

Winter 2020

Course Number: SOWK 614.02 S04 Classroom SA 124

Course Name: School-Aged Children (6-12 years) and Family Mental Health in Complex Contexts

Day(s) and Time:

Face-to-Face Residency: February 21, 6:00pm-9:00pm; February 22 and 23, 9:00am-4:00pm

Synchronous Zoom Sessions: January 21 and 28; February 4, 11 and 25 5:00pm-7:00pm

Asynchronous Activities: D2L 1.5-2 hours per week.

Instructors: Office Hours/Location: By Appointment Krista West, MSW, RSW,

with Alan McLuckie, MSW, PhD, RCSW,

& Peter Baylis, MSW, PhD, RCSW

E-mail: TBD Phone: TBD

SYLLABUS STATEMENT

Critical examination of policies, theories and models relevant to infant, child and adolescent mental health.

COURSE DESCRIPTION

In this course we will engage in an in-depth exploration of theories, policies, research and practice models most relevant to working with the school-aged children and families at-risk for and affected by neurodevelopmental and mental disorders. Theories, such as attachment, development, neurobiology and social justice will be critically re-examined as they relate to this population including the importance of environmental influences, such as school settings for socio-emotional development. Through experiential learning that mirrors real-world clinical practice, students will learn to synthesize theories and research to inform their diagnostic and intervention frameworks for working with this diverse population. Special attention will be paid to understanding, identify and intervening with those presenting concerns and/or diagnoses typically emerging during this developmental period. Best-practice models will be explored. This course culminates with an intensive training related to the effective practice of school-based mental health.

COURSE LEARNING OUTCOMES

Upon completion of this course:

- Students will demonstrate a working knowledge of theories and frameworks that inform social work practice with school-age children (6-12 years) and families, including attachment, developmental psychopathology, neurobiological-informed practice, resilience, as well as frameworks of mental health including biopsychosocial and social determinants.
- 2. Students will demonstrate an understanding of risk and protective factors that influence school-aged children's mental health and their cognitive, social and emotional development and how they influence and are influenced by interpersonal relationships, familial and contextual/environmental factors.

- 3. Students will demonstrate a working knowledge of assessment procedures including the disorders and diagnostic procedures of childhood within mental health classification systems (i.e., DSM-5), as well as a working knowledge of the use of screening tools/standardized assessment measures pertaining to school-aged children and their families.
- 4. Students will demonstrate a working knowledge to develop, implement and evaluate a range of psychosocial interventions for mental health relevant to school-age children and their families from diverse and marginalized communities.
- 5. Students will demonstrate a working knowledge to move through the various phases of evidence-based psychosocial intervention from engagement, assessment, formulation/case conceptualization, treatment planning, implementation and evaluation relevant to schoolage children and their families.
- 6. Students will learn about and demonstrate a critical understanding of those factors associated with practicing ethically as a social worker with school-aged children and families from diverse and complex contexts.

LEARNING RESOURCES

REQUIRED TEXTBOOKS

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: APA. (Available at the bookstore for purchase)

Weisz, J. R., & Kazdin, A. E. (Eds.) (2017). Evidence-based psychotherapies for children and adolescent (3rd ed.). New York, NY: The Guilford Press. (Available online via the U of C, Taylor Family Digital Library) https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4844824

LEARNING TECHNOLOGIES AND REQUIREMENTS

The course employs learning based technologies including D2L and Zoom.

RELATIONSHIP TO OTHER COURSES

Students will have completed their first professional social work degree or its equivalent. Accordingly, students are expected to have a solid understanding of generalist social work practice and basic social work skills required to translate social work theory into practice. More specifically, the following capabilities are expected:

- 1. The knowledge and understanding of a person-in-environment social work framework that provides a base for applying and evaluating professional practice;
- 2. The ability to delineate your personal values and relate them to professional values; and
- 3. The competency to conduct appropriate assessments and interventions in an ethical, effective manner; and select models of intervention after a critical analysis of multiple models of intervention, understanding their empirical evidence.

Specific prerequisites for this course include the successful completion of SOWK 610 and 612. This course is the third of four courses in the Infant, Child and Adolescent Mental Health certificate. This course provides an in-depth exploration of theories, frameworks, policies and practice-based clinical processes examined in other courses, applying this knowledge and skill to working clinically with school-aged children and their families from diverse communities and contexts.

CLASS SCHEDULE

Online Classes

Week 1 Asynchronous course materials to be completed prior to January 21- Neuroscience: Applications to school-aged populations.

- Applying developmental/neurodevelopmental theory to school-aged populations within complex contexts.
- The stress response systems: adversity and resilience; trauma and developmental trajectories.
- Socializing and the social context: Developing the executive functions and regulation within complex contexts.
- School-age population unique areas for risk and resilience: Person-in-environment beyond the perinatal and family context, including school, peer groups.

Required readings:

- Bruce, J., Gunnar, M. R., Pears, K. C., & Fisher, P. A. (2013). Early adverse care, stress neurobiology, and prevention science: Lessons learned. *Prevention Science* 14(3), 247-256. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s11121-012-0354-6
- Fisher, P. A., Beauchamp, K. G., Roos, L. E., Noll, L. K., Flannery, J., & Delker, B. C. (2016). The neurobiology of intervention and prevention in early adversity. *Annual Review of Clinical Psychology*, *12*, 331-357. https://www-annualreviews-org.ezproxy.lib.ucalgary.ca/doi/10.1146/annurev-clinpsy-032814-112855
- Hostinar, C. E., & Gunnar, M. R. (2013). Future directions in the study of social relationships as regulators of the HPA axis across development. *Journal of Clinical Child and Adolescent Psychology*, 42(4), 564-575. https://www-tandfonline-

com.ezproxy.lib.ucalgary.ca/doi/full/10.1080/15374416.2013.804387

Shonkoff, J. P., & Garner, A. S. (2011). The lifelong effects of early childhood adversity and toxic stress, *Pediatrics*, *129*(1), e232-246. https://pediatrics-aappublications-org.ezproxy.lib.ucalgary.ca/content/129/1/e232

Recommended readings:

- Bronfenbrenner, U., & Ceci, S. J. (1994). Nature-nurture reconceptualized in developmental perspective: A bioecological model. *Psychological Review*, *101*(4), 68-586. https://bit.ly/2Rno1mV
- State of Victoria. (2012). *Child development and trauma specialist practice resource: 7-9 years* (2012). Melbourne, Australia: Author. Retrieved from www.

https://www.cpmanual.vic.gov.au/sites/default/files/Child%20development%20trauma%207-9years%202012%203010%20.pdf

State of Victoria. (2012). *Child development and trauma specialist practice resource: 9-12 years* (2012). Melbourne, Australia: Author. Retrieved from www.

https://www.cpmanual.vic.gov.au/sites/default/files/Child%20development%20trauma%20 9-12years%202012%203011%20.pdf

Course Learning Outcomes: 1, 2, 6

Week 1 Synchronous Zoom Class (January 21, 5:00-7:00pm) – Assessment with a school-aged population in a clinical setting:

- Conducting assessments with school-age children and families at-risk for and/or affected by mental health difficulties and/or developmental/mental disorders.
- Engaging and involving families within the therapeutic process.
- Developmentally and culturally informed engagement and assessment processes and
- Standardized screening tools and measures (PSI, SDQ, FAM).

Required readings:

- Creswell, C., Parkinson, M., Thirlwall, K., & Willetts, L. (2016). Conducting a comprehensive assessment and establishing treatment goal. In C. Creswell, M. Parkinson, K. Thirlwall & L. Willetts (Eds.). *Parent-led CBT for child anxiety* (pp. 13-38). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4715216&ppg=27
- De Los Reyes, A., Augenstein, T. M., & Aldao, A. (2017). Assessment issues in child and adolescent psychotherapy. In J. R. Weisz & A. E. Kazdin (Eds.) *Evidence-based psychotherapies for children and adolescent* (3rd ed.) (pp. 537-554). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4844824&ppg=557
- Manassis, K. (2014). Case formulation for school-age children. In K. Manassis (Ed.) *Case formulation with children and adolescents* (pp. 151-164). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary-ca/lib/ucalgary-ebooks/reader.action?docID=1683361&ppg=165
- Manassis, K. (2014). Communicating the case formulation and its treatment implications. In K. Manassis (Ed.) *Case formulation with children and adolescents* (pp. 184-197). New York, NY: Gilford Publications. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1683361&ppg=198

Recommended readings:

- Henderson, S. W., & Martin, A. (2014). Case formulation and integration of information in child and adolescent mental health. In J. M. Rey (Ed.), *IACAPAP e-textbook of child and adolescent mental health*. Geneva, Switzerland: International Association for Child and Adolescent Psychiatry and Allied Professions. Retrieved from http://iacapap.org/wp-content/uploads/A.10-CASE-FORMULATION-2014.pdf
- Josephson, A. M. (2007). Practice parameter for the assessment of the family. *Journal of the American Academy of Child & Adolescent Psychiatry*, 46(7), 922-937. https://www-sciencedirect-com.ezproxy.lib.ucalgary.ca/science/article/pii/S0890856709621833
- Woolley, M. E. (2013). Assessment of children. In M. J. Holosko, C. N. Dulmus & K. M. Sowers (Eds.), *Social work practice with individuals and families* (pp. 1-39). Hoboken, NJ: John Wiley & Sons. Retrieved from https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1106529&ppg=21

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 2 Asynchronous course materials to be completed prior to January 28st -Clinical social work with school-age children

- School-age population unique areas for risk and resilience: Person-in-environment beyond the perinatal and family context, including school, peer groups
- Working with the context: Involving families/caregivers
- Developmental theory in practice

Required readings:

- Cohen, A. N., Drapalski, A. L., Glynn, S. M., Medoff, D., Fang, L. J., & Dixon, L. B. (2013). Preferences for family involvement in care among consumers with serious mental illness. *Psychiatric Services*, *64*(3), 257-263.
 - https://ps.psychiatryonline.org/doi/full/10.1176/appi.ps.201200176
- Guberman, C., & Manassis, K. (2011). Symptomatology and family functioning in childhood anxiety with comorbid depression. *Journal of the Canadian Academy of Child Adolescent Psychiatry*, 20, 186-195. https://bit.ly/2qUgTDQ
- Gunn, W. B., Haley, J., Prouty, A. M., & Robertson, J. (2014). Systemic approaches: family therapy. In H. T. Prout & A. L. Fedewa (Eds.). *Counseling and psychotherapy with children and adolescents: Theory and practice for school and clinical settings* (pp. 317-356). Hoboken, NJ: John Wiley & Sons, Inc. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1889212&ppg=331

Recommended readings:

- Burbach, F. R., & Stanbridge, R. I. (2007). Developing family-inclusive mainstream mental health services. *Journal of Family Therapy, 29,* 21-43. https://onlinelibrary-wiley-com.ezproxy.lib.ucalgary.ca/doi/full/10.1111/j.1467-6427.2007.00367.x
- Ng, M. Y., & Weisz, J. R. (2017). Personalizing evidence-based psychotherapy for children and adolescents in clinical care. In J. R. Weisz & A. E. Kazdin (Eds.) *Evidence-based psychotherapies for children and adolescent* (3rd ed.) (pp. 49-65). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4844824&ppg=521
- Shapiro, J. P., (2015). *Family systems therapy*. In J. P. Shapiro (Ed.). Child and adolescent therapy. (2nd ed.) (pp. 218-227). Hoboken, NJ: John Wiley & Sons, Inc. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4180265&ppg=234

Course Learning Outcomes: 1, 2, 6

Week 2 Synchronous Zoom Class (January 28, 5:00-7:00pm) – Assessment with a school-aged population in a clinical setting: Formulation and Diagnosis

- Classification tools (DSM-5) applied to school-aged populations
- Understanding the Disorders of childhood
 - DSM-5 Anxiety Disorders (i.e. Social Anxiety Disorder, Separation Anxiety Disorder, Selective Mutism); Trauma-and Stressor-related Disorders (i.e., PTSD, Adjustment Disorders)
- Differential assessment and differential diagnosis

Required readings:

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: APA.

Manassis, K. (2014). Case formulation for school-age children. In K. Manassis (Ed.) *Case formulation with children and adolescents* (pp. 151-164). New York, NY: Gilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1683361&ppg=165

Recommended readings:

- Petrovich, A., & Garcia, B. (2015). Adding diversity and resiliency to the diagnostic process: A formulation. In A. Petrovich & B. Garcia (Eds.) Strengthening the DSM: Incorporating resilience and cultural competence (2nd ed.) (pp. 29-64) New York, NY: Springer Publishing Company. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=2166683&ppg=51
- Petrovich, A., & Garcia, B. (2015). A conceptual framework for the diversity/resilience formulation. In A. Petrovich & B. Garcia (Eds.) *Strengthening the DSM: Incorporating resilience and cultural competence* (2nd ed.) (pp. 1-28) New York, NY: Springer Publishing Company. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=2166683&ppg=23
- Wherry, J. N. (2014). The role of assessment in evidence-based treatment with trauma-exposed children. In B. Allen (Ed.) *Treating traumatized children* (pp. 26-46). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1759295&ppg=46

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 3 Asynchronous course materials to be completed prior to February 4 -Clinical social work in community-based settings: Working <u>with</u> communities and schools/Working <u>within</u> schools/community settings.

- Community and school-based programming
- Continuum models of mental health: Wellness to Illness
- Understanding schools-as "community-hubs" and stakeholder engagement
- Continuum models of intervention: prevention, early intervention and direct treatment

Required readings:

Hugues, B., Elliott, P., & Hansen, Y. (2011). Exploring schools as community hubs: Investigating application of the community hub model in context of the closure of Athabasca School, Regina, Saskatchewan, Canada and other small schools. Regina, Sask.: University of Regina. Retrieved from

https://ourspace.uregina.ca/bitstream/handle/10294/3397/Community%20Hub%20Final% 20Report.pdf?sequence=3

SBMHSA Consortium. (2013). *School mental health in Canada: Report of findings*. Ottawa, ON: Mental Health Commission of Canada. Retrieved from

https://www.mentalhealthcommission.ca/sites/default/files/ChildYouth School Based Mental Health Canada Final Report ENG 0.pdf

Settipani, C. A., Hawke, L., D., Cleverley, K., Chaim, G., Cheung, A., ... Henderson, J. (2019). Key attributes of integrated community-based youth service hubs for mental health: A scoping review. *International Journal of Mental Health Systems*, *13*(52).

https://doi.org/10.1186/s13033-019-0306-7

Short, K. (2016). Intentional, explicit, systematic: Implementation and scale-up of effective practices for supporting student well-being in Ontario schools. *International Journal of Mental Health Promotion*, 18(1), 33-48.

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4784518/

Recommended Readings:

- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405-432. https://srcd-onlinelibrary-wiley-com.ezproxy.lib.ucalgary.ca/doi/full/10.1111/j.1467-8624.2010.01564.x
- Government of South Australia, Department for Education and Child Development (2017). Schools as community hubs: a practical guide for schools and preschools. Adelaide, Australia: Government of Australia. Retrieved from https://www.education.sa.gov.au/sites/g/files/net691/f/schools-as-community-hubs-guide-net6
- Lyon, A. R., & Bruns, E. J. (2019). From evidence to impact: Joining our best school mental health practices with our best implementation strategies. *School Mental Health*, *11(1)*, *106-114*. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s12310-018-09306-w
- Tilly, W., D. (2008). The evolution of school psychology to science-based practice: problem solving and the three-tiered model (pp. 17-36). In A. Thomas & J. Grimes (Eds.) *Best practices in school psychology* (pp. 17-36). Bethesda, MD: National Association of School Psychologists. (available via D2L)

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 3 Synchronous Zoom Class (February 4, 5:00-7:00pm) – Clinical social work in community-based settings: Working <u>with</u> communities and schools/Working <u>within</u> schools/community settings.

