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School of Social Work
University of Wisconsin-Madison
1350 University Avenue
Madison, WI 53706

SW 742 Assessing and Treating Children and Adolescents (Section 010)
Spring 2019

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Instructor: Rachel Dunn, MSW, LCSW, Lecturer **Instructor Office Hours:** By Appointment
Instructor Email: rdunn5@wisc.edu **Instructor Phone:** 920-210-0930 (cell)
Location: MSC 3150 **Class Meeting Time:** Saturdays 9:00-1:00
Credits: 2 **Instructional Mode:** Face-to-Face

Canvas Course URL:

I. Catalogue Description
This is an advanced practice course on social work treatment methods with children and adolescents from a cognitive behavioral perspective. Assessment, treatment and generalization of change strategies; problem solving; resource development; intervention planning and other practice issues are explored.

Attributes and Designations: Counts toward 50% graduate coursework requirement.

Requisites: Must be a Part-Time MSW Program student at Madison.

How credit hours are met: This course meets for one four-hour class period each week during the 7-week session and carries the expectation that students will work on course learning activities (reading, writing, studying, etc.) for approximately 8 hours each week.

II. Course Overview
This is an elective course for Advanced Generalist Specialization students that is of particular interest for students in the mental health and Children Youth and Families focus area. It is designed to provide graduate students with more in-depth knowledge of theories and techniques for direct practice with children, adolescents and their families. We will begin with a basic orientation to working with children, adolescents, and their caregivers. Course content will address evidence based practice, developmental theory and psychopharmacologic treatment. We will also consider issues in the field of child mental health treatment relating to professional ethics, and address cultural complexities in practice. Finally, we will consider general principles for clinical interviewing, assessment and treatment planning with young children and adolescents.

The topics covered in this course are designed to promote students' ability to recognize and apply clinical skills to help children and adolescents with mental health challenges *regardless* of service setting (school, child welfare, mental health clinic, health setting, etc.). Class sessions will be comprised of lectures, videos, as well as large and small group discussions/exercises to provide an opportunity to apply material to case examples.

III. Learning Outcomes: Competency Descriptions and Dimensions

Social Work Education is framed by a competency-based approach to curriculum design. At the conclusion of their education, social work students are expected to be competent in 9 core areas. Competency is achieved through mastery of course content as measure through course activities, readings and assignments and behaviors learned in field experiences, and which are derived from social work knowledge, values, skills and cognitive and affective processes. The objective of this course is to help students to demonstrate understanding and mastery of the knowledge, values, skills and cognitive and affective processes relevant to the competencise described in Appendix A.

IV. Course Content
Instructional Caveat: The Instructor reserves the right to modify this syllabus, the assignment schedule, and/or any materials related to the completion of this course in the time allowed without jeopardizing any course objectives.

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Week 1: January 26
Introduction and overview
- Introductions
- Review of course content, course requirements and expectations
- Introductory remarks about clinical work with children and adolescents

Contemporary issues in children's mental health treatment
- Systems of care in children's mental health
- Psychopharmacology
- Evidence based practice
- Current trends

In-Class Activities:
- Introductory Role Play
- Pair and Share: Systems of Care
- Small Group Discussion: Fundamentals of Therapy
- Video: The Medicated Child

Required Readings:
Perry, B. & Szalavitz, M. (2017). Preface, Introduction and Chapter 1. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.

Bringewatt, E. H., & Gershoff, E. T. (2010). Falling through the cracks: Gaps and barriers in the mental health system for America's disadvantaged children. *Children and Youth Services Review, 32,* 1291-1299.

Child Mind Institute. 2015 Children's Mental Health Report.
   Retrieved from http://www.speakupforkids.org/report.html
Child Mind Institute. 2016 Children's Mental Health Report
   Retrieved from https://childmind.org/report/2016-childrens-mental-health-report/

Recommended Readings:
Barton, R. (2007). Clinical update: Use of medication in children with psychiatric disorders. In *Community Practitioner*, 80(11), 42-44.

