I. Course Purpose and Description:

This is the third elective course in the Human Behavior in the Social Environment (HBSE) sequence. The course builds upon the previous two HBSE courses and is designed to provide a framework of knowledge and skills necessary to practice with vulnerable children, youth and their families.

The course will begin with an overview of the principles of developmental psychopathology. The course focuses on the growing body of research on resilience and protective influences that can foster growth throughout the lifespan and within the child’s/family’s cultural context. The course will also focus on identifying risk factors that put children and youth at risk for emotional and behavioral disorders.

Throughout the course we will focus on the challenges of children who are negatively impacted by their environments, and children who are faced with neurobiological and psychological difficulties. Specific behavioral disorders (e.g., autism, oppositional defiant disorder, ADHD, PTSD, learning disabilities, anxiety, depression, etc.) that emerge from infancy through adolescence will be covered.

Prerequisite: SW 619: Human Behavior and the Social Environment, Part I
SW 620: Human Behavior & the Social Environment, Part II

II. Course Objectives:

A. Knowledge Objectives Students will:

1. Increase knowledge and awareness of the dynamic interplay between biological, psychological, and social-culture contextual aspects of normal and abnormal development.

2. Develop knowledge about sources of resilience and the influence of protective processes that can potentially minimize or outweigh multiple risk exposure.
3. Develop an understanding of how the behavioral problems of children may be evidence of underlying developmental delays, traumatic events, neglectful or abusive caregiving, and/or emotional difficulties.

4. Acquire knowledge of the classification of emotional and behavioral disorders in children and the associated symptoms and behaviors commonly manifested in each category.

B. **Skill Objectives**    
*Students will be able to:*

1. Observe children’s physical, cognitive, social and emotional development and identify when development is delayed or following abnormal patterns.

2. Formulate the nature and causes of problems, and the strengths and limitations of the client and community systems.

3. Utilize appropriate assessment procedures to evaluate risk factors and identify the implications of these risk factors for the development of children and their families.

4. Identify symptoms and behavioral presentations of clinical diagnoses that emerge through infancy through adolescence.

5. Identify ways in which the effects of exposure to adverse conditions in childhood can be minimized and how protective factors can be incorporated.

6. Appraise and critique research related to significant risks to child development.

C. **Professional Values and Ethics Objectives**  
*Students will:*

1. Increase knowledge and understanding of the National Association of Social Workers (NASW) Code of Ethics and its application in working with children, youth and their families.

2. Increase knowledge of culturally responsive, strength oriented practices in working with children and families.

3. Increase understanding and ability to identify ethical dilemmas and legal responsibilities in working with children, youth and their caregivers.

4. Increase awareness of the impact of countertransference, and secondary and vicarious traumatization upon the professional relationship between client(s) and social worker.

III. **Expected Outcomes**

*At the completion of this course, the student will be able to:*

1. Observe children’s behavior and assess whether the behavior is consistent with the stages and milestones of normal physical, cognitive, social, and emotional development.
2. Explain how neurobiological, psychological, cultural and environmental factors interact to influence the development of children from birth to adolescence.

3. Describe the potential negative impact that external risk factors (i.e., parental psychopathology and substance abuse, child abuse, neglect, sexual abuse, family violence, and other traumatic experiences) can have on the development of children from birth to adolescence.

4. Demonstrate a beginning level of skill in differentiating between the psychiatric disorders in children and youth and in describing the associated behaviors manifested in each category.

5. Demonstrate increased skills in assessing children and youth, including identifying the nature and causes of problems, and identifying the strengths and limitations of the client and environmental systems.

6. Select appropriate resources to effectively neutralize or outweigh the effects of multiple risk exposure in vulnerable children and youth.

7. Organize, interpret and recognize research strengths and limitations related to Evidence Based Practices for vulnerable children and families.

IV. Textbooks

A. Required Textbooks:


B. Highly Recommended Textbooks:


V. Course Assignments

A. Assigned Readings and Exams I (30%)
Assigned readings are listed in the course outline. Students are expected to study all assigned readings, whether or not they are discussed in class. The exam will take place on Week 10, 11-1-12. The exam will consist of 50 multiple choice questions focusing on theoretical knowledge, key concepts and principles covered in the required readings in the three textbooks.

