social service organizations. Whose services were particularly relevant to your activities? Describe a specific episode in which you served as a link between an individual client, family, group, organization or community and community resource. Indicate why involvement outside your agency was appropriate and detail your activities in establishing the linkage.
**IV: Individual Frame of Reference Presentation/Paper**

**Due Dates:** Oral Presentation of Frame of Reference model to be developed and presented on dates convenient to the students and his or her plan for field instruction.

**Outline for Frame of Reference for Social Work Practice**

**Presentation and Paper**

A. Individual Definition of Social Work
   1. Social Work’s Purpose(s)
   2. Social Work’s Function(s)

B. Individual Basic Assumptions Regarding Social Work Practice
   1. Knowledge Components
   2. Values
      a. Personal
      b. Professional
      c. Value Tensions (conflicts between professional and personal values, those for which one must make an ethical decision based on defining who is really the client, one in which one or more ethic, mores or learned values may appear correct)

III. Practice Models

A. Behavioral Theories which Underpin Model
   1. Identify at least three different HBSE and/or practice theories which make your model unique.
   2. What holds these theories together?
   3. Why will it work for your specific population based on evidence-base literature and practice experience?

B. Major Concepts (e.g., what type system? - open vs. closed systems?)
   1. Will the model work for both systems? If so, how? (What is it about the model that will allow it to do so)

C. Integrative Concepts (which ideas pull your concepts together?)

D. How does a Black perspective for social work practice, the strengths perspective, the rural perspective, the global perspective and empowerment part of your conceptual framework?

IV. Identification of Skills Considered Important and/or Planned for use in one’s Social Work Practice

V. Identification of Target Population(s) field(s) of practice and/or Social Problems which Individual Desires to Work.

VI. Identification of Strengths of Individual Model

VII. Identification of Limitations of Individual Model

VIII. Plan for Further Development of Individual Model

IX. Plan for Assessment of One’s Own Practice and Future Development of Self

**Instructors Comments:**

Since the paper is an individualized project, the instructor(s) will be available to work closely
with each student (appointments only). Feel free to ask any other instructor, not only in this department, but others, to review your work, evaluate your model and help you work through your questions. Look for the lights to come on.

Evaluation/Integration carries the highest weight in evaluation of the paper. The frame of reference is considered integrated if it reflects relatively conscious, purposeful selection of value commitments which are organizing and characterizing.

The assignment for an individual practice frame of reference assumes the student has been exposed to a variety of value systems, models, theories, frameworks and paradigms and ideas and has weighed them with some degree of intellectual, emotional and moral freedom, ultimately accepting and embracing some and actively rejecting others.

One must be aware of self to creatively apply himself or herself creatively through application of his or her frame of reference. He or she must also be responsive primarily to the needs of clients rather than ones own needs. To be considered integrated in the cognitive domain, the student’s frame of reference must demonstrate the capacity to practice. This may be evidenced by the selection of concepts for the framework which:

1. Fit together easily (e.g. Erickson’s or Levinson's stages and task-centered interventions),
2. Fit together with some degree of tension (e.g., conflict or role theory and social chance) but should not be so conflicting as to be incompatible (e.g., belief and commitment to client self-determinism vs. dualistic views of abortion; divorce and contraception as religiously or morally wrong).

In all cases, individual means you. Development of your presentation and your paper should reflect your knowledge, values, skills, ideals and ability to integrate theory with practice. This is a statement about your frame of reference for generalist social work practice with individuals, families, communities, groups and organizations.

Each student is expected to give a 15-30 minute oral presentation to the class which is later developed into the formal paper. All papers must be typed, double-spaced, with 1 inch margins, and include all of the elements of the outline. Since your frame of reference will be based on various theories and concepts, please give credit to your various resources. The paper MUST follow the APA format.

**Evaluation of Individual Frame of Reference (See rubric at end of syllabus for evaluation of written and oral presentations)**

Evaluation of the presentation and the paper is based on the following:

1. Thorough coverage of all major points of the outline
2. Organization of material
3. Clarity of discussion
4. Creativity
5. Documentation of sources in text and bibliography
6. Evaluation/integration of the frame of reference

V. **APPLICATION OF THEORY TO PRACTICE (In-Class Assignment and Presentation)**
Each student is expected to choose one case from his or her caseload for assessment throughout the academic semester. The student is expected to assess the case utilizing a minimum of five (5) of the intervention techniques/theories presented and covered in class or assigned as readings. Students must demonstrate use of evidence based literature as a criterion for the decision to include a particular intervention in one’s repertoire of intervention methods.

Assessment consists of evaluating the relevant factors in a client’s life to identify themes for further exploration while assisting the client. Diagnosis, which is sometimes part of the assessment process, consists of identifying a specific category of psychological problem based on a pattern of symptoms.... ...A practitioner’s view of the assessment will depend on his or her theoretical orientation. For instance, psychoanalytically oriented therapists tend to favor diagnosis as one way of understanding how past situation have contributed to an individual’s dysfunctions. Practitioners with a behavioral orientation also favor diagnosis, for they emphasize observation and other objective means of appraising both a client’s specific symptoms and the factors that led up to the person’s malfunctioning. On the other side of the issue are the person-centered practitioners, who maintain that diagnosis is not essential for counseling because it tends to pull therapists away from a subjective way of understanding their clients and fosters an external conception about them. (Coser, 1999. Pg. 12).

The student’s individual assessment is a legitimate part of generalist practice. Based on his or her theoretical perspective, each student is able to view a case from his or her individual frame of reference. Each theoretical orientation focuses on a particular dimension of human experience as a route to changing other facets of personality. For example, both Adlerian and cognitive-behavior therapists emphasize the client’s cognitions under the assumption that if they are successful in modifying beliefs and thought processes, behavior changes will follow and feelings will eventually be modified.

Selecting an intervention technique or therapy will depend on whether the social worker’s goals are oriented toward changing thoughts, feelings, or behaviors. In addition to working with a client as an individual, there may be significant therapeutic value in bringing in members of the family of origin, the current family, and significant others. Seeing the client as a part of a system may provide another dimension that can deepen therapy.

The challenge that you, as the worker will face as you encounter your case is how to utilize an integrative approach as you draw on a variety of techniques to help your client work through his or her struggles. This assignment is expected to help you in this process and ultimately in developing an integrative approach or your model of counseling/therapy for your individual frame of reference for social work practice.

Techniques are much more effective when they are tailored to the needs of the individual client. They work best when they are designed to assist the client in exploring his or her thoughts, feelings, and actions which are within one’s own cultural environment. In this assignment, the student is expected to use one case to consider each intervention perspective from the vantage point of their basic assumptions, views of assessment, goals of therapy and therapeutic approaches.
Social Work Practice Framework
Direct Human Services by Sarah Bradley

Each social worker develops over time a practice framework that guides them in their work with clients, communities and organizations. This framework is comprised of each person's unique combination of perspectives, theories, models and techniques.

This framework is based on empirical data, is consistent with the beliefs and values of the profession and encompasses assumptions, hypotheses and principles that provide a:

- Structure for analyzing and understanding how individuals, families and groups function and change,
- Way of coherently organizing information;
- Systematic and orderly approach to work;
- Rationale for decision-making;
- Guide for differing phases intervention and action;
- Structure for communication with clients and other professionals

A framework is likely to be the most effective if it:

- Regards a collaborative relationship as central to change;
- Provides a sense of hope;
- Enhances client self determination and self efficacy;
- Enhances client strengths;
- Focuses on issues that can be changed;
- Focuses on issues that are consistent with the client's definition of the problem;
- Focuses on the client in context, using culturally relevant interventions;
- Increases client's social supports;
- Increases client's experience of competence and independence

Adapted from:


Perspectives
Direct Human Services Practice by Sarah Bradley

Perspectives are ways of viewing and thinking about practice. These Include:

- Ecosystemic/Ecological System,
- Feminist,
• **Generalist**, and
• **Strengths Perspectives**.