- Critical exploration of prevention and early-intervention school-based programming
- Clinical case management: Systems navigation, interdisciplinary collaboration and client/family-centred care

Required readings:

- Alberta Health Services. (2009). *Mental health kit: be kind to yourself and others: an activity kit to help teach students in grade 4 to 6 about mental wellness*. Edmonton, AB: Alberta Health Services. Retrieved from https://www.albertahealthservices.ca/info/page13368.aspx
- Forman, S. G., Olin, S. S., Hoagwood, K. E., Crowe, M., & Saka, N. (2009). Evidence-based interventions in schools: Developers' views of implementation barriers and facilitators. *School Mental Health*, 1(1), 26–36. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s12310-008-9002-5
- Kanter, J. (2016). Colette: A clinical case management perspective. *Clinical Social Work Journal*, 44, 341-344. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s10615-016-0593-2

Recommended readings:

- National Association for Social Workers. (2015). *NASW standards for social work case management*. Washington, DC: Author. Retrieved from
 - $\underline{https://www.socialworkers.org/LinkClick.aspx?fileticket=acrzqmEfhlo%3D\&portalid=0}$
- Nickerson, A. B. (2019). Preventing and intervening with bullying in schools: A framework for evidence-based practice. *School Mental Health*, *11*(1), 15-28. https://link-springercom.ezproxy.lib.ucalgary.ca/article/10.1007/s12310-017-9221-8
- Sanchez, A. L., Cornacchio, D., Poznanski, B., Golik, A. M., Chou T., & Comer, J. S. (2018). The effectiveness of school-based mental health services for elementary-aged children: A meta-analysis. *Journal the American Academy of Child and Adolescent Psychiatry*, *57*(3), 153-165.

https://www-sciencedirect-com.ezproxy.lib.ucalgary.ca/science/article/pii/S0890856717319263

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 4 Synchronous (February, 11 5:00-7:00pm) – Clinical social work in community-based settings: Assessment, formulation, diagnosis and treatment planning <u>within</u> schools/community settings. Part 1

- Identification, assessment, formulation
- Understanding the disorders of childhood in a school-age population and school-context
 - DSM-5 Neurodevelopmental Disorders (i.e. LD, ADHD); Disruptive, Impulse-control and Conduct Disorders (i.e., ODD, CD)
- Risk assessment (i.e., suicide and/or self-harm/injury)
- Standardized screening tools and assessment measures (SNAP, BASC, ACEs)
- Review of Psychoeducational assessments (WISC, WIAT) and Individual Program Plans (IPP):
 What do social workers need to know?

Required readings:

American Psychiatric Association (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: APA.

Manassis, K. (2014). Communicating the case formulation and its treatment implications. In K. Manassis (Ed.) *Case formulation with children and adolescents* (pp. 184-197). New York, NY: Gilford Publications. https://ebookcentral-proquest-

com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1683361&ppg=198

Manassis, K. (2014). Using formulation to inform the treatment plan. In K. Manassis (Ed.) *Case formulation with children and adolescents* (pp. 198-214) New York, NY: Gilford Publications. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1683361&ppg=212

Singer, J. B., Erbacher, T. A., & Rosen, P. (2019). School-based suicide prevention: A framework for evidence-based practice. *School Mental Health*, *11*(1), 54-71

Recommended readings:

Barkley, R. A. (2017). What causes ADHD? Retrieved from http://www.russellbarkley.org/factsheets/WhatCausesADHD2017.pdf

Howe, D. (2010). ADHD and its comorbidity: an example of gene-environment interaction and its implications for child and family social work. *Child & Family Social Work, 15,* 265-275.

Learning Disabilities Association of Ontario [LDAO] (2003). *A parent's guide to special education in Ontario*. Toronto, ON: LDAO. Retrieved from http://www.ldao.ca/wp-content/uploads/A-Parents-Guide-to-Special-Education.pdf

Stein, B. D., Jaycox, L. H., Kataoka, S. H., Wong, M., Tu, W., ... Fink, A. (2003). A mental health intervention for school children exposed to violence: A randomized controlled trial. *Journal of the American Medical Association*, 290, 603–611.

Theule, J., Germain, S. M., Cheung, K., Hurl, K. E., & Markel, C. (2016). Conduct disorder/oppositional defiant disorder and attachment: A meta-analysis. *Journal of Developmental and Life-course Criminology, 2*(2), 232-255.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 4 Asynchronous course materials to be completed before Febuary 22 – Clinical Social Work within community and school settings: Interventions Part I

- Psychosocial interventions with school-based issues and within school-based settings
- Collaborative Problem-solving.

Required readings:

Greene, R., Ablon, J., Goring, J., Raezer-Blakely, L., Markey, J., ... Rabbitt, S. (2004). Effectiveness of collaborative problem solving in affectively dysregulated children with oppositional-defiant disorder: Initial findings. *Journal of Consulting and Clinical Psychology*, 72(6), 1157-1164. https://bit.ly/36liqBQ

Greene, R., Ablon, J., & Martin, A. (2006). Use of collaborative problem solving to reduce seclusion and restraint in child and adolescent inpatient units. *Psychiatric Services Journal*, *57*(5), 610-612. https://ps.psychiatryonline.org/doi/full/10.1176/ps.2006.57.5.610

Pollastri, A., Epstein, L., Heath, G., & Ablon, J. (2013). The collaborative problem-solving approach: Outcomes across settings. *Harvard Review of Psychiatry, 21*, 188-195. https://bit.ly/2PcM46D

Recommended readings:

Kazdin, A. E. (2017). Parent management training and problem-solving skills training for child and adolescent conduct problems. In J. R. Weisz & A. E. Kazdin (Eds.) *Evidence-based psychotherapies for children and adolescent* (3rd ed.) (pp. 142-158). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4844824

Shapiro, J. P., (2015). Disruptive behavior in children. In J. P. Shapiro (Ed.). *Child and adolescent therapy* (2nd ed.) (pp. 326-359). Hoboken, NJ: John Wiley & Sons, Inc. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4180265

Waschbusch, D. A., Breaux, R. P., & Babinski, D. E. (2019). School-based interventions for aggression and defiance in youth: A framework for evidence-based practice. *School Mental Health*, *11*(1), 92-105. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s12310-018-9269-0

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 5 Asynchronous course materials to be completed before Febuary 23 – Evidence-based developmentally informed engagement, assessment and interventions: Play-based psychosocial interventions

- Critical exploration of developmentally informed clinical social work practice
- Engaging younger-school age children and families consistent with their developmental levels: A social justice issue for clinical social workers.
- Critical review and practice applications of developmental theory (i.e., Piaget, Vygotsky)

Required readings:

Dasari, M., & Knell, S. M. (2015). Cognitive-behavioural play therapy for children with anxiety and phobias. In H. G. Kaduson & C. E. Schaefer (Eds.) *Short-term play therapy for children* (3rd ed.) (pp. 25-53) . New York, NY: The Guilford Press. (available via D2L)

Kendall, P. C., Crawford, E. A., Kagan, E. R., Furr, J. M., & Podel, J. L. (2017). Child-focused treatment of anxiety. In J. R. Weisz & A. E. Kazdin (Eds.) *Evidence-based psychotherapies for children and adolescent* (3rd ed.) (pp. 520-536). New York, NY: The Guilford Press.

https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4844824

Rathod, S, Kingon, D., Pinninti, N., Turkington, D., & Phiri, P. (2015). Cultural adaptation of cognitive behavioural therapy: principles and challenges: In S., Rathod, D., Kingon, N., Pinninti, D., Turkington & P., Phiri (Eds.) *Cultural adaptation of CBT for serious mental illness: a guide for training and practice* (pp. 14-45). Chichester, UK: Wiley Blackwell. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=1983528&ppg=30

Recommended readings:

Creswell, C., Parkinson, M., Thirlwall, K., & Willetts, (2016). Psychoeducation and individualing the treatment model. In C. Creswell, M. Parkinson, K. Thirlwall & L. Willetts (Eds.) *Parent-led CBT for child anxiety* (39-64). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4715216&ppg=53

Shapiro, J. P. (2015). Cognitive therapy. In J. P. Shapiro (Ed.). *Child and adolescent therapy* (2nd ed.) (pp. 75-108). Hoboken, NJ: John Wiley & Sons, Inc.

Shapiro, J. P. (2015). Anxiety. In J. P. Shapiro (Ed.). *Child and adolescent therapy* (2nd ed.) (pp. 430-461). Hoboken, NJ: John Wiley & Sons, Inc. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4180265

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Week 6 Synchronous Zoom Session (Febuary 25, 5:00-7:00pm) – Evidence-based interventions for children and families from diverse and complex contexts

- Diverse approaches to understanding diverse client populations
- Navigating and facilitating change within and between clinical and community context
- Examining and addressing unique ethical factors that arise when working with school-age populations and their families
- Examining types of endings and optimizing the therapeutic aspects of termination/transitions in the client-social worker relationship.
- Maintaining therapeutic growth and preventing relapse following the end of the therapeutic process.
- Evaluating therapeutic processes and outcomes.
- Unique ethical issues and partnerships/collaborations within complex contexts

Required readings:

Graham, M. A. (2017). Integral ethics for social workers, *Journal of Social Work Values and Ethics*, *14*(2-Fall), 35-42. http://jswve.org/download/fall-2017 vol. 14 no. 2/35-Integral-Ethics-for-Social-Workers-2017-14-2.pdf

Shapiro, J. P. (2015). Cultural factors in therapy. In J. P. Shapiro (Ed.). *Child and adolescent therapy* (2nd ed.) (pp. 297-324). Hoboken, NJ: John Wiley & Sons, Inc. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/reader.action?docID=4180265&ppg=313

Vidair, H. B., Feyijinmi, G. O., & Feindler, E. L. (2017). Termination in cognitive-behavioral therapy with children, adolescents, and parents. *Psychotherapy*, *54*(1), 15-21. https://ovidsp-ovid $\underline{com.ezproxy.lib.ucalgary.ca/ovidweb.cgi?T=JS\&CSC=Y\&NEWS=N\&PAGE=fulltext\&D=ovft\&AN=01745799-900000000-99914\&PDF=y$

Recommended readings:

Huey, S. J., & Polo A. J. (2017). Evidence-based psychotherapies with ethnic minority children and adolescents. In J. R. Weisz & A. E. Kazdin (Eds.) *Evidence-based psychotherapies for children and adolescent* (3rd ed.) (pp. 361-378). New York, NY: The Guilford Press. https://ebookcentral-proquest-com.ezproxy.lib.ucalgary.ca/lib/ucalgary-ebooks/detail.action?docID=4844824

Lavallee, L. F., & Poole, J. M. (2010). Beyond recovery: Colonization, health and healing for indigenous people in Canada. *International Journal of Mental Health and Addiction*, 8(2), 271-281. https://link-springer-com.ezproxy.lib.ucalgary.ca/article/10.1007/s11469-009-9239-8

Norcross, J. C., Zimmerman, B. E., Greenberg, R. P., & Swift, J. K. (2017). Do all therapists do that when saying goodbye? A study of commonalities in termination behaviors. *Psychotherapy*, *54*(1), 66-75. https://ovidsp-ovid-com.ezproxy.lib.ucalgary.ca/ovidweb.cgi?T=JS&CSC=Y&NEWS=N&PAGE=fulltext&D=ovft&AN=01745799-201703000-00006&PDF=y

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

On-Campus Classes

Class 1 (February 21, 6:00pm-9:00pm) – Clinical social work in community-based settings: Assessment, formulation, diagnosis and treatment planning within schools/community settings.