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Week 2: February 2
Important concepts in child mental health:

- **Attachment**
  - Attachment patterns
  - Theoretical frameworks
  - Role of attachment in development
- **Emotion regulation**
  - Acquisition of ER skills
  - Parenting skills to support ER

In-Class Activities:
- Small Group Discussion: Developmental and Attachment Theory Frameworks
- Pair and Share: Attachment Patterns
- Large Group Discussion: Cultural Considerations on Assessing Attachment Patterns
- Video: This Emotional Life
- Hands On Activity: Practicing Emotional Regulation Interventions

Required Readings:
Perry, B. & Szalavitz, M. (2017). Chapters 4, 5, 10. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.
Davies, D. (2011). Attachment and Brain development. *Child Development: a practitioner's guide, 3rd edition* (pp 7-59). New York, NY: Guilford Press.
Delany, K. (2006). Following the affect: Learning to observe emotional regulation. *Journal of Child and Adolescent Psychiatric Nursing*, 19(4), 175-181.
Perry, B. (2005). Maltreatment and the developing child: How early childhood experience shapes child and culture. From *The Margaret Mccain lecture series*. www.lfcc.on.ca.
Perry, B. (2001). Bonding and attachment in maltreated children: Consequences of emotional neglect in childhood. www.ChildTraumaAcademy.org.

Recommended Readings:
Zeman, J., Cassano, M., Perry-Parish, C., & Stegall, S. (2006). Emotion regulation in children and adolescents. In *Developmental and Behavioral Pediatrics*, 27(2), 155-168.
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Week 3: February 9
Important concepts in child mental health:
- Brain Development
- ACE Study
- Impacts of trauma
- Risk and protective factors
- Developmentally appropriate practice

Work with ethnically and culturally diverse children and families
- Special issues of foster care and adoption
- Gender differences
- Sexual orientation and expression

In-Class Activities:
- Video: Exposure to Violence on the Developing Brain
- Case Application: Identifying Risk Factors "Leon"

- Video: Trauma and the Brain
- Pair and Share: Defining Elements of Resiliency

<mark>**Assignment Due: Reflection Journal #1**</mark>

Required Readings:

Perry, B. & Szalavitz, M. (2017). Chapters 2, 8. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.

Asakura, K. (2016). It takes a village: Applying a Social Ecological Framework of Resilience in Working with LGBTQ Youth. *Families in Society*, 97(1), 15-22.

Calejas, L., Hernandez, M., Nesman, T. & Mowery, D. (2010). Creating a front porch in systems of care: Improving access to behavioral health for diverse children and families. *Evaluation & program Planning*, 33, 32-55.

Ecklund, K. (2012). Intersectionality of identity in children: A case study. *Professional psychology: Research and practice*, 43(3), 256-264.

Ko, S., Ford, J., Kassam-Adams, N. et al. (2008). Creating trauma informed systems: Child welfare, education, first-responders, health care, juvenile justice. *Professional psychology: Research and practice*, 39(4), 396-404.

Perry, B. (2006). Applying principles of Neurodevelopment to clinical work with maltreated and traumatized children. In N. Boyd-Webb, *Working with traumatized youth in child welfare* (pp. 27 52). New York: The Guilford Press.

Recommended Readings:

Adoption Resources of Wisconsin. (2011) Home to stay: Living their dreams, Transracial adoption: Just the beginning, Creating a family culture for your transracial/transcultural family. In *Partners: The newsletter for Wisconsin's adoptive and foster families*. Fall/Winter, 1-12.

Brazelton, B. & Sparrow, J. (2008). A developmental approach to the prevention of common behavioral problems. In *Psychological Issues in Child Health Care*, 6(4), 1156-1163.

Davies, D. (2011). Risk and protective factors: The child, family, and community contexts and Analysis of risk and protective factors: Practice applications. In *Child Development: a practitioner's guide, 3rd edition* (pp. 60-123). New York, NY: Guilford Press

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Week 4: February 16
Assessment, diagnosis & case conceptualization
- Methods of assessment
  - Quantitative assessment
  - Qualitative assessment
- Diagnosis
- Treatment planning
- Cultural and diversity considerations in practice

Ethics in treatment of children and adolescents
- Social work ethics
- Ethical decision making
- Mandatory reporting
- Duty to warn

In-Class Activities:
- Small Group Discussion: Review Agency Assessment Forms
- Large Group Discussion: Identifying How Agencies Incorporate Culture and Diversity into Assessments
- Case Application: Conducting A Mental Status Exam
- Video: Cultivating Cultural Humility
- Case Application: Ethical Decision Making In Practice

==Assignment Due: Attachment Paper==

Required Readings:
Perry, B. & Szalavitz, M. (2017). Chapter 7. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.
Orton, G. (1997). Assessment and treatment plan. *Strategies for counseling with children and their parents* (pp. 135-171). Pacific Grove, CA: Brooks/Cole.
Pope, K. & Vasquez, M. (2007). Steps in ethical decision making. *Ethics in Psychotherapy and Counseling: A Practical* Guide, 3rd edition (pp. 110-116). San Francisco, CA: Jossey-Bass.

Recommended Readings:
Burkemper, E. (2002). Family therapists' ethical decision making processes in two duty-to-warn situations. *Journal of Marital and Family Therapy*, 28(2), 203-211.
Gushwa, M & Chance, T. (2008). Ethical Dilemma for Mental Health Practitioners: Navigating Mandated Child Maltreatment Reporting Decisions. *Families in Society*, 89(1), 78-83.
J. Pledge, D. (2004). Therapeutic relationship: Bias and Ethics. *Counseling adolescents and children: Developing your clinical style* (pp. 199-219). Belmont, CA: Brooks/Cole.

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Week 5: February 23
Individual interventions
- The main tenets of child and adolescent therapy
  - Relational methodology
  - Play therapy techniques and application
  - Cognitive therapy techniques and application
  - Behavioral therapy techniques and application

In-Class Activities:
- Video: Trauma Focused CBT
- Play Therapy Session and Techniques
- Activities in Mindfulness

Required Readings:
Perry, B. & Szalavitz, M. (2017). Chapter 6. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.
Cohen, J., Mannarino, A. & Deblinger, E. (2006). The TF-CBT model: how it works. *Treating Trauma and Traumatic Grief in Children and Adolescents* (pp. 32-45). New York, NY: The Gillford Press.
Gil, E. (2011). Expressive Therapies. In *Helping abused and traumatized children* (pp. 69-97). New York: The Guilford Press.
Miller, D. and McConaughy, S. (2005). Assessing risk for suicide. *In Clinical Interviews for*

children and adolescents: Assessment to Intervention (pp. 184-199). New York: The Guilford Press.

Orton, G. (1997). Play therapy. *Strategies for counseling with children and their parents* (pp. 211-252). Pacific Grove, CA: Brooks/Cole

Schaefer, C. & Drewes, A. *(2011).* The therapeutic powers of play and play therapy. In C. Schaefer (Ed., *The Foundations of Play Therapy* (pp. 15-26). New Jersey: John Wiley & Sons, Inc.

<u>Recommended Readings:</u>
Streeck-Fischer, A. & van der Kolk, B.A. (2000). Down will come baby, cradle and all: Diagnostic and therapeutic implications of chronic trauma on child development. *Australian & New Zealand Journal of Psychiatry*, 34(6), 903-918.

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Week 6: March 2
Family-based interventions
- Family systems
- Parent consultation and involvement
- Attachment methods

Group interventions
- Theories of group intervention
- Evidence based group interventions

In-Class Activities:
- Fishbowl Discussion: Striving for Cultural Curiosity in Family Work
- Hands On Activity: Interactive Interventions
- Video: Group Counseling – A Multicultural Approach

<u>Required Readings:</u>
Perry, B. & Szalavitz, M. (2017). Chapters 3, 9. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.

Kilpatrick, A. (2006). Levels of family need. Kilpatrick, A. & Holland, T. (2006). *Working with families: An integrative model by level of need* (4th Ed.). Boston, MA: Pearson.

Walsh, F. (1997). Family therapy: Systems approach to clinical practice. J. Brandell, Theory and practice in clinical social work (pp. 132-163). NY: The Free Press.

Ofenedu, M., Belcher, H., Chakra, B. & Gross, D. (2017). Understanding barriers to initial treatment engagement among underserved families seeking mental health services. *Journal of Child & Family Studies*, 26, 863-876.

<u>Recommended Readings:</u>
Ehly, S. & Garcia-Vasquez, E. (1998). Groups in the school context. K. Stoiber and T. Kratochwill, *Handbook of group intervention for children and families* (pp. 9-28). Needham Heights, MA: Allyn & Bacon.

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Week 7: March 9
Treatment Presentations

Interventions for Trauma Disorders
- Developmental trauma disorder/multiple stressors

- PTSD in children
- Evidence based treatments

Interventions for Mood Disorders
- Anxiety
- Depression
- Bipolar disorder

Interventions for Impulse and Conduct Disorders
- ADHD
- Oppositional Defiant Disorder
- Conduct Disorder
- Intermittent Explosive Disorder
- Disruptive Behavior Disorders

Interventions for Social Workers
- Compassion Fatigue
- Self-care Approaches

In-Class Activities:
- Final Presentations
- Termination Role-Play
- Class Evaluations

<mark>**Assignment Due: Treatment Presentation Reflection**</mark>

Required Readings:
Perry, B. & Szalavitz, M. (2017). Chapter 11, 12. *The Boy Who Was Raised As A Dog*. New York, NY: Basic Books.
Berzoff, J. & Kita, E. (2010). Compassion fatigue and countertransference: two different concepts. In *Clinical Social Work Journal,* (38), 341-349.
Corcoran, J. (2003). Psychoeducation with Attention Deficit/Hyperactivity Disorder. In *Clinical applications of evidence-based family interventions* (pp. 13-35). Oxford University Press.
Garber, J., Frankel, S. & Herrington, C. (2016). Developmental Demands of Cognitive Behavioral Therapy for Depression in Children and Adolescents: Cognitive, Social, and Emotional Processes. *Annual Review of Clinical Psychology*, 12, 181-216.
McKinney, C. & Morse, M. (2012). Assessment of Disruptive Behavior Disorders: Tools and Recommendations. *Professional Psychology: Research and Practice*, 43(6), 641-649.
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V. Texts and Reading Materials for the course
Required Texts:
Perry, B. & Szalavitz, M. (2017). *The boy who was raised as a dog*. New York, NY: Basic Books.

Text is available online for purchase. Additional readings will be assigned, in advance, for specific class topics and available on Learn@UW. Students will be expected to come prepared for class having thoughtfully read the assigned articles or other materials.

In addition, students are expected to read and understand the NASW Code of Ethics. Also available online at URL: http://www.socialworkers.org/pubs/code/code.asp

VI. Evaluation: Assignments, Grading and Methods
Grading Scale:
Points earned on each assignment and your final grade will be assigned as follows:
A   94-100   Outstanding work, surpasses minimum expectations in most areas
AB   88-93   Surpasses minimum expectations in some areas, but not in others
B   82-87   Meets minimum expectations
BC   76-81   Meets minimum expectations in some areas, but is below minimum expectations in many
                       areas
C   70-75   Below minimum expectations in most areas
D   64-69   Far below minimum expectations in most areas, not acceptable work
F   <64   Far below minimum expectations in all areas, insufficient information for grading,
                       multiple unexcused absences, or academic misconduct.

Students will be Evaluated on the Following Assignments:
Informed Participation	10 pts
Reflection Journal	20 pts
Attachment Paper	30 pts
Treatment Presentation	40 pts
	Total: 100 pts

Assignments Descriptions:
Informed Participation
Value: 10 Points
Effective participation consists of having completed readings and other assignments, the ability to integrate social work concepts with field and other experiences, AND the ability to fully engage in problem solving and other exercises (presenting social work issues or other perspectives for discussion as well as responding to other students who present issues). It also includes arriving to class on time. You are required to be an alert and active participant in this class. This includes attentive non-verbal behavior and offering comments relevant to course dialogue. Participation can be challenging for some students. Please see instructor EARLY in the semester if you need any assistance in this or any other areas. Additional information related to attendance can be found in the course policy section.

Assignment #1: Reflection Journal
Due: Week 3
Value: 20 points
Length: 3-4 pages
Each week, students will be assigned a reading from Dr. Perry's book *The Boy Who Was Raised As A Dog*. Students will turn in reflection papers on these readings. Papers may be a reflection on all of the readings completed to date, or a specific chapter(s). Reflections should include a concise summary of the material being reflected on; display critical analysis of the individuals and families introduced in the text; analysis and application of content (How might you use this information in your practice?); and a personal reflection on the reading (How did you feel about the reading?). These reflections are informal reflections and can be done using first person language. Using outside resources is not required, however, if you choose to do so, APA format is required.

Grading Criteria	Points	Your Score
I. Concise summary	3	_____
II. Critical analysis of the client/family	4	_____
III. Application of content to practice	5	_____
a. Cultural considerations		
b. Ethical considerations		
IV. Personal reflection	6	_____
V. Technical detail	2	_____
a. Grammar, spelling		

Total: _____/**20**

Assignment #2: Attachment Paper
Due: Week 4
Value: 30 points
Length: 6-8 pages

Students will utilize classroom discussion, readings and outside sources to discuss the importance of attachment on childhood development and long term implications of a secure and non-secure attachment. What do clinicians need to know about attachment and why? Identify at least one attachment theory discussed in class or read about that supports the need for this knowledge. How does attachment impact childhood, as well as adulthood? What cultural implications and diversity considerations must a worker be aware of when doing attachment work? This paper should also include a reflection on your own childhood attachment and the implications of this as an adult and future social worker. This should include a completion of your ACE score. Include a reflection on why this may or may not inform your own practice approaches. Include a minimum of 3 sources to support your work and cite references using APA format.

Grading Criteria	Points	Your Score
I. Demonstration of knowledge about attachment	8	_____
a. Clarity and support of main points		
b. Classroom content areas applied		
II. References to literature	6	_____
a. Appropriateness, integration and application		
b. Evidence of critical thinking		
c. Application of theory		
III. Application of attachment to diverse groups	5	_____
a. Cultural considerations		
b. Diversity implications		
IV. Personal reflection and application to practice	8	_____
a. Evidence of critical thinking		
b. ACE score		
V. Technical detail	3	_____
a. Spelling, grammar		
b. References and APA style		

Total: _____/**30**

Assignment #3: Treatment Presentation
Due: Week 7
Value: 40 Points
Length: 45-minute presentation and 1-2 page reflection paper
Over the course of this class, students will be introduced to a number of different theoretical frameworks, mental health disorders impacting children and adolescents, along with treatment interventions to utilize in practice. Small groups will be chosen the first week of class, depending on interest in the disorder area selected (Trauma Disorders; Mood Disorders; Impulse and Conduct Disorders; etc.), to further this knowledge base. Presenters will research their disorder topic, give a brief overview and select a treatment modality to focus on for this assignment. Presentations will last 45 minutes. The presentation may include, but is not limited to: the historical background of the modality; populations best served by this treatment and why; framework for the approach; identifying if specialized training is needed to use this intervention; discussing if this is an evidenced based intervention; etc. This presentation must also take into account any ethical considerations presented by this modality. Presenters should also discuss to what degree and how this modality can address cultural diversity. Be creative and utilize media, handouts, and hands-on demonstrations for your classmates to observe this modality. For example, if a group is going to present on play therapy as a treatment modality, demonstrate a play therapy activity during your presentation. Groups can also ask the class to participate in these demonstrations. For example, if a group is going to focus on a mindfulness technique to utilize with clients, lead the class through an actual example of how this could be done in a clinical setting. A visual aid (Powerpoint; handouts; etc.) is also required and all resources should be cited using APA format. Groups will be evaluated on creativity, application and delivery of information and materials. Please note that some class time will be allot to coordinate and prepare for this presentation.

Students will also write a 1-2 page reflection paper on this experience. Discuss what your role in this presentation was and what it was like to work in a small group setting. Students can also discuss if they plan to utilize the modality that they presented on, and explain why or why not.

Grading Criteria	**Points**	**Your Score**
I. Overview of disorder area	6	_____
II. Discussion of treatment modality	10	_____
a. Background information		
b. Populations served		
c. Training needed		
III. Discussion of modality application	8	_____
a. Cultural considerations		
b. Ethical considerations		
IV. Creative and delivery of presentation	7	_____
a. Engagement of class		
b. Time management		
V. Visual aid	4	_____
VI. Reflection paper	5	_____
a. Analysis your role		
b. Incorporation to practice		

Total: _____/**40**

VII. Course Policies

Attendance Policy:
Due to the accelerated nature of courses in the University of Wisconsin-Madison Part-Time MSW Program, students are expected to attend all scheduled classes and to arrive on time.

Promptness
Prompt arrival to all courses is required.
- Instructors may take actions they deem appropriate if a student is consistently tardy
- Instructors may also consider a significantly late arrival or early departure as an absence

Absence
To ensure a quality educational experience, students must attend and participate in classes.
- Attendance will be taken at each class and students' level of participation noted
- Excused & Unexcused Absences:
    ~ Two unexcused absences will result in a student's grade being dropped one full grade
    ~ Three unexcused absences will place the student at risk for failing the course
    ~ On a case by case basis, it is left to the instructor's discretion as to what is defined as an excused absence, as well as to determine appropriate follow up plans
- Additional graded make-up work appropriate for the content missed will be assigned for any unexcused absences and if the student has had more than one excused absence.
- Students are responsible for completing any class requirements for the day missed, and for obtaining from a fellow classmate any assignments, materials, and communications missed due to absence, late arrival, or early departure.
- Students who must be absent due to inclement weather or other emergencies must contact the instructor prior to the start of class to be considered for an *excused* absence.
- Inclement Weather Policy
    ~ If there is inclement weather across the Program area, students will be expected to check their email prior to leaving for class to confirm whether classes are cancelled.
    ~ If classes are canceled, students are responsible for checking their email to find out about any class work that will still be required that week and how it will be covered.
    ~ If classes are not cancelled but an individual student concludes he/she cannot safely travel to reach his/her class site, the student must contact his/her instructor(s) regarding his/her plan to not travel. This absence will be considered excused and makeup work will be assigned.

Writing Policy

Criteria for Assignments
Specific attention should be given to organization, paragraphs, sentence structure, clarity and correct citation using APA format. Before turning in any assignment, consider if the following criteria are met:
1. Validity, relevance, support of main points, ability to consider other perspectives
2. Sources, quotes and paraphrases appropriately identified clear connection to course ideas/readings. Own thinking comes through
3. Organization, clarity, logical flow, completed as required
4. Has an introduction and conclusion, unless otherwise stated
5. Paragraphs should have topic sentences that reflect the content of the paragraph and should have a smooth flow from one paragraph to the next
6. Has **depth**, includes critical evaluation, is integrative-looks at the whole.

7. Appropriate grammar, spelling, format, etc.
8. Completed on time

General Formatting and Requirements for Papers
Failure to adhere to formatting requirements will result in a loss of points.
1. Submit a cover sheet with each paper, that includes Your Name, date turned in, identifies the course (SW 742, R. Dunn), and the title of the assignment (cover page not counted as one of required pages)
2. Papers should be typed in Microsoft Word, double spaced, one-inch margins, and12-point Times New Roman font,
3. Headings should **NOT** be placed in the body of the paper
4. Papers should be placed in the Learn@UW Dropbox prior to class on the due date. It is your responsibility to be sure your paper has been downloaded properly. The instructor will adhere to the policy on late assignments if an assignment is not received in the Dropbox by the time it is due.
5. Adherence to the APA rules for citations is expected. It is your responsibility to understand the rules for book, magazine and on-line source citations. (Recent updates to the APA form can be obtained at http://www.apastyle.org/manual/whats-new.aspx)
6. Students needing assistance with written assignments are expected to use available resources (e.g., the Writing Lab, 6171 Helen C. White Hall).

Late Assignment Policy
Assignments are due on the date specified. Students who believe they have a legitimate reason for turning in a late assignment should contact the instructor prior to the due date. **Unapproved late assignments will be marked down three points for each day they are late.** You are required to contact the instructor if you will be handing in a paper late, this shows professionalism and responsibility. The instructor will **NOT** contact you if an assignment is not received.

Learn@UW
All students in the class are required to access Learn@UW for additional communication and information regarding the course. Please check Learn@UW on Friday evenings for student Power Points/Outlines when available and other resources pertinent to class the next day. This instructor will respond to email communication every 24 hours. Please advise if you have trouble accessing information in this way.

Reading Assignments: You are expected to have read all assigned material prior to the class date under which the readings are listed above. Reading and critically evaluating what you have read is necessary so that you can learn, actively participate in class discussions, and successfully complete written assignments.

Plagiarism
The School, University and I take plagiarism very seriously. At any time when you use the words of another person verbatim or even paraphrase them, you must give that person credit. Students found to have plagiarized, **intentionally or not**, will be disciplined according to University and School policies.

Student Behavior Policy
It is expected that students conduct themselves ethically and professionally in all aspects of this seminar. This includes confidentiality, proper respect for all members of the class and their clients and agencies, and support and contributions to the learning environment.

In order to learn, we must be open to the views of people different from ourselves. Each and every voice in the classroom is important and brings with it a wealth of experiences, values and beliefs. In this time we share together over the semester, please honor the uniqueness of your classmates, and demonstrate appreciation for the opportunity we have to learn from one another. Please respect your fellow students' opinions and viewpoints even if you disagree with them, and refrain from personal attacks or demeaning comments. Finally, remember to keep confidential all issues of a personal or professional nature discussed in class.

Code of Ethics, Student Rights and Responsibilities & Plagiarism**:**
Incoming BSW and MSW students read and signed electronic forms of the NASW Code of Ethics, the School of Social Work Plagiarism Policy and the School's Principles of Professional Conduct. In doing so, they agreed that while in the BSW or MSW Program they would honor the Code of Ethics and Principles of Professional Conduct, as well as adhere to the Plagiarism Policy and that should they not do so, sanctions would be imposed. BSW and MSW students are expected to adhere to these policies in the classroom and in the preparation of course assignments.

Note on Accommodation of Student Disability:
The University of Wisconsin-Madison supports the right of all enrolled students to a full and equal educational opportunity. The Americans with Disabilities Act (ADA), Wisconsin State Statute (36.12), and UW-Madison policy (Faculty Document 1071) require that students with disabilities be reasonably accommodated in instruction and campus life. Reasonable accommodations for students with disabilities is a shared faculty and student responsibility. Students requiring accommodation, as approved by the McBurney Center, are expected to provide the instructor with a copy of their Verified Individualized Services and Accommodation (VISA) by the second week of the semester, or as soon as possible after a disability has been incurred or recognized. For more information, please contact the McBurney Center at mcburney@odos.wisc.edu; Phone at 608-263-2741; Text messaging at 608-225-7956; or by FAX at 608-265-2998, 711 (Via relay); Address is 702 W. Johnson St. #2104, Madison, WI 53706

This faculty will work directly with the student and in coordination with the McBurney Center to identify and provide reasonable instructional accommodations. Disability information, including instructional accommodations as part of a student's educational record, is confidential and protected under FERPA. If you require accommodations to obtain equal access to this class or to any assignments that I may give, please contact me as soon as possible.

Use of Technology in the Classroom
A minimal level of external distraction is essential to a productive learning environment. Mobile devices are not to be used in class and must be either silenced or turned off completely. Laptop and tablet computers may be used only for *unobtrusive* note-taking (and only if there are no complaints from other students). If you choose to use a computer in class for this purpose, you may not have a web browser open at any time.

Note about Consultation & Feedback:
This instructor is available to assist your learning and to discuss any aspect of the course or your work. Feedback and suggestions for improving this course are welcomed. This instructor does maintain practice

in the field so please plan ahead and allow time for the scheduling of consultation, email responses or phone contacts.

Appendix A

Competencies and Description	Course Content relevant to Dimensions that Comprise the Competency*	Location in Syllabus
2.1.1 Demonstrate Ethical and Professional Behavior: Advanced Generalist social workers demonstrate and employ in a focus area an understanding of the value base of the profession and its ethical standards, as well as relevant laws and regulations that may impact practice at the micro, mezzo and macro levels. They understand and utilize frameworks of ethical decision-making and autonomously apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Advanced Generalist social workers demonstrate awareness of their personal values and an ability to distinguish them from professional values. They also possess and employ an understanding as to how their personal experiences and affective reactions influence their professional judgment and behavior. Advanced Generalist social workers understand the role of other professions and use this understanding to engage effectively in inter-professional teams. They have a commitment to life-long learning and continually update their skills to ensure they are relevant and effective. Advanced Generalist social workers also are knowledgeable about the emerging forms of technology and ethically use this technology in social work practice.	Lecture, readings, small and large group discussion related to (K, S, V, C & A): • Understanding ethical issues related to treatment access, relevance and quality in systems of care • Identifying when and how to engage in mandated reporting • Case Application: Ethical Decision Making in Practice • Ethics within Evidence Informed Practice • Treatment Interventions and Ethical Applications Assignment #1: Reflection Journal (K, V, S) Assignment #2: Attachment Paper (K, V, S) Assignment #3: Treatment Presentation (K, S, C & AP)	Week 1 Week 4 Week 4 Week 1 Week 5, 6, 7 Page 8 Page 9 Page 10
2.1.2 Engage Diversity and Difference in Practice: Advanced practice social workers demonstrate in a focus area an advanced understanding of how diversity and difference characterize and shape the human experience and are critical to the formation of identity. They demonstrate comprehension that dimensions of diversity are understood as the intersectionality of multiple factors including but not limited to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political	Lecture, readings, video small and large group discussion, videos, case applications and final presentations related to (K, S, V, C & A): • Considering how dimensions of diversity (race, culture, gender, sexual identity, poverty, etc.) shape the experiences and identity of children and the implications for mental health services.	Week 1

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ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. Advanced practice social workers recognize that, as a consequence of difference, a person's life experiences may include oppression, poverty, marginalization, and alienation, as well as privilege, power, and acclaim, and apply this recognition in their practice. They also demonstrate in practice their understanding of the forms and mechanisms of oppression and discrimination, and a recognition of the extent to which a culture's structures and values, including social, economic, political, and cultural exclusions, may oppress, marginalize, alienate, or create privilege and power.	• Exploring ways to address disparities borne of oppression and discrimination within systems of care for children. Understanding the applicability of developmental and attachment theory frameworks to diverse clients • Understanding skills needed for developmentally appropriate practice with children across the gender and age spectrum • Identifying how agencies incorporate culture and diversity into assessments[TM1] • Video: LGBTQ+ Breaking the Silence[TM2], Understanding barriers to mental health services for children with minority sexual and gender-identities, and how to address these in practice. • Video: Cultivation Cultural Humility • