

## **Buddhism and Psychotherapy**

**EMP 2015HS  
Spring 2017**

**Room EM108**

Seminars: Thursdays 6:30 to 9:30 PM  
Office Hours: by appointment

Instructor: Tony Toneatto, Ph.D.  
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### **Course Description:**

In recent years a voluminous literature has appeared that has examined the numerous commonalities between western psychotherapy and counselling and Buddhism. This has been possible because Buddhism, despite its religious aspects, can also be profitably described as a philosophy and psychology of transformation. The Buddhist teachings are replete with analyses of human behavior, emotion, cognition, interpersonal and psychological functioning that closely resemble the models of human behavior and mental illness that have emerged in western culture. In this comparative course the convergence between Buddhism and the major systems of psychotherapy will be surveyed. Specifically, psychoanalytic, behavioral, cognitive, existential-humanistic, and the emerging study of positive psychology will be discussed within the context of Buddhist psychology as outlined in the teachings on skillful living (i.e., the 8-fold path), the psychophysical nature of the self (i.e., the 5 skandhas), psychological causality (i.e., dependent origination), and the analysis of the human condition (i.e. the 4 Noble Truths).

### **Course Outcomes:**

The course prepares provides students interested in the mental health implications of Buddhism with an understanding of how the major systems of psychotherapy found in western cultures compare and contrast. An emphasis will be placed on identifying the view of human nature common in psychotherapy and Buddhist philosophy and psychology indicative of a perennial wisdom that transcends geography, culture and time.

The specific course outcomes and expectations include:

#### **1. Depth and Breadth of Knowledge**

*Breadth.* Students will develop a systematic and discriminating understanding of the major schools of psychotherapy, including their major characteristics, assumptions about human nature and general empirical efficacy.

*Depth.* Students will develop a more intensive understanding of the points of convergence and divergence between Buddhist and western psychotherapeutic approaches to understanding human suffering.

## **2. Research and Scholarship**

Students will be assigned seminal articles for each of the major schools of psychotherapy and Buddhist psychology that will allow them to evaluate the conceptual and technical features of these therapeutic approaches. In the essay that forms a component of the course evaluation, students will be asked to expand their knowledge of their chosen topic by evaluating current research and compare it with their understanding of Buddhist psychology. The essay will require an ability to reason systematically and to articulate a coherent position based on the available empirical research and conceptual models of mental illness and health.

## **3. Level of Communication Skills**

Students will be asked to participate effectively and collegially in their school community both inside and outside the classroom. Since it is expected that the students will vary widely in their views, knowledge and training regarding Western and Buddhist models of mental health and illness, they will be invited both to appreciate the differing views of others and to convey and support their own views clearly both verbally and in writing.

## **4. Awareness of Limits of Knowledge**

Students will be able to make use of insights of the humanities, the social sciences, and the natural sciences in their study of the material included within this course as well as recognize the limits of our knowledge of the psychological and Buddhist understanding of the human mind and suffering.

## **5. CRPO Competencies Addressed in this Program**

### **1. Foundations**

- 1.1 Integrate a theory of human psychological functioning.
- 1.2 Work within a framework based upon established psychotherapeutic theory.
- 1.3 Integrate knowledge of comparative psychotherapy relevant to practice.
- 1.4 Integrate awareness of self in relation to professional role.

### **2. Collegial & Inter-professional Relationships**

- 2.1 Use effective professional communication.
- 2.2 Maintain effective relationships.

### **3. Professional Responsibilities**

- 3.3 Maintain self-care and level of health necessary for responsible therapy.
- 3.4 Evaluate and enhance professional practice.
- 3.6 Provide education and training consistent with the therapist's practice.

### **4. Therapeutic Process**

- 4.2 Establish and maintain core conditions for therapy.
- 4.3 Ensure safe and effective use of self in the therapeutic relationship.
- 4.5 Structure and facilitate the therapeutic process.

### **5. Professional Literature & Applied Research**

- 5.1 Remain current with professional literature.
- 5.2 Use research findings to inform clinical practice.

### **Required Texts:**

A list of pertinent readings will be made available through Blackboard. No textbook will be assigned for the course.

- Engler, J. (2003). Being somebody and being nobody: A re-examination of the understanding of self in psychoanalysis and Buddhism. In J.D. Safran (Ed.), *Psychoanalysis and Buddhism: An unfolding dialogue* (35-79). Boston: Wisdom Publications.
- Young-Eisendrath, Polly (2008). The transformation of human suffering: A perspective from psychotherapy and Buddhism. *Psychoanalytic Inquiry*, 28, 541-549.
- Epstein, M. (1986). Meditative transformations of narcissism. *Journal of Transpersonal Psychology*, 18, 143-158.
- Epstein, M. (1995). Thoughts without a thinker: Buddhism and psychoanalysis. *Psychoanalytic Inquiry*, 82, 391-406.
- Epstein, M (1990). Psychodynamics of meditation: pitfalls on the spiritual path. *Journal of Transpersonal Psychology*, 22 (1), 17-34
- Epstein, M (1990). Beyond the oceanic feeling: psychoanalytic study of Buddhist meditation. *International Review of Psychoanalysis*, 17, 159-165
- Epstein, M. (1988). The deconstruction of the self. *Transpersonal Psychology*, 20, 61-69.
- Fulton, P. (2005). Mindfulness as Clinical Training, (pp. 55-72). In *Mindfulness and Psychotherapy*, (Eds. C. K. Germer, R. D. Siegel, P. R. Fulton). New York: The Guilford Press
- Fulton, P. (2014). Contributions and Challenges to Clinical Practice from Buddhist Psychology. *Clin Soc Work J* 42:208–217.
- Gilpin, R. (2008). The use of Theravada Buddhist practices and perspectives in mindfulness-based cognitive therapy. *Contemporary Buddhism*, 9, 227-250.
- Grabovac, A. D., Lau, M.A., & Willett, B.R. (2011). Mechanisms of mindfulness: A Buddhist psychological model. *Mindfulness*, 2(3), 154-166.
- Jenning, P. (2010). Healing goals in buddhism and psychoanalysis. Chapter 8. In *Mixing minds: the power of relationship in psychoanalysis and Buddhism*. Wisdom Publications: Boston. 211-234.
- Kuan, Tse-fu (2012). Cognitive operations in Buddhist meditation: Interface with western psychology. *Contemporary Buddhism*, 13 (1), 35-60.
- Mikulas, W.L. (2010). Buddhist psychology: A western interpretation. In K. Ramakrishna Rao, A.C. Paranjpe, & A.K. Dalai (Eds.), *Handbook of Indian psychology* (142-161). New Delhi, India: Foundation Books.

Mosig, Y.D. (2006). Conception of the self in western and eastern psychology. *Journal of Theoretical and Philosophical Psychology*, 26, 39-50.

Olendzki, A. (2003). Buddhist Psychology. In S.R. Segall (Ed.), *Encountering Buddhism: Western psychology and Buddhist teachings* (9-30). Albany: State University of New York Press. (<http://www.sunypress.edu/pdf/60757.pdf>)

Rubin, J.B. (2003). Close encounters of a new kind: Toward an integration of psychoanalysis and Buddhism. In S.R. Segall (Ed.), *Encountering Buddhism: Western psychology and Buddhist teachings* (31-60). Albany: State University of New York Press.

Rubin, J. Deepening psychoanalytic listening: the marriage of Buddha and Freud. *The American Journal of Psychoanalysis*, 2009, 69, (93–105)

Shonin, E. (2014). The merging role of Buddhism in clinical psychology: toward effective integration. *Psychology of Religion and Spirituality*, 6, 123-137.

Suler, J.R. (2009). Students, teachers and their relationships. In *Contemporary Psychoanalysis and Eastern Thought*. SUNY, pp. 139-161

Virtbauer, G. (2012). The Western reception of Buddhism as a psychological and ethical system: developments, dialogues, and perspectives. *Mental Health, Religion & Culture*, 15 (3), 251–263

### **Course Evaluation:**

Term Essay:	40% (Guidelines will be posted under Syllabus on Blackboard); due March 30, 2017
Class Attendance:	10% (1% per class)
Reflection Assignment:	20% (2% per article; see separate document under Syllabus on Blackboard): due weekly throughout semester
Case Study	30% - Case formulation of the Buddha based on the psychological principles discussed in the course

### **Lecture Schedule:**

January 5 **Introduction: Buddhism as a philosophy of personal transformation**  
Readings: Mikulas, W.L. (2010). Buddhist psychology: A western interpretation. In K. Ramakrishna Rao, A.C. Paranjpe, & A.K. Dalai (Eds.), *Handbook of Indian psychology* (142-161). New Delhi, India: Foundation Books.