 Experiential learning & critical examination of the applications to diverse populations in school-based settings: <u>Engagement, Assessment, Formulation and Diagnosis.</u>
 * No additional required readings for this week.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

course Learning Outcomes. 1, 2, 3, 4, 5, 0

Class 2 (February 22, 9:00am-12:00pm) – Clinical social work in community-based settings: Assessment, formulation, diagnosis and treatment planning <u>within</u> schools/community settings.

• Experiential learning & critical examination of the applications to diverse populations in school-based settings: <u>Case-management</u>, <u>Community-based Interventions and Referrals</u> * *No additional required readings for this week*.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Class 3 (February 22, 1:00-4:00pm) – Clinical Social Work within community and school settings: Interventions

- Experiential learning & critical examination of the applications to diverse populations in school-based settings: <u>Collaborative-problem Solving.</u>
 - * No additional required readings for this week.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Class 4 (February 23, 9:00am-12:00pm) – Evidence-based developmentally informed engagement, assessment and interventions: Assessment

• Experiential learning & critical examination of the applications to diverse populations/contexts: <u>Cognitive-behavioural Play Therapy with internationalizing disorders</u> * No additional required readings for this week.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

Class 5 (February 23, 1:00-4:00pm) – Evidence-based developmentally informed engagement, assessment and interventions: Interventions

• Experiential learning & critical examination of the applications to diverse populations/contexts: Cognitive-behavioural Play Therapy with internationalizing disorders * No additional required readings for this week.

Course Learning Outcomes: 1, 2, 3, 4, 5, 6

ADDITIONAL CLASSROOM CONDUCT AND RELATED INFORMATION

USE OF INTERNET AND ELECTRONIC COMMUNICATION DEVICES IN CLASS

The use of laptop and mobile devices is acceptable when used in a manner appropriate to the course and classroom activities. Students are to refrain from accessing websites that may be distracting for other learners (e.g., personal emails, Facebook, YouTube) during class time.

CLASS RECORDINGS

Media recording for assessment of student learning

The instructor may use media recordings as part of the assessment of students. This may include but is not limited to classroom discussions, presentations, clinical practice, or skills testing that occur during the course. These recordings will be used for student assessment purposes only and will not be shared or used for any other purpose.

Zoom recordings of online classes

The instructor may record online Zoom class sessions for the purposes of supporting student learning in this class – such as making the recording available for review of the session or for students who miss a session. Students will be advised before the instructor initiates a recording of a Zoom session. These recordings will be used to support student learning only and will not be shared or used for any other purpose.

<u> </u>						
ASSESSMENT COMPONENTS						
Assessment Method	Assessment Description & Criteria	Due Date	Weight	Aligned Course Learning Outcome		
1. Knowledge- based quiz regarding development/ neuroscience and DSM-5.	This <u>online open book</u> quiz evaluates your knowledge of course content related to Neuroscience and the DSM-5 in relation to neurodevelopmental, cognitive and mental disorders relevant to the school-age period covered within this course.	To be completed by February 14 th by 11:59pm MST.	5%	1, 2, 3, 6		

2.	Knowledge-based quiz regarding development/neuroscience and DSM-5.	This <u>in-class closed book</u> quiz evaluates your knowledge of course content regarding Neuroscience and the DSM-5 in relation to neurodevelopmental, cognitive and mental disorders relevant to the school-age period covered within this course.	To be completed in class February 23 th	10%	1, 2, 3, 6
3.	Demonstration of clinical competencies: Case formulation and diagnosis related to the school-age population.	From a case scenario provided in class related to the school-age population, you will a) write a case formulation that accounts for bio-psycho-social influences including familial and social cultural factors and risk and protective factors, and b) discuss possible diagnoses pertaining to mental/ developmental disorders that may apply to this case, as well as discuss possible differential diagnoses. You may consider speaking to such factors as the engagement process, stages of client change, cultural/socio-cultural factors (i.e., gender, race, socio-economic status), and factors such as risk and resilience. You will write up your formulation and diagnoses as if you were writing a professional report to be placed in the client file in a manner consistent with social work values and professional standards and will accurately reflect the case materials (i.e., virtual case file). You should draw directly from course materials including explicitly referencing theories, frameworks and/or research in your works making direct reference/citation to academic sources (e.g., journals, texts, community-based policy documents) and scholarly texts including required and/or recommended readings to support your work. This submitted paper will be no longer than four (4) double-spaced typed pages excluding references using 11-point font and 1 inch margins. References throughout the paper and on the reference page are required to conform to APA format [American Psychological Association, 2010 Publication Manual (6 th ed.)].	Due February 7 th by 11:59pm MST.	25%	1, 2, 3, 4, 5, 6

				1	
4.	Demonstration of clinical competencies: Developing a case-management plan and evaluation process related to a clinical vignette pertaining to adolescents mental	From a case scenario provided in class you will present a community-based case management plan, that includes the case formulation, the plan of intervention that is multifaceted and interdisciplinary, and the means of evaluation. Please ensure that this plan is comprehensive, and accounts for your formulation, client goals, and factors such as barriers to service/access to care (i.e., these should be 'real world' plans that factor in the client characteristics, clinical situation and preferences, and account for research evidence consistent with evidence-based practice).	Due March 5 th by 11:59pm MST.	25%	1, 2, 3, 4, 5, 6
	disorders.	You may consider speaking to such factors as the engagement process, stages of client change, cultural/socio-cultural factors (i.e., gender, race, socio-economic status), factors such as risk and resilience, issues of diversity, culture and contextual variables.			
		You will write up your case management plan as if you were writing a professional report to be placed in the client file in a manner consistent with social work values and professional standards and will accurately reflect the case materials (i.e., virtual case file).			
		You should draw directly from course materials including explicitly referencing theories, frameworks and/or research in your works making direct reference/citation to academic sources (e.g., journals, texts, community-based policy documents) and scholarly texts including required and/or recommended readings to support your work.			
		This submitted paper will be no longer than four (4) double-spaced typed pages excluding references using 11-point font and 1-inch margins. References throughout the paper and on the reference page are required to conform to APA format [American Psychological Association, 2010 Publication Manual (6 th ed.)].			

