

Last name of instructor (Semester Year)

## California State University, Sacramento

### COUNSELING IN AUDIOLOGY

CSAD671 - 3 units

Fall 2021 (AUD-3)

#### **COURSE FACULTY**

**Course Instructor:**

**Folsom Hall office #:**

**Office Phone:**

**Office Hours:**

**E-mail address:**

#### **REQUIRED CLASS MEETINGS TIMES**

Days and times:

Building: Folsom      Room #:

#### **REQUIRED TEXTS**

Clark, J.G., & English, K.M. (2003). *Counseling in audiologic practice: Helping patients and families adjust to hearing loss*. Pearson.

Groce, N.E. (1985). *Everyone here spoke sign language: Hereditary deafness on Martha's Vineyard*. Harvard University Press.

#### **OPTIONAL TEXTS**

#### **COURSE WEBSITE**

<https://sacct.csus.edu>

SacCT will be used as the learning management site for dissemination of course readings, handouts, slides, assignments, announcements, and tests/quizzes. The course faculty will have materials posted to SacCT at least 48 hours before class.

#### **Instructor Communication and Response Time**

Faculty strive to have open communication with students both within and outside of the classroom. Students are encouraged to contact faculty to discuss questions about the course. Responses to telephone or e-mail messages will usually be transmitted within 48 hours during regular working hours. If you do not have a response within this time period, please check your contact methods and resend the message. Faculty will generally respond to student questions received during evenings and weekends once they are back in the office during regular business hours.

**\*Please be aware that all content for this course is the property of the course faculty who have created it and can only be used for this course. Those wishing to use the materials outside of this course must receive written permission from the author/creator.**

#### **GENERAL COURSE INFORMATION**

#### **PRE-REQUISITES**

Admission to Doctor of Audiology program; CSAD611, CSAD612, CSAD613, CSAD614, CSAD621, CSAD622, CSAD622L, CSAD623, CSAD624, CSAD631, CSAD632, CSAD641, CSAD641L, CSAD642, CSAD643, CSAD651, CSAD652, CSAD653, CSAD661, CSAD662

## COURSE DESCRIPTION

### Overview

This course provides a more in-depth study of counseling techniques used throughout the rehabilitative process. Students will learn about the importance of patient-centered care, the role of the audiologist in the rehabilitative process, techniques for working with families and caregivers, interviewing, and the psychological and social parameters of the audiologist-patient relationship. Information related to Deaf culture will also be included. Students will learn the historical perspectives, legal and ethical considerations, and diagnostic and rehabilitative procedures for service delivery to this population.

### Approved Course Description (from CSUS Course Catalog)

Introduction to the principles and theories of counseling. Emphasis on communication skills and applied techniques. Considerations for assessing multicultural populations. Influences of cultural background on attitudes, beliefs, disabilities, utilization of health care services, and deafness.

## WHY IS THIS COURSE IMPORTANT?

The effects of hearing loss extend beyond communication difficulties and often affect a patient's psychosocial functioning, participation in activities, and, ultimately, his or her quality of life. The counseling framework and theories presented in this course are essential for clinical practice and improving the well-being of patients.

## UNIVERSITY LEARNING GOALS

	1 Disciplinary knowledge	2 Communication	3 Critical thinking/analysis	4 Information literacy	5 Professionalism	6 Intercultural/global perspectives	7 Research
Addressed by this course	X	X	X	X	X	X	X

## GRADUATE LEARNER OUTCOMES

Mastery of each student-learning outcome listed below is indicated by a grade of B or better on each component of the corresponding measures listed in the table. Students are required to track their progress towards meeting each learning outcome and must make an appointment with the instructor for any grade equal to or less than a B. The instructor will suggest strategies to help you establish competence and knowledge in these areas.

Students should track their progress towards meeting each learning outcome by listing their grades on the table below over the course of the semester.