Virtbauer, G. (2012). The Western reception of Buddhism as a psychological and ethical system: developments, dialogues, and perspectives. *Mental Health, Religion & Culture*, 15, ( 3), 251–263

January 12 **Principles of Buddhist psychology and clinical psychology**

Readings: Olendzki, A. (2003). Buddhist Psychology. In S.R. Segall (Ed.), *Encountering Buddhism: Western psychology and Buddhist teachings* (9-30). Albany: State University of New York Press.  
(<http://www.sunypress.edu/pdf/60757.pdf>)

Shonin, E. (2014). The merging role of Buddhism in clinical psychology: toward effective integration. *Psychology of Religion and Spirituality*, 6, 123-137.

- January 19     **Comparative Conceptions of Self in Buddhism and Psychotherapy I**  
Reading: Mosig, Y.D. (2006). Conception of the self in western and eastern psychology. *Journal of Theoretical and Philosophical Psychology*, 26, 39-50.
- January 26     **Comparative Conceptions of Self in Buddhism and Psychotherapy II**  
Readings: Engler, J. (2003). Being somebody and being nobody: A re-examination of the understanding of self in psychoanalysis and Buddhism. In J.D. Safran (Ed.), *Psychoanalysis and Buddhism: An unfolding dialogue* (35-79). Boston: Wisdom Publications.
- February 2     **The Unconscious in Buddhism**  
Readings: Suler, J.R. Students, teachers and their relationships. In *Contemporary Psychoanalysis and Eastern Thought*. SUNY, pp. 139-161.
- February 9     **Psychoanalysis and Buddhism I**  
Readings: Young-Eisendrath, Polly (2008). The transformation of human suffering: A perspective from psychotherapy and Buddhism. *Psychoanalytic Inquiry*, 28, 541-549.
- Jenning, P. (2010). Healing goals in buddhism and psychoanalysis. Chapter 8. In *Mixing minds: the power of relationship in psychoanalysis and Buddhism*. Wisdom Publications: Boston. 211-234.
- Rubin, J.B. (2003). Close encounters of a new kind: Toward an integration of psychoanalysis and Buddhism. In S.R. Segall (Ed.), *Encountering Buddhism: Western psychology and Buddhist teachings* (31-60). Albany: State University of New York Press
- February 16    **Psychoanalysis and Buddhism II**  
Readings: Epstein, M. (1995). Thoughts without a thinker: Buddhism and psychoanalysis. *Psychoanalytic Inquiry*, 82, 391-406.
- Epstein, M (1990). Psychodynamics of meditation: pitfalls on the spiritual path. *Journal of Transpersonal Psychology*, 22 (1), 17-34
- Epstein, M. (1986). Meditative transformations of narcissism. *Journal of Transpersonal Psychology*, 18, 143-158.

February 23 (Reading Week – No Class)

March 2 **Positive Psychology and Buddhism**

Reading: TBA

March 9 **Cognitive-Behavior Psychology and Buddhism**

Reading: Kuan, Tse-fu (2012). Cognitive operations in Buddhist meditation: Interface with western psychology. *Contemporary Buddhism*, 13 (1), 35-60.

March 16 **Mindfulness-based Psychotherapy and Buddhism**

Readings: Gilpin, R. (2008). The use of Theravada Buddhist practices and perspectives in mindfulness-based cognitive therapy. *Contemporary Buddhism*, 9, 227-250.

Grabovac, A. D., Lau, M.A., & Willett, B.R. (2011). Mechanisms of mindfulness: A Buddhist psychological model. *Mindfulness*, 2(3), 154-166.

March 23 **Therapeutic Practice and Buddhism**

Readings: Fulton, P. (2005). Mindfulness as Clinical Training, (pp. 55-72). In *Mindfulness and Psychotherapy*, (Eds. C. K. Germer, R. D. Siegel, P. R. Fulton). New York: The Guilford Press.

Fulton, P. (2014). Contributions and Challenges to Clinical Practice from Buddhist Psychology. *Clinical Social Work J* 42:208–217

March 30 Last Class; **Review of the Course Objectives**

**Recommended Reading:**

Epstein, M. (2007). *Psychotherapy without the self: A Buddhist perspective*. Yale University Press: New Haven.

Jennings, P. (2010). *Mixing minds: The power of relationship in psychoanalysis and Buddhism*. Wisdom Publications: Boston

Safran, J. D. (Ed.). (2003). *Psychoanalysis of Buddhism*. Wisdom Publications: Boston.

Welwood, J. (2002). *Toward a psychology of awakening: Buddhism, psychotherapy and the path of personal and spiritual transformation*. Shambhala: Boston

**Course Policies:**

Policies for courses are contained in the TST Basic Degree/Advanced Degree Handbooks:

- 1) Late Policy: no penalty if acceptable reason is provided prior to the due date. Otherwise a penalty of 5% per day will be applied.
- 2) Completion of Course Work: All course work (including any late work) must be completed by the end of term, the last day of exams. Only in the case of illness (with a note from a doctor), bereavement or other unusual circumstances will an extension be considered and this must be authorized by the Basic Degree Committee and the Faculty.
- 3) Assignments: Essays and assignments can be submitted on Blackboard.
- 4) Consultation: Please do not hesitate to consult with me about any questions you may have.

### **Academic Integrity:**

Students should read carefully the academic discipline policy on, and severe penalties for, plagiarism and cheating. These are set out in the University of Toronto's Code of Behaviour on Academic Matters available through the Office of the TST Director (cf. TST Basic Degree Handbook, p. 45) and on the web (<http://www.governingcouncil.utoronto.ca/policies/behaveac.htm>).

### **Grading Scheme:**

The grading scheme for this course, as with all TST courses, is as follows:

A+ 90-100	profound and creative
A 85-89	outstanding
A- 80-84	excellent: clear evidence of original thinking, of analytic and synthetic ability; sound critical evaluations, broad knowledge base
B+ 75-79	very good
B 73-76	good: good critical capacity and analytic ability; reasonable understanding of relevant issues, good familiarity with the literature
B- 70-72	satisfactory: adequate critical capacity and analytic ability; some understanding of relevant issues and with the literature
FZ 0-69	failure: failure to meet the above criteria

**Course grades.** Consistently with the policy of the University of Toronto, course grades submitted by an instructor are reviewed by a committee of the instructor's college before being posted. Course grades may be adjusted where they do not comply with University grading policy (<http://www.governingcouncil.utoronto.ca/policies/grading.htm>) or college grading policy.

### **Policies**

**Accessibility.** Students with a disability or health consideration are entitled to accommodation. Students must register at the University of Toronto's Accessibility Services offices (information is available at <http://www.accessibility.utoronto.ca>). The sooner a student seeks accommodation, the quicker we can assist.

**Plagiarism.** Students submitting written material in courses are expected to provide full documentation for sources of both words and ideas in footnotes or endnotes. Direct quotations should be placed within quotation marks (if small changes are made in the quotation, they should be indicated by appropriate punctuation such as brackets and ellipses, but the quotation still-counts as a direct quotation.) Failure to document borrowed material constitutes plagiarism, which is a serious breach of academic, professional, and Christian ethics. An instructor who discovers evidence of student plagiarism is not permitted to deal with the situation individually but is required to report it to his or her head of college or delegate according to the TST Basic Degree Handbook and the University of Toronto Code of Behaviour on Academic Matters.

Course Number: EMP 2015

Course Name: Buddhism and Psychotherapy

CRPO Competency Checklist

<b>1. Foundations</b>		
<b>1.1 Integrate a theory of human psychological functioning.</b>		
a	Integrate knowledge of human development across the lifespan.	X
b	Integrate knowledge of contextual and systemic factors that facilitate or impair human functioning.	X
c	Integrate knowledge of the psychological significance of spiritual, moral, social, emotional, cognitive, behavioural, sexual, gender, and biological development.	X
<b>1.2 Work within a framework based upon established psychotherapeutic theory.</b>		
a	Integrate the theory or theories upon which the therapist's practice is based.	X
b	Integrate knowledge of how human problems develop, from the viewpoint of the therapist's theoretical orientation.	X
c	Identify circumstances where therapy is contraindicated.	X
d	Recognize the benefits, limitations, and contraindications of differing psychotherapeutic approaches.	X
e	Establish a therapeutic relationship informed by the theoretical framework.	X
f	Integrate a theory of change consistent with the therapist's theoretical orientation.	X
g	Integrate knowledge of the impact of trauma on psychological functioning.	X
<b>1.3 Integrate knowledge of comparative psychotherapy relevant to practice.</b>		
a	Integrate knowledge of key concepts common to all psychotherapy practice.	X
b	Recognize the range of psychotherapy practised within the province of Ontario.	
c	Integrate knowledge of psychopathology.	X
d	Recognize the major diagnostic categories in current use.	
e	Recognize the major classes of psychoactive drugs and their effects.	
<b>1.4 Integrate awareness of self in relation to professional role.</b>		
a	Integrate knowledge of the impact of the therapist's self on the therapeutic process.	X
b	Recognize how the therapist's values and attitudes, both in and out of awareness, may impact diverse clients.	X
c	Recognize the cognitive, emotional and behavioural patterns of the therapist that may influence therapeutic relationship.	X
d	Recognize instances where the therapist's life experiences may enhance or compromise therapeutic effectiveness.	
<b>1.5 Integrate knowledge of human and cultural diversity.</b>		
a	Integrate knowledge of human diversity.	
b	Recognize how oppression, power and social injustice may affect the client and also the therapeutic process.	
c	Adapt the therapist's approach when working with culturally diverse clients.	
d	Recognize barriers that may affect access to therapeutic services.	
e	Identify culturally-relevant resources.	
<b>2. Collegial &amp; Inter-professional Relationships</b>		
<b>2.1 Use effective professional communication.</b>		
a	Use clear and concise written communication.	
b	Use clear and concise oral communication.	x
c	Use clear and concise electronic communication.	
d	Communicate in a manner appropriate to the recipient.	X
e	Use effective listening skills.	X
f	Differentiate fact from opinion.	
g	Recognize and respond appropriately to non-verbal communication.	
<b>2.2 Maintain effective relationships.</b>		

a	Show respect to others.	X
b	Maintain appropriate professional boundaries.	X
c	Recognize and address conflict in a constructive manner.	X
d	Demonstrate personal and professional integrity.	
<b>2.3 Contribute to a collaborative and productive atmosphere.</b>		
a	Create and sustain working relationships with other professionals encountered in practice.	
b	Create and sustain working relationships with colleagues of diverse socio- cultural identities.	
c	Initiate inter-professional collaborative practice.	
<b>3. Professional Responsibilities</b>		
<b>3.1 Comply with legal and professional obligations.</b>		
a	Comply with applicable federal and provincial legislation.	
b	Comply with CRPO legislation and professional standards.	
c	Address organizational policies and practices that are inconsistent with legislation and professional standards.	
d	Comply with relevant municipal and local bylaws related to private practice.	
<b>3.2 Apply an ethical decision making process.</b>		
a	Recognize ethical issues encountered in practice.	
b	Resolve ethical dilemmas in a manner consistent with legislation and professional standards.	
c	Accept responsibility for course of action taken.	
<b>3.3 Maintain self-care and level of health necessary for responsible therapy.</b>		
a	Maintain personal physical, psychological, cognitive and emotional fitness to practice.	
b	Build and use a personal and professional support network.	X
c	Maintain personal hygiene and appropriate professional presentation.	
<b>3.4 Evaluate and enhance professional practice.</b>		
a	Undertake critical self-reflection.	X
b	Solicit client feedback throughout the therapeutic process.	X
c	Plan and implement methods to assess effectiveness of interventions.	
d	Obtain feedback from peers and supervisors to assist in practice review.	
e	Identify strengths as a therapist, and areas for development.	X
f	Set goals for improvement.	X
g	Modify practice to enhance effectiveness.	X
h	Participate in relevant professional development activities.	X
i	Maintain awareness of resources and sources of support relevant to practice.	X
<b>3.5 Obtain clinical supervision or consultation.</b>		
a	Initiate clinical supervision or consultation when appropriate or required.	
b	Articulate parameters of supervision or consultation.	
c	Protect client privacy and confidentiality, making disclosure only where permitted or required.	
d	Initiate a legal consultation when necessary.	
<b>3.6 Provide education and training consistent with the therapist's practice.</b>		
a	Recognize when to provide education and training to clients and others.	
b	Recognize therapist's limits of professional expertise as a trainer /educator.	X
c	Plan and implement effective instructional activities.	
<b>3.7 Maintain client records.</b>		
a	Comply with the requirements of CRPO and relevant professional standards.	
<b>3.8 Assist client with needs for advocacy and support.</b>		
a	Identify when advocacy or third-party support may be of value to the client, and advise client accordingly.	
b	Support client to overcome barriers.	
<b>3.9 Provide reports to third parties.</b>		
a	Prepare clear, concise, accurate and timely reports for third parties, appropriate to the needs of the recipient.	
b	Recognize ethical and legal implications when preparing third-party reports.	
<b>3.10 Establish business practices relevant to professional role.</b>		