**Ecosystemic/Ecological System** - This perspective honors the mutual relationship between individuals and their environment. It looks at the goodness of fit between the individual's capacities and the environment's resources and capacities.


**Feminist** - This perspective examines the impact of societal beliefs, stereotypes, and practices related to gender and sex roles. It values the feminine attributes of clients and attempts to address societal patriarchy, androcentrism, and sexist practices which seek to oppress and exploit women.


**Generalist** - An approach to practice that involves a holistic understanding of the client on multiple levels - individual, family, community, organizational. This approach integrates various models and theories to help understand the client's situation and uses an eclectic mix of interventions and techniques. Inherent in this perspective is a collaborative process in which the client and the worker have mutual responsibility.


**Strengths** - This perspective focuses on what the client is already doing that is successful. The goal of all interactions is to identify and augment the client's strengths and resources. There is an expectation that strengths exist both in the client and in their larger environment and that the clients know best how to utilize these resources. It also assumes that nobody knows the upper limits of an individual's capacity to grow.


**Theories**

Direct Human Services Practice by Sarah Bradley

Theories are a series of abstractions that are constructed using inductive and deductive reasoning. They attempt to explain observable phenomenon and to answer the question "why?". Theories have two goals - to predict and explain. They are usually developed over time based on multiple observations and subsequent abstractions. Some theories describe and explain behavior and identify how problems arise without guiding intervention (orienting theories) and some theories (practice theories) also offer guidance on how to facilitate change. The pages on orienting theories and practice theories will give you
a brief exposure to some of the major theories utilized in social work practice, but are by no means comprehensive. The books below have been used in formulating this overview and should be consulted for discussions of other theories.

Adapted from:


Critical Analysis of Theories
When evaluating any theory for social work practice it is important to apply a critical analysis of various aspects of the theory. Outlined below are critical analysis questions to ask in evaluating different theories and their applicability to social work practice (Robbins, Chatterjee, & Canda, 1998). The full discussion should be consulted for more depth on each question.

1. What specific aspects of human development and human relations does the theory address and emphasize? To what extent does the theory account for biological, psychological, and spiritual factors as well as social, cultural, and economic forces?

2. What is the theory's relevance and application to individuals, families, groups, organizations, institutions, and communities?

3. How consistent is the theory with social work values and ethics?

4. What are the theory's philosophical underpinnings? All theories contain certain assumptions about the nature of human nature and how knowledge is constructed. Some useful questions to illuminate these assumptions are:
   - Are people seen as good or bad, moral or immoral, changeable?
   - Is behavior biological or environmental, internally or externally driven
   - What about personal free will?
   - Are people ill and deviant or healthy and adaptive?
   - Are social relations competitive or cooperative?
   - Are societal structures explained through understanding individual behavior or is the reverse true?
   - What is healthy or sick, normal or abnormal, functional or dysfunctional?
• Are individuals understood as predominantly biological entities buffeted by the environment or are they understood in terms of spiritual, sacred, holistic qualities?

5. What methods are used in the theory's construction and what is the empirical support? Is there rigorous experimentation and measurement (positivism) or are their subjective, detailed descriptions of context and behavior (constructivism) that support the theory?

6. What leads one to choose or not choose a theory? Why is it appealing or unappealing? How is this theory consistent or inconsistent with our own personal style, beliefs, and experience?


Models
Direct Human Services Practice by Sarah Bradley
Models are sets of concepts/principles that help organize/guide assessment and intervention, but are not necessarily tied to a particular explanation of behavior or problems. Such models Include:

- Addiction
- Crisis Intervention.
- Dialectical Behavioral Therapy, (DBT)
- Family Preservation, (on GSSW's Child Welfare section)
- Family Theories.
- Health Belief Model.
- Medical Model,
- Narrative Therapy,
- Problem-Solving Model, and
- Solution-Focused Therapy.

Annotated Bibliography

Addiction Model - provides a framework for understanding many forms of addiction and presupposes that individuals are unable to change their behavior. While differing explanatory theories are used to understand the development of addiction all agree that over time the behavior becomes compulsive. Change is related to an individual's willingness, ability and readiness to stop the behavior. Often clients are involuntary, but the clinical relationship is collaborative and nonjudgmental. The goal is to assist the client in overcoming their resistance to identifying the problem and then supporting them in implementing a plan of recovery.


Crisis Intervention - see crisis theory
**Dialectical Behavioral Therapy (DBT)** - is a model of intervention with clients who have specific behavioral characteristics mostly commonly thought of as borderline personality disorder. These behavioral patterns include: emotional vulnerability/liability, self invalidation and self loathing, unrelenting crises, inhibited grieving, passive problem solving style, appearance of competence. Linehan (1993) says the dialectical perspective "suggests that within dysfunction there is also function…within destruction one can find construction" (pp. 32-33) which leads to a central tenet of DBT - validation. The cognitive-behavioral interventions are utilized within a framework that focuses on acceptance and validation without judgment and addresses treatment-interfering behaviors all within the context of a strong therapeutic relationship.


**Family Preservation** - discussed in depth on the [child welfare site](#).

**Family Therapy** - There are various models of family therapy outlined at [Theories and Families](#).

**Health Belief Model** - suggests that individuals will engage in health promoting behavior if they believe the behavior will positively impact their lives relative to the cost of compliance. Patients are inclined to adhere to recommendations if they feel the illness impacts attainment of personal goals, detrimentally impact their lives and feel the recommendations do not involve major hardships such as cost, time, or side effects.


**Medical model** - is a biologically based explanation of problems. Individuals have illnesses, with symptoms that require diagnosis and treatment. Historically, clients (patients) are not responsible for the problem and physicians are responsible for the diagnosis and the solution. Biological interventions, such as surgery, diet, medications, radiation, etc. address these biological processes.

**Narrative Therapy** - is rooted in a social constructivist framework and central to this model are clients' narratives or stories. These constructs provide meaning and structure to individuals' lives and reflect their own unique formulation of their life experiences. These narratives do not reflect fixed realities, but are constructions that can be changed. Through dialogue and interaction with the clinician clients are encouraged to elaborate on these stories in such a way that new constructions and realities are possible. Important concepts/techniques are: deconstruction of the narrative, externalizing, contextualizing, amplifying, re-authoring, and therapeutic documents.


**Problem-Solving Model** - believes that all individuals engage in a process of solving to negotiate with their internal and external environments. Failure to solve problems does not reflect defect and failure, but are expected outcomes of the impression of solving problems. Clients have the capacity to solve their own problems, but may be blocked by lack of knowledge, inadequate resources or emotional responses. Critical to the process is the problem definition. Subsequent phases identify goals/solutions, decide on a plan or action, implement the plan, evaluate and if needed try again or terminate.


**Solution-Focused Therapy** - is a strengths based model which focuses on the client as the expert on their situation and believes that clients hold the solutions to their problems. There is little focus on problems, but instead on the instances, exceptions, when the problems don't arise/exist. The clinician and the client collaboratively construct solutions by identifying in concrete behavioral terms what life would look like if the client reached their goal. Techniques integral to solution-focused therapy are: identifying exceptions, the miracle question, reframing and goaling.


**Ethics**

Direct Human Services by Sarah Bradley

Social work values and ethics are at the core of all professional social work practice. It is imperative that each social worker determine what values and ethics guide his or her practice or risks a decision making process guided by emotion. Ethical dilemmas are increasingly common in all areas of practice and deserve careful attention as we navigate through our daily professional lives. In addition to state laws there are various resources available to assist social workers with this area of practice.

Codes of Ethics can be found on web pages of the [National Association of Social Workers](https://www.nasw.org) and the [Clinical Social Work Federation](https://www.clinicalsocialworker.org).

In addition, see [Ethical Principles/Values Hierarchies](https://www.nasw.org/principles-values) and [Ethical Decision-making Models](https://www.clinicalsocialworker.org/articles/ethical-principles-values-hierarchies) below.

**Ethical Principles/Values Hierarchies**


To be used when an applicable code of ethics does not provide specific rules
• Principle of the protection of life
• Principle of equality and inequality
• Principle of autonomy and freedom
• Principle of least harm
• Principle of quality of life
• Principle of privacy and confidentiality
• Principle of truthfulness and full disclosure


- Rules against basic harm to an individuals survival take precedence over rules against harms such as lying or revealing confidential information or threats to additive goods;
- An individual's right to basic well-being takes precedence over another individual's right to self determination;
- An individual's right to self-determination takes precedence over his or her right to basic well-being;
- The obligation to obey laws, rules and regulations to which one has voluntarily and freely consented ordinarily overrides one's right to engage voluntarily and freely in a manner that conflicts with these;
- Individuals' rights to well-being may override laws, regulations and arrangements of voluntary associations in cases of conflict;
- The obligation to prevent basic harms and to promote public goods such as housing, education and public assistance overrides the right to complete control over one's property.


- Respect for autonomy;
- Non-malfeasance - do no harm;
- Beneficence - actively pursue the welfare of others;
- Justice - allocation of resources, fairness, need

Ethical Decision-making Models

Congress ETHIC Decision-making Model, adapted from: Congress, E.P. (1996). Social Work Values and Ethics, Chicago: Nelson-Hall. E - Examine personal, professional, client, agency, societal values T - Think about the applicable ethical standards, laws and legal precedents that apply H - Hypothesize different decisions, their outcomes and the impact on relevant systems I - Identify who will benefit and who will be harmed by these specific decisions keeping in mind the professional values and mission C - Consult


- Identify the problem and factors maintaining the problem;
• Identify all persons, groups, organizations involved in the situation;
• Determine who should be involved in the decision making;
• Identify values involved in the situation - client, family, worker, professional, group, institutional, societal;
• Identify the goals and objectives which may resolve or reduce the problem;
• Identify alternative interventions to reach the goals;
• Assess the effectiveness of each of these alternative strategies;
• Select a strategy;
• Implement the strategy;
• Monitor the implementation of the strategy;
• Evaluate the results.


• Identify ethical issues;
• Identify individuals, groups and organizations that will be affected by the decision;
• Identify different courses of action, risks and benefits, and the individuals involved in each;
• Examine the reasons for and against each course of action utilizing ethical theories/guidelines, codes, laws, practice principles and personal values;
• Consult with colleagues and appropriate experts;
• Make and decision and document the decision-making process
• Monitor, evaluate and document the decision and outcome

Web Resources
Direct Human Services Practice by Sarah Bradley

General Social Work
• National Association of Social Workers Includes Code of Ethics, Standards of Practice for school social work, mental health, clinical social work, case management, cultural competence
• Clinical Social Work Federation
• National Association of Black Social Workers
• National Association of Puerto Rican/Hispanic Social Workers
• School Social Work Association.
• Social Work Internet Resource List
• Social Work Access Network
• National Center for Cultural Competence
• Rural Social Work

Search Engines
• Google metacrawler dogpile about

Writing Resources
• APA Style Format crib sheets:
• CUSSW Writing Lab
Populations: Elderly

- Virtual Library on Aging
- Administration on Aging
- National Center for Health Statistics
- Alzheimer's Association
- Alzheimer's Disease Education and Referral Center
- The Alzheimer Page

Populations: Youth

- National Network for Child Care - info on all levels of child development
- National Institute Of Early Childhood Development and Education (ECI)
- Directory of useful sites on Adolescence
- Child Welfare - Supervising for Excellence
- CDC Youth Violence Prevention - Best Practices

Populations: Families

- Bowen Family Systems Theory: Bowen Center for the Study of the Family
- Bowen Family Systems Theory: Western Pennsylvania Family Center Genograms

Mental Health and Substance Abuse

General mental health information - See also general sites under Health

- SAMHSA Health Info Center -
- Medscape (full text journal articles and discussions)
- At health (newsletters section)
- Mental Help Net
- Medline access - (abstracts from all health journals)
- Navigating the mental health internet (Great tutorial on how to use the net)
- Local Portland Resources Click on Rose City Resources

Clinical practice guidelines and consensus statements - See also under Health

- Expert Consensus Guidelines
- American Psychiatric Association
- Manuals for empirically validated treatments
- Treatment protocols for psychopharmacological treatment of some disorders

Psychopharmacology

- At health Medications Database
- Rx List Medications Database

Substance Abuse

- SAMHSA - Center for Substance Abuse Treatment (CSAT)
- Treatment Improvement Exchange (TIE) SAMHSA Publications on many substance abuse issues: dual disorders, women and children, criminal justice, welfare/TANF
- National Institute On Alcohol Abuse and Alcoholism
- National Institute Of Drug Abuse
• Reclaiming Futures Project

Dual Disorders
• Comprehensive Service Development for Mental Illness, Drug Addiction and Alcoholism
• Ahealth Dual Disorders: links to recent research and treatment models

Advocacy and Support Organizations
• Anxiety Disorders Association.
• National Association. for the Mentally Ill (NAMI)
• National Depressive and Manic-Depressive Disorders Association.
• Obsessive-Compulsive Foundation
• National Center for Post Traumatic Stress Disorder

Health

General Health Information Sites
• National Institutes Of Health Click on NIH Health Info Index
• Healthfinder (DHHS website)
• Medweb -Emory University
• WebMDHealth
• National Center for Health Statistics
• National Library of Medicine Health Info and Medline access (abstracts from all health journals)
• Rx Medications Database

Clinical Practice guidelines and consensus statements:
• National Guideline Clearinghouse
• NIH Consensus Statements on many medical/psych problems
• Medical Algorithms Screenings tools, treatment guidelines for many illnesses:

Illness-Specific Sites
• National Coalition for Cancer Survivorship
• National Cancer Institute
• Abramson Cancer Center of the University of Pennsylvania
• Chronic Illness
• HIV/AIDS
<table>
<thead>
<tr>
<th>Learning Objectives/ Competencies</th>
<th>Practice Behaviors</th>
<th>Assessment Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obj. I, EP 2.1.1</td>
<td>Identify as a professional social worker and conduct oneself accordingly.</td>
<td>PB 2 - Practice personal reflection and self-correction to assure continual professional development</td>
</tr>
<tr>
<td>Obj. II, EP 2.1.2</td>
<td>Apply social work ethical principles to guide professional practice.</td>
<td>PB 8 - Make ethical decisions by applying standards of the NASW Code of Ethics, as applicable, of the IFSW/IASSW Ethics in Social Work, Statement of Principle</td>
</tr>
<tr>
<td>Obj. III, EP 2.1.3</td>
<td>Apply critical thinking to inform and communicate professional judgments.</td>
<td>PB 12 - Analyze models of assessment, prevention, intervention, and evaluation</td>
</tr>
<tr>
<td>Obj. IV, EP 2.1.4</td>
<td>Engage Diversity and difference in practice</td>
<td>PB 14 - Recognize the extent to which a culture's structure and values may oppress, marginalize, alienate, or create or enhance privilege and power</td>
</tr>
<tr>
<td>Obj. V, EP 2.1.5</td>
<td>Advance human rights and social and economic justice</td>
<td>PB 18 - Understand the forms and mechanisms of oppression and discrimination</td>
</tr>
<tr>
<td>Obj. VI, EP 2.1.6</td>
<td>Engage in research-informed practice and practice-informed research.</td>
<td>PB 21 - Use practice experience to inform scientific inquiry</td>
</tr>
<tr>
<td>Obj. VII, EP 2.1.7</td>
<td>Apply knowledge of human behavior and the social environment</td>
<td>PB 23 - Utilize conceptual frameworks to guide the processes of assessment, intervention, and evaluation</td>
</tr>
<tr>
<td>Obj. VIII, EP 2.1.8</td>
<td>Engage in policy practice to advance social and economic well-being and to deliver effective social work services.</td>
<td>PB 26 - Collaborate with colleagues and clients for effective policy action</td>
</tr>
<tr>
<td>Obj. IX, EP 2.1.9</td>
<td>PB 27</td>
<td>Continuously discover, appraise, and attend the changing locales, populations, scientific and technological developments, and emerging societal trends to provide relevant services</td>
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<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Obj. X, EP 2.1.10</td>
<td>PB 32</td>
<td>Collect, organize, and interpret client data</td>
</tr>
<tr>
<td>Obj. X, EP 2.1.10</td>
<td>PB 33</td>
<td>Assess client strengths and limitations</td>
</tr>
<tr>
<td>Obj. X, EP 2.1.10</td>
<td>PB 37</td>
<td>Implement prevention interventions that enhance client capabilities</td>
</tr>
</tbody>
</table>
### Oral Communications Rubric

<table>
<thead>
<tr>
<th>OBJECTIVES</th>
<th>ADVANCED (A)</th>
<th>PROFICIENT (B)</th>
<th>SATISFACTORY (C)</th>
<th>UNSATISFACTORY (D)</th>
</tr>
</thead>
</table>
| **1. Organization and Development**
Discover, organize and deliver content that is adapted to the audience, purpose, and context | Topic, purpose, and content are expertly fitted to audience and setting; presentation is engaging and very easy to follow. | Topic, purpose, and content are well fitted to audience and setting; presentation shows good organization. | Topic, purpose, and content relate to audience and setting for the most part; organization of the presentation is adequate. | Topic, purpose, and content are inappropriate for the audience and setting; presentation is very difficult to follow. |
| **2. Presentation Delivery**
Uses appropriate language and delivery techniques (e.g., loudness, gestures, posture, eye contact) | Speaker is exceptionally articulate. Projection and volume are excellent. The speaker makes constant and appropriate eye contact and engages the audience superbly. There are no pauses or other distractions that detract from the presentation. | Speaker’s articulation is adequate. Projection and volume are acceptable but could be improved. The speaker makes some eye contact with the audience but could be more engaging. There are some pauses or other distractions but they do not significantly detract from the presentation. | Speaker is inarticulate. Projection and volume are inadequate. Eye contact is minimal or nonexistent. There are pauses or other distractions that seriously detract from the presentation. |
| **3. Use of Presentation Technology (if required)**
Uses computer-based presentation technology to effectively communicate | Presentation components are superb in all respects. Figures and all elements of the slides are of the highest quality. Slides are exceptionally clear readable. Presentation design is innovative and creative. No slides are read verbatim. | Presentation components are very good in quality. Figures and all elements of the slides are executed well, with no major problems. Slides are on the whole clear and easily readable. Presentation design is very good. Very few slides are read verbatim. | Presentation components are acceptable, with room for improvement. Figures and all elements of the slides are adequate even though minor errors may be present. Slide readability and clarity could be improved. Presentation design is adequate. Some slides are read verbatim. | Presentation components are unacceptable, with major flaws. Figures or other slide elements have significant flaws. Slide readability and clarity are substandard and negatively impact the overall presentation. Design is sloppy or poorly thought out. Many slides are read verbatim. |
| **4. Interaction**
Listen actively and respond thoroughly and thoughtfully to questions. | Speaker thoroughly and expertly responds to questions with material that goes beyond ideas already presented; shows expertise in listening and speaking protocols. | Speaker responds to questions adequately, but rarely goes beyond the material presented; awareness of listening and speaking protocols is acceptable but could be improved significantly. | Responses to questions are inarticulate or incorrect; presenter shows minimal or no awareness of listening and speaking protocols. |
| **5. Documentation and Supporting Material**
Create and use appropriate supporting materials and presentation aids | Documentation and supporting material reinforce the presentation, exceed requirements and are expertly incorporated. | Documentation and supporting material adequately reinforce the presentation, meet requirement and are well incorporated. | Documentation and supporting material are not used or are totally inadequate. |

Adapted from St. Mary's College
## Rubric for Grading Student Performance on Classroom Discussions/Writing Assignments

<table>
<thead>
<tr>
<th>Objective</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reading Assignments</strong></td>
<td>Demonstrates comprehension of complex reading material</td>
<td>Demonstrates comprehension of all average and some complex reading material</td>
<td>Demonstrates comprehension of most of the average reading material</td>
<td>Demonstrates lack of comprehension of the reading material</td>
</tr>
<tr>
<td><strong>Writing Assignments</strong></td>
<td>Uses appropriate professional vocabulary; grammar and sentence structure are nearly flawless. Organization is exceptionally clear; includes support that conforms to discipline-specific professional norms</td>
<td>Reflects consistently correct grammar and mechanics; uses standard English; shows coherent organization; includes detailed support</td>
<td>Makes minor grammatical errors, but does not display habitual deviations from standard English; shows some organization; uses details to support assertions; meets minimum criteria for the assignment</td>
<td>Makes serious grammatical errors; displays habitual deviations from standard English usage; uses poor organization; shows academic dishonesty</td>
</tr>
<tr>
<td><strong>Speaking in Class</strong></td>
<td>Uses standard English; uses slides or notes most efficiently to keep presentation(s) fluid; always contributes consistently to class discussion</td>
<td>Uses standard English; uses slides or notes as an outline for presentation(s); contributes consistently to class discussion</td>
<td>Uses standard English; reads slides or notes during presentation(s); makes some appropriate contributions to discussions</td>
<td>Uses non-standard English or inappropriate voice volume; does not focus presentation or it is unorganized; does not contribute to class discussion</td>
</tr>
<tr>
<td><strong>Listening</strong></td>
<td>Is attentive during class discussions and presentations; note-taking is most appropriate and copious</td>
<td>Is attentive during class discussions and presentations; takes notes when appropriate</td>
<td>Is attentive much of the time, but occasionally is not focused</td>
<td>Displays evidence of not being attentive during class presentations and discussions</td>
</tr>
<tr>
<td><strong>Information Literacy</strong></td>
<td>Locates appropriate sources that exceed requirements and expectations; comprehends and cogently integrates these sources</td>
<td>Locates adequately sufficient and appropriate sources; comprehends and integrates these sources</td>
<td>Locates some appropriate sources, but other sources are not related to the task or are not reputable</td>
<td>Is unable to locate appropriate sources in the library or on-line or the majority of sources utilized are not reputable</td>
</tr>
<tr>
<td><strong>Critical Thinking</strong></td>
<td>Raises pertinent and provocative questions about the subject or discipline; demonstrates superior understanding of what is expected in the class; most consistently bases decisions on information using logic</td>
<td>Raises important questions about the subject or discipline; demonstrates understanding of what is expected in the class; bases decisions on information using logic</td>
<td>Shows evidence of logical thinking, but there is evidence of occasional lapses of clarity, accuracy, precision or relevance</td>
<td>Is unable to make inferences and judgments based on concepts and theories. Thinking is not clear, accurate, precise or relevant</td>
</tr>
<tr>
<td><strong>Reasoning and Problem Solving</strong></td>
<td>Analysis of problems is exceptionally perceptive; proposed</td>
<td>Analysis of problems is superior; proposed solutions display an appropriate</td>
<td>Analysis of problems is adequate if uninspired; proposed solutions</td>
<td>Is unable to understand the complexities of a problem; fails to</td>
</tr>
<tr>
<td>Solutions display a deep knowledge of the subject matter and creative application of this knowledge</td>
<td>Knowledge of the subject matter and application of this knowledge</td>
<td>Display a superficial knowledge of the subject matter and application of this knowledge is uneven</td>
<td>Propose any feasible partial solutions</td>
<td></td>
</tr>
</tbody>
</table>

Adapted from Northern Arizona University