B. Brief Developmental Assessment of a Child or Adolescent Client (40%)

In this written assignment students will complete a brief assessment of a child or adolescent client at their current (preferable) or previous field placement. If the student does not have an appropriate case from either field placement, he should notify the instructor by the second week of class (September 6, 2012) so other options may be considered. The assessment will include: demographic information, a Mental Status Exam (MSE), clinical observations of the interaction between the child and his or her parent(s)/caregiver(s); a genogram, eco-map, and culturagram; and an assessment of the client’s developmental history, presenting problem and current symptoms. The developmental assessment should include observational data and analysis related to the attachment between the child and a parent/caregiver (see Chapter 1 of the Davies text).

From the developmental history, the student will identify a salient risk factor that may create vulnerability for the child’s ongoing development and provide a rationale for considering it a risk factor. The second half of the Davies text, “Course of Child Development” (pp. 127-414) is a resource for this assignment, as it describes strategies for observing and assessing different ages of children (i.e., infants, toddlers, preschoolers, school age children). Laser and Nicotera text is a resource for the adolescent client. See Appendix A for assignment guidelines.

The student will make a DSM-IV-TR provisional diagnosis (based on current symptoms and including all five axes) and formulate an intervention plan, with treatment goals and objectives, interventions, and criteria for evaluation. The evidence-based intervention plan must include implementation of a protective influence to address the identified risk factor, with rationale for why this protective influence would be appropriate for the child and his or her family.

High risk, ethical and legal issues that might be encountered when working with the client and his or her family should be discussed, and planned interventions to address these concerns should be noted as part of the intervention plan. A table summarizing the goals, objectives, interventions, and evaluation criteria should be attached (and will not count against the page limit); however, the table cannot substitute for discussion of the high risk, ethical and legal issues, or for the rationale for the protective influence.

The paper should be no longer than five double spaced pages (in APA format: 12 point font and 1 inch margins). A Reference List (in APA format) should be attached, including references to the course texts and DSM-IV-TR, and any other references the student has utilized. The Reference List should be on a separate page and is not included within the five page limit. The paper should have a title page (in APA format) and abstract following the criteria of a review article (i.e., purpose of paper, sources of information, brief statement of findings). The paper
should be emailed to the instructor by the beginning of class. The only information identifying the author should be the Student ID number. **The student’s name should not be on the paper.** The papers will be downloaded with only the Student ID number.

Confidentiality of the client and his or her family must be *strictly* maintained. Please see Class Policies (p. 13).

### C. Assigned Readings and Exam II (30%)

Assigned readings are listed in the course outline. Students are expected to study all assigned readings, whether or not they are discussed in class. The exam will take place on Week 15, 12-13-12. The exam will consist of 50 multiple choice questions focusing on theoretical knowledge, key concepts and principles covered in the required readings in the three textbooks.

### VI. Grading:

Grades will be administered in accordance with the policies set forth in the Graduate Bulletin and in accordance with the School of Social Work Grading Policy for the Graduate Program. For each assignment (and the Final Grade for all assignments) the following grading scale will be utilized:

The following grading scale will be utilized:

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<th>Grade</th>
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<td>D</td>
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<td>D-</td>
<td>62-60</td>
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<td>F</td>
<td>59 or less</td>
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As documented in the SDSU School of Social Work grading policy, the instructor will determine grades in accordance with the following guidelines:

1. Grades of A or A- are reserved for student work that not only demonstrates very good mastery of content, but also shows that the student has (a) undertaken complex tasks, (b) applied critical thinking skills to the assignment, and/or (c) demonstrated creativity in her or his approach to the assignment. The degree to which the student demonstrates these skills determines whether he/she receives an A or an A-.

2. A grade of B+ is given to work that is judged to be very good. This grade denotes that a student has demonstrated a more-than competent understanding of the material being tested in the assignment.
3. A grade of B is given to student work that meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets the basic expectations of the course.

4. A grade of B- denotes that a student’s performance was less than adequate on an assignment, reflecting only a moderate grasp of content and/or expectations.

5. A grade of C reflects a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement.

6. Grades between C- and F denote a failure to meet minimum standards, reflecting serious deficiencies in a student’s performance on the assignment.

The final grade is derived from assignments based upon the following formula:

- Exam 1 30%
- Brief Developmental Assessment of a Child Client 40%
- Exam 2 30%

100%

VII. Class Policies:

All University policies delineated in the Graduate Bulletin (see: http://arweb.sdsu.edu/es/catalog/bulletin/index.html) and School of Social Work policies delineated in the Graduate Student Handbook (see: http://socialwork.sdsu.edu/docs/graduatehandbook.pdf) apply to this course. In addition, the following policies are in effect for this course:

A. Attendance and Participation

1. Attendance: Attending class is necessary to receive full benefit of the course. Students are expected to come to class on time, sign the attendance sheet provided by the instructor, and stay for the entire class session. Please notify the instructor in advance by email, if you need to miss class, arrive late, or leave early.

   The instructor will excuse absences resulting from verified unforeseen circumstances (e.g., illness, family emergency, unavoidable commitments). Students may be excused from class to attend a professional workshop if the workshop applies directly to social work practice and the student agrees to briefly share with classmates what he or she learned in the workshop. As per University policy, students may be excused from class to observe religious holidays when such holidays conflict with class time. When students miss class, they must take responsibility for obtaining all information discussed and presented in class and posted on Blackboard.
A pattern of two or more unexcused absences will result in the final letter grade being lowered by ½ letter grade (from B+ to B). The instructor will notify the student when they have one unexcused absence.

2. **Participation:** This course is a seminar, meaning that as adult learners, students are expected to take an active role in creating a positive learning environment by studying the assigned readings prior to class and actively contributing to class discussions. Students are expected to contribute material drawn from their field placements and/or social work related jobs (e.g., case examples, ethical dilemmas encountered) that are relevant to the topics covered in class. Course content will be addressed through lectures, class discussion of required readings, discussion groups, Internet websites, dyad exercises, and videotapes/DVD’s. Interactive exercises focused on increasing self-awareness and clinical skill development will be assigned (e.g., role-plays; case studies, constructing genograms, eco-maps, and culturagrams).

3. **Classroom Etiquette.** Please turn off cell phones or place them on vibrate and do not engage in texting, checking Facebook or Twitter and/or answering emails while in class. The use of laptops in class can be a distraction to others.

**B. Exams**

1. The exam I will be given on Week 10, 11-1-12. The exam II will be given on Week 15, 12-13-12.

2. The exam must be taken on the date it is scheduled, unless students have an unavoidable reason for missing an exam and have made prior arrangements. If illness or other extenuating circumstances prevent students from taking the exam on the scheduled date, they should contact the instructor to discuss the reasons preventing them from taking the exam. The instructor will then negotiate another time for the student to take the exam.

**C. Written Assignment: Brief Developmental Assessment of a Child or Adolescent Client**

1. The assignment is due on 11-15-12.

2. The student should select a client from their current (preferable) or previous field placement. It is essential that all identifying information be changed.

**D. **NASW Code of Ethics:

**Academic Standard:** The NASW Code of Ethics is an academic standard at the SDSU School of Social Work. The norms of this course support the principles of the Code of Ethics including maintaining client confidentiality, treating one’s colleagues with respect, and being honest in written work.

1. **Confidentiality.** Students are expected at all times to maintain the confidentiality of clients by changing all client names and disguising identifying information (but not changing the
salient dynamics of the case). This applies to the client used in the Brief Developmental Assessment of a Child Client, as well as any cases discussed in class.

2. Respect for colleagues: Respect involves collaborating with the instructor and other class members to create a safe, interactive, and intellectually stimulating classroom environment. This includes actively contributing to class discussions without monopolizing, listening attentively and expressing disagreement respectfully. Sharing personal experiences that directly relate to the course content helps create a supportive classroom environment and benefits learning for all students.

3. Honesty/integrity. The NASW Code of Ethics asserts that social workers should “behave in a trustworthy manner” and “not participate in, condone, or be associated with dishonesty, fraud, or deception” (NASW, Rev 1996, Ethical Principles & Section 4.04). Demonstrating honesty and integrity entails avoiding all forms of academic misconduct including: cheating, plagiarizing, stealing course examinations, asking another student to sign the roll for them when they are not going to be attending class, falsifying data, violating copyright laws, and/or intentionally assisting another individual in any of those actions. Please note the following definitions and policies:

Cheating includes (1) giving or taking exam answers to or from another student, (2) copying another student’s paper (in part or in its entirety), and (3) falsifying one’s own or another student’s class attendance.

Plagiarism is “formal work publicly misrepresented as original; it is any activity wherein one person knowingly, directly and for lucre, status, recognition, or any public gain resorts to the published or unpublished work of another in order to represent it as one’s own. Work shall be deemed plagiarism (1) when prior work of another has been demonstrated as the accessible source; (2) when substantial or material parts of the source have been literally or evasively appropriated (substance denoting quantity; matter denoting qualitative format or style); and (3) when the work lacks sufficient or unequivocal citation so as to indicate or imply that the work was neither a copy nor an imitation. This definition comprises oral, written, and crafted pieces. In short, if one purports to present an original piece but copies ideas word for word or by paraphrase, these ideas should be duly noted” (Lindey, as cited in the Bulletin of the Graduate Division, SDSU, 2000-2001, p. 40).

4. Giving authorship credit. The NASW Code of Ethics states that social workers should take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed. Social workers should honestly acknowledge the work of and the contributions made by others (NASW, 1996). Students should be careful to give appropriate authorship credit to anyone from whom they have obtained information for assignments (i.e. including citing books, journal articles, Internet websites, class lectures, professional colleagues, and/or classmates.

NOTE: If you take a direct quotation from a book or article, you must enclose the quoted material in quotation marks and cite the author, year of publication, and page number of
the quote. If you do not indicate that the material is a direct quote, it can be considered as a form of plagiarism, even though you have appropriately cited the reference from which you took the material. Students should consult the instructor if they have questions about how to incorporate and cite the work of other professionals.

5. **Consequences for academic misconduct.** Academic misconduct will be handled according to University policy. Students who are found plagiarizing the works of others or committing other forms of academic misconduct will be subject to standards set forth by the University. Such action could result in failing an assignment, failing the class, or being expelled from the University. Please see Bulletin of the Graduate Division. A student who is found cheating or plagiarizing will be asked to meet with the instructor and the Graduate Advisor to determine the consequences to be implemented. If it is determined that plagiarism took place, they will be referred to the University Department of Judicial Affairs.

6. **Self-care.** A limited number of counseling sessions are available free of charge at SDSU Counseling and Psychological Services to any student who wishes to access them. Various support and coping skills groups are also available. The Graduate Advisor can interface with SDSU Counseling and Psychological Services to obtain an appropriate therapist for a student (i.e., a staff member as opposed to a student intern) if the student wishes. Confidentiality of the student will be strictly protected.

E. Instructionally Related Policies

1. **Disabilities.** The San Diego State University School of Social Work abides by the Americans with Disabilities Act of 1990. Students who have disabilities that can potentially impact their academic performance may request special accommodations by contacting the SDSU Disabled Students Services (DSS) and receiving an evaluation. The Graduate Advisor can assist students who believe they may have a disability by referring them to DSS. If DSS determines that a student has a disability and is eligible for special accommodations (e.g., extended time for taking exams), it is the student’s responsibility to inform the instructor. He or she should meet with the instructor and provide the necessary paperwork from DSS for special accommodations.

2. **Grade of Incomplete.** On rare occasions (e.g., severe illness, family emergency), a grade of “Incomplete” may be granted, provided the student meets the criteria established by University and School of Social Work policies. These criteria include: (a) the instructor must agree that extenuating circumstances prevented the student from completing the work; (b) the student does not have to make up more than 30% of the required course work; and (c) the student and the instructor will sign a contract specifying the actions needed for the student to complete the course and a time line for completion. University policy dictates that an Incomplete must be made up within one calendar year following the end of the term in which it was assigned, or the grade will be converted to an F.

3. **Communication with the instructor.** The instructor will use Blackboard to send emails to students notifying them of documents posted on Blackboard and/or updates to course
assignments. Students are responsible for assuring that: (a) they are currently registered in the course, and (b) their current email is listed on the Blackboard system. The Blackboard system does not handle hotmail accounts well, so students who have a hotmail account should request a rohan account from SDSU and use it as their University email. Students requiring assistance on Blackboard are encouraged to contact the Blackboard Help Desk at http://its.sdsu.edu/bbsupport/. When not in the classroom, email is the preferred method for communicating with the instructor.

4. **Office hours.** The instructor will maintain office hours as listed on the heading of this syllabus, and may be available at other times by appointment. In order to make the best use of office hour time, the instructor encourages students to schedule appointments when possible. The instructor also welcomes questions from students via email (see contact information on the heading of this syllabus).

**VIII. Organization of Course**

1. **Lecture notes:** The instructor will post on Blackboard PowerPoint slides summarizing the major points of the lectures, as well as other handouts that relate to course material. Students should check Blackboard on the morning of class to download any posted documents. Not all Power Points or readings will be discussed in class. PowerPoint slides are intended to be references for student review of class and reading material. Any information from the readings may be included in test questions, even if the material has not been discussed in class.

2. **Course outline:** The following Course Outline lists the topics of discussion; required and recommended readings; and required assignments scheduled for each class session. All readings will NOT be covered in class. Students are responsible for **ALL** assigned readings, regardless of whether they are discussed in class.

3. The Course Outline is subject to changes by the instructor throughout the semester.
# COURSE OUTLINE

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<tr>
<th>Session 1</th>
<th>Topics</th>
<th>Reading</th>
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<tr>
<td>8-30-12</td>
<td>Introduction to Course</td>
<td><strong>Required Reading:</strong></td>
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<td></td>
<td>- Developmental Overview and Foundation</td>
<td><strong>Davies text:</strong></td>
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<td>- Maturational Perspective</td>
<td>- Introduction to Part 1, pp. 3-6</td>
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<td></td>
<td>- Transactional Model</td>
<td>- Ch 3: Risk and protective factors, pp. 60-104</td>
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<td>- Developmental Pathways</td>
<td>- Ch 4: Analysis of risk and protective factors, pp. 105-123</td>
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<td>- Research</td>
<td><strong>Perry and Szalavitz text:</strong></td>
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<td>- Protective Factors and Processes</td>
<td>- Introduction, pp. 1-6</td>
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<td>- Risk and Protective Factors</td>
<td><strong>Required Reading:</strong></td>
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<td>- Analysis of Risk</td>
<td><strong>Davies text:</strong></td>
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<td>- Predicting Risk</td>
<td>- Ch 1: Attachment as a context for development, pp. 7-38</td>
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<td>- Ethical Issues</td>
<td>- Ch 2: Brain development, pp. 39-49</td>
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<td>- Reporting</td>
<td><strong>Laser and Nicotera Text:</strong></td>
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<td>- Privilege</td>
<td>- Ch 2: The Push-Pull of Adolescent Development, pp. 17-18, 20-21</td>
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<td>- Confidentiality</td>
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<td>- Ch 4: Skin Hunger, pp. 81-98</td>
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<td>- Ch 6: The boy who was raised as a dog, pp. 125-154</td>
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<td>- Ch 5: The coldest heart, pp. 99-124</td>
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**Adult Attachment Interview**
http://www.psychology.sunysb.edu/attachment/measures/content/aai_int
**Session 3**  
9-13-12

### Infants
- Development  
- Practice
- Infant Mental Health  
  - What is it?  
  - Program Descriptions
- Mental Health Disorders  
- Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood

### Required Reading:

#### Davies:
- Ch 5: Infant development, pp. 131-162  
- Ch 6: Practice with infants, pp. 163-184

#### Recommended Reading
- Blackboard:

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Dobbs, D (2011) Beautiful brains *National Geographic Magazine*  

**DSM - IV-TR:**
- Reactive Attachment Disorder, pp. 127-130

**Recommended Reading:**

Madigan, S. (2006) Unresolved States of Mind, Disorganized Attachment Relationships, and Disrupted Interactions of Adolescent Mothers and Their Infants  
*Developmental Psychology* 42(2), 293-305  
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<tr>
<th>Session 4 9-20-12</th>
<th>Dynamics of Childhood Trauma</th>
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<td>- Trauma defined</td>
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<td>- Complex trauma</td>
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<td>- Social and emotional consequences of trauma</td>
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<td>- Protective factors</td>
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<td>- Traumatic Grief</td>
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<td>- Risk factors:</td>
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<td>- Domestic violence</td>
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<td>Ch 12: Practice with school age children, pp. 398-414</td>
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<td>Ch 1: Tina’s World, pp. 7-30</td>
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<td>Ch 2: For Your Own Good, pp. 31-56</td>
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<td>Ch 3: Stairway to Heaven, pp. 57-80</td>
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<td>Ch 8: The Raven, pp. 179-202</td>
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### Session 5 9-27-12

**PTSD across the developmental spectrum**

- Functional Impairment
  - Short term impact
  - Long term impact
- Mental Health Disorders
  - Acute Stress Disorder
  - Posttraumatic Stress Disorder

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**Required Reading:**

- *Trauma-Focused Cognitive – Behavioral website: (training available on the model):* [http://tfcbt.musc.edu/](http://tfcbt.musc.edu/)

### Session 6 10-4-12

**Depression and Anxiety**

- Internalizing Disorders in Children and Adolescents
- Child and adolescent Depression

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**Required Reading:**

- *DSM-IV-TR:*
  - Acute Stress Disorder
  - Posttraumatic Stress Disorder

**Recommended Reading:**

Posttraumatic stress in **children** and **adolescents** exposed to family violence: I. Overview and issues. Margolin

[http://web.ebscohost.com.libproxy.sdsu.edu/ehost/detail?vid=33&hid=119&sid=f4eb3fc0-7ce2-4cb0-9bba-1b3394751b47%40sessionmgr110&bdata=JnNpdGU9ZWhvc3QtbGl2ZQ%3d%3d&db=bdh&AN=pro-38-6-613](http://web.ebscohost.com.libproxy.sdsu.edu/ehost/detail?vid=33&hid=119&sid=f4eb3fc0-7ce2-4cb0-9bba-1b3394751b47%40sessionmgr110&bdata=JnNpdGU9ZWhvc3QtbGl2ZQ%3d%3d&db=bdh&AN=pro-38-6-613)

**Violence Puts Wear and Tear on Kids’ DNA**

Published by **Kendall Morgan**

- Pediatric Bipolar Disorder
- Anxiety in Children and Adolescents

- Mental Health Disorders
  - Major Depressive Disorder
  - Dysthymic Disorder
  - Bipolar Disorder
  - Separation Anxiety
  - Phobias
  - Obsessive Compulsive Disorder

Remission after Acute Treatment of Anxiety Disorders in Adolescence and Children
Ginsberg

http://web.ebscohost.com.libproxy.sdsu.edu/ehost/pdfviewer/pdfviewer?sid=f4eb3fc0-7ce2-4cb0-9bba-1b3394751b47%40sessionmgr110&vid=34&hid=119

Longitudinal associations between emotion regulation and depression in preadolescent girls: Moderation by the caregiving environment.

http://web.ebscohost.com.libproxy.sdsu.edu/ehost/detail?vid=20&hid=119&sid=f4eb3fc0-7ce2-4cb0-9bba-1b3394751b47%40sessionmgr110&bdata=JnNpdGU9ZWhvc3QtbgIl2ZQ%3d%3d&db=pdf&AN=dev-45-3-798

Parent-child relationships as systems of support or risk for adolescent suicidality.

http://web.ebscohost.com.libproxy.sdsu.edu/ehost/detail?vid=19&hid=119&sid=f4eb3fc0-7ce2-4cb0-9bba-1b3394751b47%40sessionmgr110&bdata=JnNpdGU9ZWhvc3QtbgIl2ZQ%3d%3d&db=pdf&AN=fam-20-1-143

**DSM-IV-TR:**

- Major Depressive Disorder, pp. 369-376
- Dysthymic Disorder, pp. 376-381
- Bipolar Disorder, pp. 382-397
- Separation Anxiety, pp. 121-125
- Phobias, pp. 443-455
- Obsessive Compulsive Disorder, pp. 456-462

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<th>Session 7 10-11-12</th>
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<td>Ch 7: Toddler Development, pp. 185 -</td>
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*Pediatrics Bipolar Disorder*
### Session 8
**10-18-12**
**Preschoolers**
- Development
- Practice

**Required Reading:**
- *Davies text:*
  - Ch 9: Preschool development, pp. 251-303
  - Ch 10: Practice with preschoolers, pp. 304-326

### Session 9
**10-25-12**
**School Age**
- Development
- Practice
- Mental Health Disorders
  - Learning Disorders
  - ADD/ADHD
  - Oppositional Defiant Disorder

**Required Reading:**
- *Davies text:*
  - Ch 11: Middle childhood development, pp. 327-383
  - Ch 12: Practice with school age children, pp. 384-414

**DSM IV –TR:**
- ADD/ADHD, pp. 85-93
- Oppositional Defiant Disorder, pp. 100-102

### Session 10
**11-1-12**
**Exam I**

### Session 11
**11-8-12**
**Adolescence**
- Developmental Issues
- Practice Issues
- Cultural Issues
- Adolescent Developmental Stages

**Required Reading:**
- *Laser and Nicotera Text:*
  - Ch 1: Challenges in Clinical Work with Adolescents, pp. 3-13
  - Ch 3: Resilience in Adolescence, pp. 36-48