5. Demonstration of clinical competencies Conducting a simulated planased intervention and critically evaluating the work via process recording in relation to an adolescent care	related to the school-aged population, each student is required to produce a shortened video demonstration (between 30-40 minutes) of a simulated counselling session utilizing a play-based intervention. It is recommended that you use a partner from class to role-play the 'client' due to their familiarity with the clinical vignette. This clinical role-play demonstration should NOT be a scripted interaction.	Due March 12 th by 11:59pm MST.	30%	1, 2, 3, 4, 5, 6
vignette.	Youtube (a de-listed page is highly recommended) and the link to this Youtube video should be submitted on a MS Word Document or PDF document via to D2L Dropbox. Please ensure that this document contains a) your name, and b) which aspect(s) of the play-based intervention you are demonstrating. You are encouraged to review the link before submitting to ensure that this video is operational and can be viewed without difficulty.			
	Part B: To accompany the video from Part A, students are required to review their video and create a 'process recording' of their session (a template will be provided). Specifically, students are required to select two (2) sub-sections from their video (each approximately 5 minutes in length) in order to analyze/critique key aspects of their interaction with the simulated client and/or application of aspects of the simulated therapy session. Sub-section #1 will reflect an aspect of the simulated play-based intervention with the simulated client that you are			

	pleased/satisfied with and/or accurately demonstrates the intended technique. Sub-section #2 will reflect an aspect of the simulated play-based intervention that you are displeased/dissatisfied with and/or you believe to be a less than full demonstration of the intended technique Consistent with 'process recording' formats (template provided in class) students will create a verbatim transcript of two selected sub-sections of their video (including non-verbals/para-verbals) being sure to reference the specific time on your video that these interactions start/stop. In a separate column of the process recording students will provide a critical analysis of their selected interactions that details why you were either pleased/satisfied or displeased/dissatisfied with the interaction or application of the intended technique. Regarding your analysis of sub-section #2, where you were dissatisfied, you may also consider discussing alternative ways of interacting with the simulated client and/or alternative applications of your selected model. Although reflective in nature, this analysis should draw upon and, where applicable, make explicit reference to course materials, including readings, class discourse and in-class experiential activities. References throughout the process recording and on the reference page are required to conform to APA format [American Psychological Association, 2010 Publication Manual (6th and 1)			
Participation	Association, 2010 Publication Manual (6th ed.)]. Students should actively participate in all classroom activities (lectures, discussions, and experiential exercises) and in demonstrating your professionalism in a	Evaluations completed at the end	5%	1, 2, 3, 4, 5, 6

manner consistent with social work ethics	of each	
and standards of practice. For example,	class.	
students are expected to demonstrate the		
same standards of behavior in the		
classroom environment and on D2L as they		
would in professional social work venues		
such as meeting with clients, supervisors,		
or in attending agency meetings.		

ADDITIONAL ASSESSMENT AND EVALUATION INFORMATION

ATTENDANCE AND PARTICIPATION EXPECTATIONS

Participation means demonstrating personal and professional engagement in the learning process. If a situation arises that precludes class attendance, the student should apprise the instructor. It is neither the instructor's responsibility to determine why a student was not in class nor is it the instructor's responsibility to advise the student of what was missed by a student's absences or tardiness to class. Your absence deprives the class of your contribution to the collective learning process, including discussions and experiential activities. As the knowledge and skills covered in this course are often sequential in nature, it is important for students who have missed a portion of the course to take all necessary steps to understand this missed material in order to be prepared to learn the subsequent competencies.

GUIDELINES FOR SUBMITTING ASSIGNMENTS

Assignments will only be accepted for submission via the D2L dropbox for this specific course, unless specific alternate guidelines are provided during the course. Please ensure that your full name is on each page of the assignment (i.e., footer).

LATE ASSIGNMENTS

Late assignments will be accepted only in exceptional circumstances and at the discretion or the course instructor. It is the students responsibility to communicate with the instructor to discuss possible extensions, otherwise assignments submitted after the posted deadline may be penalized with a grade reduction (i.e., A+ becomes, A or B+ becomes a B etc.) at the instructors discretion.

EXPECTATIONS FOR WRITING

Unless otherwise stated your written submission should be using 11-point font and 1 inch margins. References throughout the paper and on the reference page are required to conform to APA format [American Psychological Association, 2010 *Publication Manual* (6th ed.)]. Unless stated otherwise, written submissions should be of a professional quality that includes full sentences, correct spelling and grammar, as well as organized in a coherent manner. If you need writing support, please connect with the Student Success Centre, at: https://www.ucalgary.ca/student-services/student-success/writing-support

ACADEMIC MISCONDUCT

It is expected that all work submitted in assignments is the student's own work, written expressly by the student for this course. Students are reminded that academic misconduct, including plagiarism, has serious consequences, as set out in the University Calendar: http://www.ucalgary.ca/pubs/calendar/current/k.html

GRADING

A student's final grade for the course is the sum of the separate assignments. It is not necessary to pass each assignment separately in order to pass the course.

The University of Calgary **Graduate Grading System** and Faculty of Social Work Percentage Conversion will be used.

Grade	Grade	Description	Percentage
	Point		
A+	4.0	Outstanding	98-100
Α	4.0	Excellent – superior performance, showing	95-97
		comprehensive understanding of subject matter	
A-	3.7	Very Good Performance	90-94
B+	3.3	Good Performance	85-89
В	3.0	Satisfactory performance. Note : The grade point value (3.0) associated with this grade is the minimum acceptable average that a graduate student must maintain throughout the programme as computed at the end of each year of their program.	80-84
B-	2.7	Minimum pass for students in Graduate Studies. Note: Students who accumulate two grades of "B-" or lower can be required by the Faculty to withdraw from the programme regardless of the grade point average.	75-79
C+	2.3	All grades below "B-" are indicative of failure at the graduate level and cannot be counted towards Faculty of Graduate Studies course requirements.	70-74
С	2.00		65-69
C-	1.70		60-64
D+	1.30		55-59
D	1.00		50-54
F	0.00		Below 50

COURSE EVALUATION

Student feedback will be sought at the end of the course through the standard University and Faculty of Social Work course evaluation forms.

Students are welcome to discuss the process and content of the course at any time with the instructor.

Students are given the option to provide the instructor with weekly feedback via the participation form.

UNIVERSITY OF CALGARY POLICIES AND SUPPORTS

PROFESSIONAL CONDUCT

As members of the University community, students and staff are expected to demonstrate conduct that is consistent with the University of Calgary Calendar http://www.ucalgary.ca/pubs/calendar/current/k-2.html

Students and staff are also expected to demonstrate professional behaviour in class that promotes and maintains a positive and productive learning environment. Consistent with the aims of the Social Work Program and the University of Calgary, all students and staff are expected to respect, appreciate, and encourage expression of diverse world views and perspectives; to offer their fellow community members unconditional respect and constructive feedback; and to contribute to building learning communities that promote individual and collective professional and personal growth. While critical thought and debate is valued in response to concepts and opinions shared in class, feedback must always be focused on the ideas or opinions shared and not on the person who has stated them.

Students and staff are expected to model behaviour in class that is consistent with our professional values and ethics, as outlined in the Canadian Association for Social Workers, Code of Ethics (2005) and the Alberta College of Social Work Standards of Practice (2019). Both can be found online at: https://acsw.ab.ca/site/practice-resources?nav=sidebar

ACADEMIC ACCOMMODATION

It is the student's responsibility to request academic accommodations according to the University policies and procedures. Students seeking an accommodation based on disability or medical concerns should contact Student Accessibility Services (SAS). SAS will process the request and issue letters of accommodation to instructors. For additional information on support services and accommodations for students with disabilities, visit www.ucalgary.ca/access/. Students who require an accommodation in relation to their coursework based on a protected ground other than disability should communicate this need in writing to their Instructor. The full policy on Student Accommodations is available at http://www.ucalgary.ca/policies/files/policies/student-accommodation-policy.pdf.

RESEARCH ETHICS

"If a student is interested in undertaking an assignment that will involve collecting information from members of the public, they should speak with the course instructor and consult the CFREB Ethics Website (http://www.ucalgary.ca/research/researchers/ethics-compliance/cfreb) before beginning the assignment.

ACADEMIC MISCONDUCT

For information on academic misconduct and its consequences, please see the University of Calgary Calendar at http://www.ucalgary.ca/pubs/calendar/current/k.html

INSTRUCTOR INTELLECTUAL PROPERTY

Course materials created by professor(s) (including presentations and posted notes, labs, case studies, assignments and exams) remain the intellectual property of the professor(s). These materials may NOT be reproduced, redistributed or copied without the explicit consent of the professor. The posting of course materials to third party websites such as note-sharing sites without permission is

prohibited. Sharing of extracts of these course materials with other students enrolled in the course at the same time may be allowed under fair dealing.

COPYRIGHT LEGISLATION

All students are required to read the University of Calgary policy on Acceptable Use of Material Protected by Copyright (www.ucalgary.ca/policies/files/policies/acceptable-use-of-material-protected-by-copyright.pdf) and requirements of the copyright act (https://laws-lois.justice.gc.ca/eng/acts/C-42/index.html) to ensure they are aware of the consequences of unauthorised sharing of course materials (including instructor notes, electronic versions of textbooks etc.). Students who use material protected by copyright in violation of this policy may be disciplined under the Non-Academic Misconduct Policy.

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

Student information will be collected in accordance with typical (or usual) classroom practice. Students' assignments will be accessible only by the authorized course faculty. Private information related to the individual student is treated with the utmost regard by the faculty at the University of Calgary.

SEXUAL VIOLENCE POLICY

The University recognizes that all members of the University Community should be able to learn, work, teach and live in an environment where they are free from harassment, discrimination, and violence. The University of Calgary's sexual violence policy guides us in how we respond to incidents of sexual violence, including supports available to those who have experienced or witnessed sexual violence, or those who are alleged to have committed sexual violence. It provides clear response procedures and timelines, defines complex concepts, and addresses incidents that occur off-campus in certain circumstances. Please see the policy available at https://www.ucalgary.ca/policies/files/policies/sexual-violence-policy.pdf

OTHER IMPORTANT INFORMATION

Please visit the Registrar's website at: https://www.ucalgary.ca/registrar/registration/course-outlines for additional important information on the following:

- Wellness and Mental Health Resources
- Student Success
- Student Ombuds Office
- Student Union (SU) Information
- Graduate Students' Association (GSA) Information
- Emergency Evacuation/Assembly Points
- Safewalk