



## Foundations of Clinical Practice I

The University of Toledo  
Department of Psychology  
PSYC 6290/7290-001

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**Office Hours:** by appointment  
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**Offered:** Fall  
**Class Location:** Remote; login information on Blackboard  
**Class Day/Time:** Wed 2:00 PM – 4: 40 PM  
**Credit Hours:** 3  
**TAs:** Elyse Hutcheson  
**TA Email:** [Elyse.Hutcheson@rockets.utoledo.edu](mailto:Elyse.Hutcheson@rockets.utoledo.edu)

### SPECIAL COURSE EXPECTATIONS DURING COVID-19

Maintaining a safe campus during the ongoing COVID-19 pandemic remains a top priority. The University of Toledo continues to follow the guidance of the U.S. Centers for Disease Control and Prevention and Ohio Department of Health to keep our campus safe.

#### SPECIAL NOTE

It is important to note that, based on the unpredictability of the COVID-19 virus, things can change at any time. So please be patient and understanding as we move through the semester. We also ask that you keep us informed of any concerns you may have about class, completing course work and assignments in a timely manner and/or health concerns related to COVID.

This course will be offered remotely through Zoom, Webex, or another web-based teleconferencing service. Links for the remote classes will be posted in Blackboard or you will receive an email invitation prior to class with the web link. As a synchronous remote class, you are expected to attend class on-time and in its entirety. If you are experiencing any technical difficulties, please contact the instructor and teaching assistant as soon as possible.

#### UNIVERSITY ATTENDANCE POLICY

The University of Toledo has a missed class policy. It is important that students and instructors discuss attendance requirements for the course. Before coming to campus each day, students should take their temperature and complete a self-assessment for symptoms of COVID-19, such as cough, chills, fatigue or shortness of breath. Anyone with a temperature at or above 100.0 degrees Fahrenheit or who is experiencing symptoms consistent with COVID-19 should not come to campus and contact their primary care physician or the University Health Center at 419.530.5549. For more information on the symptoms of COVID-19, please go to <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>



COVID-19 testing for sick students is available on both Main Campus and Health Science Campus. Call 419.383.4545 for an appointment. Absences due to COVID-19 quarantine or isolation requirements **are** considered excused absences. Students should notify their instructors and follow the protocols summarized in this document on [Navigating COVID-Related Course Concerns](#).

In the event that you have tested positive for COVID-19 or have been diagnosed as a probable case, please review the [CDC guidance](#) on self-isolation and symptom monitoring, and report the disclosure to the Division of Student Affairs by emailing [StudentAffairs@utoledo.edu](mailto:StudentAffairs@utoledo.edu) or by connecting with their on-call representative at 419.343.9946. Disclosure is voluntary and will only be shared on a need to know basis with staff such as in the Office of Student Advocacy and Support, The Office of Residence Life, and/or the Office of Accessibility and Disability Resources to coordinate supportive measures and meet contact tracing requirements.

#### **FACE COVERINGS**

Face coverings are required while on campus, except while eating, alone in an enclosed space, or outdoors practicing social distancing. Students will not be permitted in class without a face covering. If you have a medical reason preventing you from wearing a face covering due to a health condition deemed high-risk by the CDC, submit an [online application](#) to request an accommodation through the Office of Accessibility and Disability Resources. Students will need to provide documentation that verifies their health condition or disability and supports the need for accommodations. Students already affiliated with the Office of Accessibility and Disability Resources who would like to request additional accommodations due to the impact of COVID-19, should contact their accessibility specialist to discuss their specific needs. You may connect with the office by calling 419.530.4981 or sending an email to [StudentDisability@utoledo.edu](mailto:StudentDisability@utoledo.edu).

#### **VACCINATION**

Doctors and other health care professionals agree that the best way to protect ourselves and each other is to get vaccinated. Case data clearly show that vaccines remain highly effective at preventing serious illness from COVID, including the highly contagious delta variant. If you have not yet received your COVID vaccine, the University encourages you do so as soon as possible. No appointment is needed to get the shot at the UTM Outpatient Pharmacy, University Health Clinic or Main Campus Pharmacy. Once you receive the COVID vaccination, please register on the COVID Vaccine Registry site at: <https://utvaccinereg.utoledo.edu/>.

#### **CATALOG/COURSE DESCRIPTION**

The goal of this course is to provide an introduction to the basic clinical skills needed to conduct intake assessments and provide therapy. Foundational clinical skills central to all forms of assessment and therapy will be reviewed and practiced, and basic tenets of professionalism and ethics relevant to clinical psychology will be discussed. Application of skills to diverse populations and cultural competence considerations for assessment and therapy will also be discussed.



### **STUDENT LEARNING OUTCOMES**

At the end of this course, students will be able to:

- 1) Describe the ethical principles relevant to psychologists
- 2) Discuss basic therapeutic communication and interviewing skills relevant to conducting intakes and providing therapy
- 3) Discuss basic tenets involved in conducting intake assessments, structuring an individual therapy session, and terminating treatment
- 4) Describe recommended practices for providing culturally competent assessment and therapy
- 5) Apply basic clinical and interviewing skills in the context of therapy sessions
- 6) Use therapeutic communication and validation strategies in response to client verbalizations/statements
- 7) Generate professional written session notes

### **PREREQUISITES AND COREQUISITES**

Students entering this graduate course will be concurrently enrolled in graduate courses in Assessment I and Foundations of Psychotherapy I

### **REQUIRED INSTRUCTIONAL MATERIALS (TEXTS AND ANCILLARY MATERIALS)**

The following books are recommended:

- Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when – 2<sup>nd</sup> edition*. Guilford Press: NY.
- Sommers-Flanagan, J. & Sommers-Flanagan, R. (2015). *Clinical Interviewing – Fifth Edition*. Wiley: Hoboken, NH. [ISBN 978-1-119-08423-5]

All required readings (chapters and empirical articles) will be provided to students through Blackboard.

### **UNIVERSITY POLICIES**

All students at the University of Toledo are expected to read, understand, and follow the academic policies that govern their attendance at the University. These policies include, but are not limited to, academic dishonesty, academic forgiveness, adding and dropping a course, grades and grading, and the missed class policy. Please use the following URL to read a comprehensive list of academic policies that pertain to you in this class and throughout your academic journey:

<http://www.utoledo.edu/policies/academic/undergraduate/>

If you have any questions after reading through the policies, please let the instructors know.



#### **Policy Statement on Non-Discrimination on the Basis of Disability (ADA)**

The University is an equal opportunity educational institution. Please read [The University's Policy Statement on Nondiscrimination on the Basis of Disability Americans with Disability Act Compliance](#). Students can find this policy along with other university policies listed by audience on the [University Policy webpage](#) (<http://www.utoledo.edu/policies/audience.html/#students>).

#### **Academic Accommodations**

The University of Toledo embraces the inclusion of students with disabilities. We are committed to ensuring equal opportunity and seamless access for full participation in all courses. For students who have an accommodations memo from Student Disability Services, I invite you to correspond with me as soon as possible so that we can communicate confidentially about implementing accommodations in this course. For students who have not established affiliation with Student Disability Services and are experiencing disability access barriers or are interested in a referral to healthcare resources for a potential disability or would like information regarding eligibility for academic accommodations, please contact the [Student Disability Services Office](#) (<http://www.utoledo.edu/offices/student-disability-services/>) by calling 419.530.4981 or sending an email to [StudentDisability@utoledo.edu](mailto:StudentDisability@utoledo.edu).

#### **Academic Dishonesty**

Consistent with University Policy, academic dishonesty will not be tolerated. Students are responsible for knowing what constitutes academic dishonesty. If students are uncertain about what constitutes plagiarism or cheating they should seek the instructor's advice. Examples of academic dishonesty include, but are not limited to: 1) Plagiarizing or representing the words, ideas or information of another person as one's own and not offering proper documentation; 2) Giving or receiving, prior to an examination, any unauthorized information concerning the content of that examination; 3) Referring to or displaying any unauthorized materials inside or outside of the examination room during the course of an examination; 4) Communicating during an examination in any manner with any unauthorized person concerning the examination or any part of it; 5) Giving or receiving substantive aid during the course of an examination; 6) Commencing an examination before the stipulated time or continuing to work on an examination after the announced conclusion of the examination period; 7) Taking, converting, concealing, defacing, damaging or destroying any property related to the preparation or completion of assignments, research or examination; 8) Submitting the same written work to fulfill the requirements for more than one course. The full University policy on academic dishonesty may be found at <http://www.utoledo.edu/dl/students/dishonesty.html>

#### **Resources Related to Sexual or Gender-based Violence and Harassment**

The University of Toledo cares greatly about the health and well-being of our students, staff, and faculty, and takes all sexual or gender-based violence and harassment very seriously. If you have experienced sexual assault, sexual harassment, intimate partner violence, and/or stalking and want a confidential place to obtain support and information, please contact the Center for Student Advocacy and Wellness on the main campus in Health and Human Services Room 3017. You can call 419.530.2497 during regular business hours and 419.530.3431 for 24-hour assistance from a trained advocate. In-person, walk-in appointments are also available Monday-Thursday from 8:30 a.m. to 5 p.m. The Center for Student Advocacy and Wellness provides free and confidential advocacy and counseling services to students, faculty and staff. The YWCA H.O.P.E. Center also can be accessed as an off-campus confidential resource at 419.241.7273. Faculty, teaching assistants, and other university employees are mandated reporters of any incidents of sexual or gender-based violence or harassment. Thus, any disclosures of sexual or gender-based violence or harassment on or off campus made to faculty or teaching assistants, or other



university employees must be forwarded to the Title IX Coordinator. The Title IX Office will then contact you regarding your rights, your option to participate in the investigation, interim safety measures and/or academic accommodations, and the need to proceed with an investigation (even if none is requested). Your participation in the process is voluntary. You may call 419.530.3152 to file a complaint or visit the following website for more information and resources: <http://www.utoledo.edu/title-ix/>. Policies relating to Title IX can be found at: <http://www.utoledo.edu/title-ix/policies.html>.

### **COURSE EXPECTATIONS AND GUIDELINES**

Please arrive to class on time. If you are going to be late or miss a class, please notify the instructor in advance. Please make sure cell phones are turned off (or on vibrate) during class, and please refrain from any online activity or the use of cell phones (including texting) during class.

The primary expectation for this course is that you will participate fully (and willingly) in each class and in all exercises, discussions, and role-plays. This is an experiential learning course in which participation in discussions and exercises is the primary basis for grading. You will be expected to participate actively in all role-playing and other exercises and to practice skills and techniques in class with your peers, TAs, and instructors.

### **OVERVIEW OF COURSE GRADE ASSIGNMENT**

#### *Class Participation (including leading a class discussion and in session exercise): 25%*

Active participation in all in-class discussions and exercises is expected. The expectation is that all students will participate actively and fully. Thus, students start with an A for this assignment and have reductions in the grade if they do not participate actively and/or do not contribute to class discussions.

- Class discussion facilitator and exercise leader: To obtain teaching and public speaking experience, each student will lead one weekly discussion of course readings and one mock in session exercise (relaxation, mindfulness) each semester.

#### *Weekly reflection papers (including feared clinical scenario and response write up): 25%*

These papers are intended to promote engagement with the weekly readings and thoughtful reflection about how these readings apply to anticipated assessment and treatment experiences, as well as how the perspectives and topics represented in these readings align or conflict with students' initial views and expectations when beginning this course. These papers are expected to be 1-2 pages (no more than 3 pages and no less than 1 page), double-spaced, 12-pt font, 1-inch margins.

- Feared clinical scenario and planned response write up – pre- and post-course: During the first week of the course, students will be asked to write a brief description (1-2 pages) of a feared clinical scenario, their level of distress when anticipating this scenario (SUDS from 0-100), the perceived likelihood of this scenario (0-100), and their assessment of the most effective therapeutic response to this scenario (as well as how they believe they would respond, if different from their identified most effective response). They will then revisit this paper during the last week of the course in the spring semester and modify it as needed based on what they learned during the course.

#### *Mock therapy session: 30%*

Conduct a 45-min videotaped therapy session with the TA, with an emphasis on effective communication and use of basic clinical skills. Student therapist behavior overall and in response to specific verbalizations of the TA will be evaluated.



**Note writing: 20%**

After reviewing a tape of a mock therapy session in class, students will write a session note capturing that session. There is no page-length restriction or recommendation for this assignment; students should write whatever they believe is the most effective session note. This note will be written immediately after viewing the therapy session, during the same class, and handed into the TAs before class ends.

**LETTER GRADE**

Grade	Percent Equivalent
A	92-100
A-	90-91
B+	88-89
B	82-87
B-	80-81
C+	78-79
C	72-77
C-	70-71
D+	68-69
D	62-67
D-	60-61
F	≤59%



## COURSE SCHEDULE

**Note:** Readings for each week are listed below.

Week	Date	Topic	Faculty
1	9/1	Introduction/expectations/clinic policies and procedures	PM
2	9/8	Professionalism and ethics – Part 1	JE
3	9/15	Professionalism and ethics – Part 2	JE
4	9/22	Professionalism and ethics – Part 3	JE
5	9/29	Therapeutic communication and basic clinical skills – Part 1	JE
6	10/6	Therapeutic communication and basic clinical skills – Part 2	MTT
7	10/13	Therapeutic communication and basic clinical skills – Part 3	MTT
8	10/20	Boundaries, limits, and self-disclosure	MTT
9	10/27	Conducting intake assessments – Part 1	PM
10	11/3	Conducting intake assessments – Part 2	PM
11	11/10	Individual therapy basics/motivational interviewing	WB
12	11/17	In-session exercises	WB
	11/24	Thanksgiving	
13	12/1	Cultural competence in treatment and assessment – Part 1	PM
14	12/8	Cultural competence in treatment and assessment – Part 2	PM
15	12/15	Exam week	

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### Weekly Reading List

\*Please note that readings are subject to change. If any change occurs in reading assignments, students will be notified in advance by the instructor.

#### Week 1: Clinic policies

University of Toledo Psychology Clinic Handbook

#### Weeks 2-4: Professionalism and ethics

APA Ethical Principles of Psychologists and Code of Conduct – Appendix A of Clinical Program Handbook



Eonta, A. M., Christon, L. M., Hourigan, S. E., Ravindran, N., Vrana, S. R., & Southam-Gerow, M. A. (2011). Using everyday technology to enhance evidence-based treatments. *Professional Psychology: Research and Practice, 42*(6), 513.

Fisher, C. B. (2017). *Decoding the Ethics Code: A Practical Guide for Psychologists, Fourth Edition – Chapters 2-4*

Karcher, N. R., & Presser, N. R. (2018). Ethical and legal issues addressing the use of mobile health (mHealth) as an adjunct to psychotherapy. *Ethics & Behavior, 28*(1), 1-22.

Knapp, S., Handelsman, M.M., Gottlieb, M.C., & VandeCreek, L.D. (2013). The dark side of professional ethics. *Professional Psychology: Research & Practice, 44*(6), 371-377.

Tjeltveit, A., & Gottlieb, M. (2010). Avoiding the road to ethical disaster: Overcoming vulnerabilities and developing resilience. *Psychotherapy: Theory, Research, Practice, Training, 47*, 98-110.

Moffet, L. A., Becker, C. J., & Patton, R. G. (2014). Fostering the ethical sensitivity of beginning clinicians. *Training and Education in Professional Psychology, 8*(4), 229-235.

Hartl, T.L., et al. (2007). Clients' sexually inappropriate behaviors directed towards clinicians: Conceptualization and management. *Professional Psychology: Research and Practice, 38*(6), 674-681.

Lannin, D. G., & Scott, N. A. (2013). Social networking ethics: Developing best practices for the new small world. *Professional Psychology: Research and Practice, 44*(3), 135.

Lasser, J., & Gottlieb, M. (2004). Treating patients distressed regarding their sexual orientation: Clinical and ethical alternatives. *Professional Psychology: Research and Practice, 35*(2), 194-200.

Olatunji, B. O., Deacon, B. J., & Abramowitz, J. S. (2009). The cruelest cure? Ethical issues in the implementation of exposure-based treatments. *Cognitive and Behavioral Practice, 16*(2), 172-180.

Sude, M. (2013). Text messaging and private practice: Ethical challenges and guidelines for developing personal best practices. *Journal of Mental Health Counseling, 35*(3), 211-227.

Turchik, J.A., Karpenko, V., Hammers, D., & McNamara, J.R. (2007). Practical and ethical assessment issues in rural, impoverished, and managed care settings. *Professional Psychology: Research and Practice, 38*(2), 158-168.

Vasquez, M. J., Bingham, R. P., & Barnett, J. E. (2008). Psychotherapy termination: Clinical and ethical responsibilities. *Journal of Clinical Psychology, 64*(5), 653-665.

#### **Weeks 5-7: Therapeutic communication and basic clinical skills**

Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when – Chapter 1: Rethinking the talking cure: The therapist speaks too.*





Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when* – Chapter 8. Exploration, Not Interrogation.

Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when* – Chapter 9. Building on the Patient's Strengths.

Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when* – Chapter 10. Affirmation and Change.

Linehan (1993). *Cognitive behavioral treatment of borderline personality disorder*—Chapter 8. Core Strategies: Part I. Validation.

Linehan (1993). *Cognitive behavioral treatment of borderline personality disorder*—Chapter 12. Stylistic Strategies: Balancing Communication.

Linehan, M. M. (1997). Validation and psychotherapy. In A. C. Bohart & L. S. Greenberg (Eds), *Empathy reconsidered: New directions in psychotherapy* (pp. 353-392). Washington DC: American Psychological Association.

Sommers-Flanagan & Sommers-Flanagan (2015). *Clinical Interviewing*—Chapter 3: Basic Attending, Listening, & Action Skills.

Sommers-Flanagan & Sommers-Flanagan (2015). *Clinical Interviewing*—Chapter 4: Directives: Questions & Action Skills.

Miller, W.R., & Arkowitz, H. (2008). Learning, applying, and extending. In H. Arkowitz, H.A. Westra, W. R. Miller, & S. Rollnick (Eds.). *Motivational interviewing in treating psychological problems* (pp. 1-33). New York: Guilford Press.

Rollnick, S., & Miller, W. R. (1995). What is motivational interviewing? *Behavioural and Cognitive Psychotherapy*, 23, 325–334.

Miller, W. R., & Rollnick, S. (2009). Ten things that motivational interviewing is not. *Behavioural and Cognitive Psychotherapy*, 37, 129–14.

#### **Week 8: Individual therapy basics**

Linehan (1993). *Cognitive behavioral treatment of borderline personality disorder*—Chapter 14. Structural Strategies.

Farmer, R. F., & Chapman, A. L. (2016). Bringing therapy to a close and aftercare. In *Behavioral interventions in cognitive behavior therapy*, 2nd edition (pp. 355-376). Washington, DC: American Psychological Association.

Kazdin, A. (1993). Evaluation in clinical practice: Clinically sensitive and systematic methods of treatment delivery. *Behavior Therapy*, 24, 11-45.



Moyers, T. B. (2004). History and happenstance: How motivational interviewing got its start. *Journal of Cognitive Psychotherapy, 18*(4), 291-298.

Moyers, T. B., Miller, W. R., & Hendrickson, S. M. L. (2005). How does motivational interviewing work? Therapist interpersonal skill predicts client involvement within motivational interviewing sessions. *Journal of Consulting and Clinical Psychology, 73*(4), 590-598.

#### **Week 9: In session exercises**

Goldfried, M.R., & Davison, G.C. (1994). *Clinical Behavior Therapy*. New York: John Wiley and Sons – Chapter 5: Relaxation Training

Linehan, M. M. (1993). *Skills training manual for treating borderline personality disorder*. New York, NY: Guilford Press.

Miller, W. R., & Rollnick, S. (2013). Experiencing motivational interviewing. In *Motivational Interviewing, 3<sup>rd</sup> edition* (pp. 303-321). New York: The Guilford Press.

#### **Week 10: Boundaries, limits, and self-disclosure**

Linehan (1993). *Cognitive behavioral treatment of borderline personality disorder—Chapter 10. Change Procedures: Part I. Contingency Procedures (Managing Contingencies and Observing Limits)*.

Wachtel, P. L. (2011). *Therapeutic communication: Knowing what to say when – Chapter 13. Therapist Self-Disclosure: Prospects and Pitfalls*.

Zur, O., Williams, M. H., Lehavot, K., & Knapp, S. (2009). Psychotherapist self-disclosure and transparency in the Internet age. *Professional Psychology: Research and Practice, 40*(1), 22.

Pope, K. S., & Keith-Spiegel, P. (2008). A practical approach to boundaries in psychotherapy: Making decisions, bypassing blunders, and mending fences. *Journal of clinical psychology, 64*(5), 638-652.

Barnett, J. (2011). Psychotherapist self-disclosure: Ethical and clinical considerations. *Psychotherapy, 48*(4), 315-321.

#### **Weeks 11-12: Conducting intake assessments**

Sommers-Flanagan & Sommers-Flanagan (2009). *Clinical Interviewing—Chapter 2: Foundations & Preparations*.

Sommers-Flanagan & Sommers-Flanagan (2015). *Clinical Interviewing—Chapter 6: An Overview of the Interview Process*.

Sommers-Flanagan & Sommers-Flanagan (2015). *Clinical Interviewing—Chapter 10: Diagnosis & Treatment Planning*.



Sommers-Flanagan & Sommers-Flanagan (2015). Clinical Interviewing—Chapter 7: Intake Interviewing and Report Writing.

Kazdin, A. E. (1993). Evaluation in clinical practice: Clinical sensitive and systematic methods of treatment delivery. *Behavior Therapy, 24*, 11-45.

Michaels, M.H. (2006). Ethical considerations in writing psychological assessment reports. *Journal of Clinical Psychology, 62*, 47-58.

Widiger, T A., & Samuel, D. B. (2005). Diagnostic categories or dimensions? A question for the *Diagnostic and Statistical Manual of Mental Disorders—Fifth Edition*. *Journal of Abnormal Psychology, 114*, 494–504.

#### **Weeks 13 and 14: Cultural competence in assessment and treatment**

Hayes, S. C. & Toarmino, D. (1995). If behavioral principles are generally applicable, why is it necessary to understand cultural diversity? *The Behavior Therapist, 18*, 21-23.

Asnaani, A., & Hofmann, S. G. (2012). Collaboration in multicultural therapy: Establishing a strong therapeutic alliance across cultural lines. *Journal of clinical psychology, 68*(2), 187-197.

Bernal, G., Jiménez-Chafey, M. I., & Domenech Rodríguez, M. M. (2009). Cultural adaptation of treatments: A resource for considering culture in evidence-based practice. *Professional Psychology: Research and Practice, 40*(4), 361.

Boroughs, M. S., Bedoya, C. A., O'cleirigh, C., & Safren, S. A. (2015). Toward defining, measuring, and evaluating LGBT cultural competence for psychologists. *Clinical Psychology: Science and Practice, 22*(2), 151-171.

O'Donohue, W.T. (2016). Oppression, privilege, bias, prejudice, & stereotyping: Problems in the APA Code of Ethics. *Ethics & Behavior, 26*(7), 527-544.

Sue, S., Zane, N., Nagayama Hall, G. C., & Berger, L. K. (2009). The case for cultural competency in psychotherapeutic interventions. *Annual review of psychology, 60*, 525-548.

Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the Minority Stress Model. *Professional Psychology: Research and Practice, 43*(5), 460.

Lau, A. S. (2006). Making the case for selective and directed cultural adaptations of evidence-based treatments: Examples from parent training. *Clinical Psychology: Science & Practice, 13*, 295-310.

Hansen, N.D., et al. (2006). Do we practice what we preach? An exploratory survey of multicultural psychotherapy competencies. *Professional Psychology: Research and Practice, 37*(1), 66-74.

Lasser, J., & Gottlieb, M. (2004). Treating patients distressed regarding their sexual orientation: Clinical and ethical alternatives. *Professional Psychology: Research and Practice, 35*(2), 194-200.