a	Comply with the requirements of CRPO and relevant professional standards.	
b	Explain limitations of service availability.	
<b>4. Therapeutic Process</b>		
<b>4.1 Orient client to therapist's practice.</b>		
a	Describe therapist's education, qualifications and role.	
b	Differentiate the role of the therapist in relation to other health professionals.	
c	Explain the responsibilities of the client and the therapist in a therapeutic relationship.	
d	Explain the advantages and disadvantages of participating in psychotherapy.	
e	Explain client rights to privacy and confidentiality, and the limitations imposed upon it by law.	
f	Explain relevant rules and policies.	
g	Respond to client questions.	
h	Explain and obtain informed consent in accordance with legal requirements.	
<b>4.2 Establish and maintain core conditions for therapy.</b>		
a	Employ empathy, respect, and authenticity.	X
b	Establish rapport.	X
c	Demonstrate awareness of the impact of the client's context on the therapeutic process.	X
d	Demonstrate sensitivity to the setting in which therapy takes place.	
e	Assume non-judgmental stance.	X
f	Explain theoretical concepts in terms the client can understand.	X
g	Foster client autonomy.	X
h	Maintain appropriate therapeutic boundaries.	X
i	Define clear boundaries of response to client's requests or demands.	
j	Take all reasonable measures to safeguard physical and emotional safety of client during clinical work.	X
k	Employ effective skills in observation of self, the client and the therapeutic process.	
l	Demonstrate dependability.	
<b>4.3 Ensure safe and effective use of self in the therapeutic relationship.</b>		
a	Demonstrate awareness of the impact of the therapist's subjective context on the therapeutic process.	X
b	Recognize the impact of power dynamics within the therapeutic relationship.	X
c	Protect client from imposition of the therapist's personal issues.	X
d	Employ effective and congruent verbal and non-verbal communication.	X
e	Use self-disclosure appropriately.	X
<b>4.4 Conduct an appropriate risk assessment.</b>		
a	Assess for specific risks as indicated.	
b	Develop safety plans with clients at risk.	
c	Refer to specific professional services where appropriate.	
d	Report to authorities as required by law.	
e	Follow up to monitor risk over time.	
<b>4.5 Structure and facilitate the therapeutic process.</b>		
a	Communicate in a manner appropriate to client's developmental level and socio-cultural identity.	
b	Identify and respond appropriately to client's strengths, vulnerabilities, resilience and resources.	
c	Respond non-reactively to anger, hostility and criticism from the client.	X
d	Respond professionally to expressions of inappropriate attachment from the client.	X
e	Anticipate and respond appropriately to the expression of intense emotions and help the client to understanding and management.	X
f	Recognize a variety of assessment approaches.	
g	Formulate an assessment.	
h	Develop individualized goals and objectives with the client.	X
i	Formulate a direction for treatment or therapy.	
j	Practise therapy that is within therapist's level of skill, knowledge and judgement.	X
k	Focus and guide sessions.	

l	Engage client according to their demonstrated level of commitment to therapy.	
m	Facilitate client exploration of issues and patterns of behaviour.	X
n	Support client to explore a range of emotions.	X
o	Employ a variety of helping strategies.	X
p	Ensure timeliness of interventions.	
q	Recognize the significance of both action and inaction.	
r	Identify contextual influences.	
s	Review therapeutic process and progress with client periodically, and make appropriate adjustments.	
t	Recognize when to discontinue or conclude therapy.	
<b>4.6 Refer client.</b>		
a	Develop and maintain a referral network.	
b	Identify situations in which referral or specialized treatment may benefit the client, or be required.	
c	Refer client, where indicated, in a reasonable time.	
<b>4.7 Conduct an effective closure process.</b>		
a	Prepare client in a timely manner for the ending of a course of therapy.	
b	Outline follow-up options, support systems and resources.	
<b>5. Professional Literature &amp; Applied Research</b>		
<b>5.1 Remain current with professional literature.</b>		
a	Read current professional literature relevant to practice area.	X
b	Access information from a variety of current sources.	X
c	Analyze information critically.	X
d	Determine the applicability of information to particular clinical situations.	
e	Apply knowledge gathered to enhance practice.	
f	Remain current with developments in foundational areas.	X
<b>5.2 Use research findings to inform clinical practice.</b>		
a	Integrate knowledge of research methods and practices.	X
b	Determine the applicability of research findings to particular clinical situations.	X
c	Analyze research findings critically.	X
d	Apply knowledge gathered to enhance practice.	X