### Session 12
**11-15-12**
**Adolescence**
- The Adolescent in Context
  - Internal Assets

**Required Reading:**
- *Laser and Nicotera Text:*
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<td>• Ch 10: Substance Abuse, pp. 163-179</td>
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<td>• Ch 11: Sexual Orientation and Gender Identity Development, pp. 180-199</td>
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<td>• Ch 13: Sexual Behaviors, Sexually Transmitted Diseases, including HIV/AIDS, and Pregnancy, pp. 219-235</td>
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<td>• Gault Decision</td>
<td>• Ch 14: Delinquency, pp. 236-249</td>
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Appendix A

**Brief Developmental Assessment of a Child or Adolescent Client**  
*Lucinda A. Rasmussen, Ph.D., LCSW,*  
*Barbara Ryan, LCSW, ACSW; and Silvia A. Barragán, LCSW*  
*Fall 2012*

This assignment will provide students the opportunity to demonstrate their understanding of risk and protective factors and the concept of resilience by analyzing a case study of a child or adolescent from their former or current field placement. Students are also asked to develop an intervention plan for the child/youth and family. The paper should be no longer than 5 to 7 pages (not including Appendices). Paper must be emailed to the instructor by: **11-15-12 no later than 11:59 p.m. Red ID number should be the only identifying information on the paper.**

Select a client from your current or former field placement. Specific identifying information (of client and family) must be removed from the paper (however, dynamics of the case must be maintained). State and briefly describe the agency in which you saw the client. Describe the following:

A. **Client Demographics and Family Composition**
   
   1. Gender, age, grade in school; race and ethnicity; family composition; family situation (i.e., employment, disability, housing, etc.).
   
   2. Complete a genogram, eco-map, and culturagram on the client (these can be placed in the papers as Appendices and do not count against the page limit).

B. **Clinical Observations**
   
   1. Document your clinical observations from the interview. You may use the guidelines of the Mental Status Exam protocol by Lukas (1993) or other guidelines used in your agency.
   
   2. Describe the attachment of the child, based on your clinical observations of their interactions with parent(s) or caregivers.

C. **Developmental Assessment**
   
   1. Discuss significant events in the child's history, including separations and divorces, changes in residence or out of home placements, other significant problems or changes encountered by the family that might impact the child's development.
   
   2. Assess whether the child's behavior is consistent with the stages and milestones of normal physical, cognitive, social, and emotional development. Discuss any delays in development, or areas in which the child's development is advanced.
   
   3. From the risk factors of the child and family, select one risk factor that has created a challenge for the child and/or family and discuss its impact on the child's development to date and possible long term implications.
D. Presenting Problem

1. Describe the presenting problem, or why the client is coming for services.

2. Describe specific clinical symptoms.

3. Make a DSM-IV diagnoses, including all five axes (can present this in an Appendix)

E. High Risk and Ethical Issues

1. Discuss any high risk, ethical and/or legal issues that you anticipate encountering in working with the child and his or her caretaker.

2. Indicate how you plan to address those issues.

F. Intervention Plan

1. Identify two goals you believe would benefit the child and family (goals are broad based).

2. Identify at least two objectives under each goal (i.e., objectives must be specific and measurable, and relate to the identified risk factor).

3. Describe an intervention that includes initiating at least one protective factor that may ameliorate the identified risk factor. Discuss if there is evidence based support for the intervention you have selected. Discuss any other interventions you considered and ruled out and their evidence base (or lack of evidence).

4. List criteria for evaluating whether the goals and objectives have been met and if the intervention has been effective.

G. APA Format

1. Paper should be 5 to 7 pages, double spaced, 1 inch margins, 12 point Times New Roman font

2. Abstract - must include a statement about the purpose of the paper, the sources you used when completing the assessment, and a brief statement summarizing the findings of your assessment.

3. Include headings that separate the topic areas of the paper. Headings should follow this order:
   (a) Centered heading, in regular font, with each word capitalized; (b) Italicized heading, typed flush against the left margin; (c) Italicized paragraph heading. See APA Manual, Section 3.34.

4. References - must follow APA format. References must be cited in the text according to APA guidelines. Reference List must also follow APA format and should include all references cited in the text, as well as the textbooks for the course. Do not include other references that have not have been cited in the text.
Appendix B

Bibliography


Main, M. Adult Attachment Interview


van der Kolk, B., Developmental trauma disorder: Towards a rational diagnosis for children with complex trauma histories.

van der Kolk, B., & Pynoos, R. (2009). Proposal to include a developmental trauma disorder diagnosis for children and adolescents in DSM-V.