Upon completion of this course, students will be able to:

1. Describe the role of the audiologist in counseling
2. Explain various counseling theories
3. Apply counseling theories to role-played scenarios and observations
4. Define Deaf culture
5. Summarize historical and contemporary perspectives of Deaf culture in the United States
6. Discuss characteristics of the Deaf and hearing communities
7. Describe attitudes, beliefs, and perceptions of the Deaf community
8. List controversial issues that affect the Deaf community
9. Contrast counseling approaches for families, children, adolescents, adults, and older adults

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10. Demonstrate understanding of counseling techniques through class assignments
11. Describe health behavior change models that can be used in health promotion and audiology
12. Participate in problem-based learning to address and manage challenging scenarios and behaviors
13. Explain the role of other professionals and the importance of interprofessional collaboration in counseling patients and families

Graduate Learner Outcome	Component Indicating Competence	Grade(s) Received
1-13	Exam (100%)	
3,11	Role-playing scenario (100%)	
6-9,13	Class activities (100%)	
11	Interview Project (100%)	

## **COURSE/CLASS POLICIES**

### **Course Format**

Lecture

### **Class Preparation:**

All required readings are for the date listed in the course schedule, not the following class period. Students are responsible for all assigned readings, whether discussed in class or not.

### **Class Participation:**

Students are expected to actively participate in class discussions and are required to have read the assigned material prior to class meetings.

### **Class Attendance:**

Classroom attendance is necessary for this course. No more than three unexcused absences are allowed. Students are expected to arrive on time as class begins at X:XX am/pm.

### **Class Assignments**

Course grades will be based on a role play scenario, interview project, observation, class activities, and two exams.

### **Role Play Scenario**

For this assignment, students will work in pairs or groups of three to develop a short role-play. Students will be given a scenario and be asked to develop a script and present it to the class.

### **Interview Project**

Students will work in pairs to record a mock interview session, in which one student is the "counselor" and the other is the "patient." Interviews must be transcribed and submitted to SacCT as a Word document. Interviews should last between 15 and 20 minutes. Students not involved with the project will then code and analyze the transcribed interviews in preparation for class discussion.

### **Class activities**

Throughout the course, class activities will be used to allow students to improve their understanding of concepts, demonstrate knowledge and skills, and practice counseling techniques.

### **Exams**

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- **Exam absences:** No make-up examinations will be given unless there is a documented emergency for which you have written proof. Any approved make-up exams will be scheduled at the end of the semester (during finals week) and may be administered in a different format from the original exam.
- **Exam procedures:**

Test arrival/start

Test duration and completion

### **Commitment to Integrity**

As a student in this course (and at this university) you are expected to maintain high degrees of professionalism, commitment to active learning and participation in this class and also integrity in your behavior in and out of the classroom.

### **Sac State's Academic Honesty Policy & Procedures**

"The principles of truth and honesty are recognized as fundamental to a community of scholars and teachers. California State University, Sacramento expects that both faculty and students will honor these principles, and in so doing, will protect the integrity of academic work and student grades." Read more about Sac State's Academic Honesty Policy & Procedures at the following website: <http://www.csus.edu/um anual/AcademicHonestyPolicyandProcedures.htm>

*Definitions:* At Sac State, "cheating is the act of obtaining or attempting to obtain credit for academic work through the use of any dishonest, deceptive, or fraudulent means."

"Plagiarism is a form of cheating. At Sac State, "plagiarism is the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person's contribution." Source: Sacramento State University Library

*Note:* Any form of academic dishonesty, including cheating and plagiarism, shall be reported to the office of student affairs.

### **Understand When You May Drop This Course**

It is the student's responsibility to understand when he/she need to consider disenrolling from a course. Refer to the Sac State Course Schedule for dates and deadlines for registration. After this period, a serious and compelling reason is required to drop from the course. Serious and compelling reasons include: (a) documented and significant change in work hours, leaving student unable to attend class, or (b) documented and severe physical/mental illness/injury to the student or student's family. Under emergency/special circumstances, students may petition for an incomplete grade. An incomplete will only be assigned if there is a compelling extenuating circumstance. All incomplete course assignments must be completed in accordance with the department's policy.

### **Accommodations**

Inform your instructor of any accommodations needed. If you have a documented disability and verification from the Office of Services to Students with Disabilities (SSWD), and wish to discuss academic accommodations, please contact your instructor as soon as possible. It is the student's responsibility to provide documentation of disability to SSWD and meet with a SSWD counselor to request special accommodation before classes start. SSWD is located in Lassen Hall 1008 and can be contacted by phone at [\(916\) 278-6955](tel:9162786955) (Voice) or [\(916\) 278-7239](tel:9162787239) (TDD only) or via email at [sswd@csus.edu](mailto:sswd@csus.edu)

### **Course Requirement Grading**

<u>Activity</u>	<u>Points Available</u>
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Role Play scenario	100
Interviewing project	100
Observation	100
Class activities (10 points each x 5)	50
Midterm exam	150
Final exam	300
<b><u>TOTAL COURSE POINTS AVAILABLE</u></b>	800

### **Overall Percentage Needed**

Note: A grade of "B" or higher is required to count toward the minimum number of units needed to advance to candidacy.

<b>Grade</b>	<b>Percentage</b>
A	93-100%
A-	90-92%
B+	87-89%
B	83-86%
B-	80-82%
C+	77-79%
C	73-76%
C-	70-72%
D+	67-69%
D	63-66%
D-	60-62%
F	< 60%

### **COURSE SCHEDULE OF LECTURE TOPICS AND EXAMS**

<b>Date</b>	<b>Topic and Activity or Quiz and Exam</b>	<b>Readings/ Assignment</b>
8/26	Overview of course	
8/28	Counseling in audiology Role of audiologists in counseling	Clark & English-Ch. 1
9/2	Impact of hearing loss Stages of grief	Clark & English-Ch.2
9/4	Relationship between the audiologist and patient Counseling theories	Clark & English-Ch. 3
9/9	Counseling theories	Brady, G.Y. (2007). Counseling theories applied to fitting hearing losses. <i>The Hearing Professional</i> .
9/11	Interviewing techniques	Backenroth, G. A., & Ahlner, B. H. (2000). Quality of life of hearing-impaired persons who have participated in audiological rehabilitation counselling. <i>International Journal for the Advancement of Counselling</i> , 22(3), 225-240.  Mcfarlane, L. A. (2012).

		<p>Motivational Interviewing: Practical Strategies for Speech-Language Pathologists and Audiologists. <i>Canadian Journal of Speech-Language Pathology &amp; Audiology</i>, 36(1).</p> <p>Solheim, J., Gay, C., Lerdal, A., Hickson, L., &amp; Kvaerner, K. J. (2017). An Evaluation of Motivational Interviewing for Increasing Hearing Aid Use: A Pilot Study. <i>Journal of the American Academy of Audiology</i>.</p>
9/16	IDA Institute tools Patient-centered care	<p>Manchaiah, V. K., Stephens, D., &amp; Meredith, R. (2011). The patient journey of adults with hearing impairment: the patients' views. <i>Clinical Otolaryngology</i>, 36(3), 227-234.</p> <p>Manchaiah, V. K., Stephens, D., Zhao, F., &amp; Kramer, S. E. (2012). The role of communication partners in the audiological enablement/rehabilitation of a person with hearing impairment: An overview. <i>Audiological Medicine</i>, 10(1), 21-30.</p> <p>Nair, E. L., &amp; Cienkowski, K. M. (2010). The impact of health literacy on patient understanding of counseling and education materials. <i>International Journal of Audiology</i>, 49(2), 71-75.</p> <p>Gregory, M. (2012, February). A possible patient journey: A tool to facilitate patient-centered care. In <i>Seminars in Hearing</i>(Vol. 33, No. 01, pp. 009-015).</p>

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		<p>Thieme Medical Publishers.</p> <p>Grenness, C., Hickson, L., Laplante-Lévesque, A., &amp; Davidson, B. (2014). Patient-centred care: A review for rehabilitative audiologists. <i>International Journal of Audiology</i>, 53(sup1), S60-S67.</p>
9/18	The first appointment	<p>Clark &amp; English- Ch. 4</p> <p>English, K., Mendel, L. L., Rojeski, T., &amp; Hornak, J. (1999). Counseling in audiology, or learning to listen: Pre-and post-measures from an audiology counseling course. <i>American Journal of Audiology</i>, 8(1), 34-39.</p>
9/23	Communicating bad news	<p>Rosenzweig, M. Q. (2012). Breaking bad news: a guide for effective and empathetic communication. <i>The Nurse Practitioner</i>, 37(2), 1-4.</p> <p>Gilbey, P. (2010). Qualitative analysis of parents' experience with receiving the news of the detection of their child's hearing loss. <i>International Journal of Pediatric Otorhinolaryngology</i>, 74(3), 265-270.</p>
9/25	Cultural and pathological aspects of deafness Disability	<p>"Everyone here spoke sign language" discussion</p> <p>Pray, J.L., &amp; Jordan, I.K. (2010). The deaf community and culture at a crossroads: Issues and challenges. <i>Journal of Social Work in</i></p>

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		<i>Disability and Rehabilitation</i> , 9(2), 168-193.
9/30	History of Deaf culture Education Deaf culture and language	Kemp, M. (1998). Why is learning American Sign Language a challenge? <i>American Annals of the Deaf</i> , 143(3), 255-259.  Garden, R. (2010). Language, identity, and belonging: Deaf cultural and narrative perspectives. <i>Journal of Clinical Ethics</i> , 21(2), 159-162.
10/2	Deaf blindness Deaf arts Technology, cochlear implants	Dammeyer, J. (2014). Deafblindness: A review of the literature. <i>Scandinavian Journal of Public Health</i> , 42(7), 554-562.  Ludders, B.B. (1987). Communication between health care professionals and deaf patients. <i>Health and Social Work</i> , 12(4), 303-310.
10/7	Counseling parents and families: infants and children	Clark & English-Ch. 5  American Speech-Language-Hearing Association. (2008). Guidelines for audiologists providing informational and adjustment counseling to families of infants and young children with hearing loss birth to 5 years of age.
10/9	Counseling parents and families: adolescents	Clark & English-Ch. 5  Elkayam, J., & English, K. (2003). Counseling adolescents with hearing loss with the use of self-assessment/significant other questionnaires. <i>Journal of the American Academy of Audiology</i> , 14(9), 485-499.  Crowell, R. L. N., Hanenburg, J., & Gilbertson, A. (2009). Counseling adolescents with hearing



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		loss using a narrative therapy approach. <i>Perspectives on Administration and Supervision</i> , 19(2), 72-78.
10/14	Counseling adults and families	<p>Clark &amp; English-Ch. 6</p> <p>English, K., Mendel, L. L., Rojeski, T., &amp; Hornak, J. (1999). Counseling in audiology, or learning to listen: Pre-and post-measures from an audiology counseling course. <i>American Journal of Audiology</i>, 8(1), 34-39.</p> <p>Hawkins, D. B. (2005). Effectiveness of counseling-based adult group aural rehabilitation programs: A systematic review of the evidence. <i>Journal of the American Academy of Audiology</i>, 16(7), 485-493.</p>
10/16	Counseling older adults and adult children	<p>Clark &amp; English-Ch. 6</p> <p>Preminger, J. E., Montano, J. J., &amp; Tjørnhøj-Thomsen, T. (2015). Adult-children's perspectives on a parent's hearing impairment and its impact on their relationship and communication. <i>International Journal of Audiology</i>, 54(10), 720-726.</p>

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10/21	Telehealth	<p>Swanepoel, D. W., Clark, J. L., Koekemoer, D., Hall III, J. W., Krumm, M., Ferrari, D. V., ... &amp; Barajas, J. J. (2010). Telehealth in audiology: The need and potential to reach underserved communities. <i>International Journal of Audiology</i>, 49(3), 195-202.</p> <p>Swanepoel, D. W., &amp; Hall III, J. W. (2010). A systematic review of telehealth applications in audiology. <i>Telemedicine and E-Health</i>, 16(2), 181-200.</p>
10/23	Other communication disorders	<p>Manchaiah, V. K., Stephens, D., Andersson, G., Rönnberg, J., &amp; Lunner, T. (2013). Use of the 'patient journey' model in the internet-based pre-fitting counseling of a person with hearing disability: study protocol for a randomized controlled trial. <i>Trials</i>, 14(1), 25.</p>
10/28	Devices	<p>Poost-Foroosh, L., Jennings, M. B., &amp; Cheesman, M. F. (2015). Comparisons of client and clinician views of the importance of factors in client-clinician interaction in hearing aid purchase decisions. <i>Journal of the American Academy of Audiology</i>, 26(3), 247-259.</p>
10/30	Referrals for early intervention	<p>Educational Audiology Association. "Early detection and intervention of hearing loss: Roles and responsibilities for educational audiologists."</p>
11/4	Interprofessional collaboration Depression, suicide	<p>Zitelli, L., &amp; Palmer, C. (2017). Audiologists' Role in Managing Patient Suicide Risk. <i>The Hearing Journal</i>, 70(11), 18-19.</p>
11/6	Other medical conditions Vestibular, tinnitus	<p>Wilson, P. H., Henry, J. L., Andersson, G., Hallam, R.</p>

		<p>S., &amp; Lindberg, P. (1998). A critical analysis of directive counselling as a component of tinnitus retraining therapy. <i>British Journal of Audiology</i>, 32(5), 273-286.</p> <p>Meli, A., Zimatore, G., Badaracco, C., De Angelis, E., &amp; Tufarelli, D. (2007). Effects of vestibular rehabilitation therapy on emotional aspects in chronic vestibular patients. <i>Journal of Psychosomatic Research</i>, 63(2), 185-190.</p> <p>Henry, J. A., Zaugg, T. L., Myers, P. J., Kendall, C. J., &amp; Turbin, M. B. (2009). Principles and application of educational counseling used in progressive audiologic tinnitus management. <i>Noise and Health</i>, 11(42), 33.</p>
11/11	Health promotion	<p>Borchgrevink, H. M. (2003). Does health promotion work in relation to noise?. <i>Noise and Health</i>, 5(18), 25.</p> <p>Hickson, L., &amp; Worrall, L. (2003). Beyond hearing aid fitting: Improving communication for older adults. <i>International Journal of Audiology</i>, 42(sup2), 84-91.</p>
11/13	Group counseling	<p>Clark &amp; English-Ch.7</p> <p>Waters, E., Fink, S., &amp; White, B. (1976). Peer group counseling for older people. <i>Educational Gerontology: An International Quarterly</i>, 1(2), 157-170.</p> <p>Erdman, S. A. (2009). Therapeutic factors in group counseling: implications for audiologic rehabilitation. <i>Perspectives</i></p>

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		<i>on Aural Rehabilitation and Its Instrumentation</i> , 16(1), 15-28.
11/18	No class- Thanksgiving	
11/20	No class- Thanksgiving	
11/27	Group counseling	Clark & English-Ch.7  Hallberg, L. R. M., & Barrenäs, M. L. (1994). Group rehabilitation of middle-aged males with noise-induced hearing loss and their spouses: evaluation of short-and long-term effects. <i>British Journal of Audiology</i> , 28(2), 71-79.  Henry, J. A., Loovis, C., Montero, M., & Kaelin, C. (2007). Randomized clinical trial: group counseling based on tinnitus retraining therapy. <i>Journal of Rehabilitation Research and Development</i> , 44(1), 21.
12/2	Review for Final Exam	
12/4	<b>Final exam</b>	

Please note that dates, topics, and assignments are subject to change. In the event of a change, you will be given ample notification of the change.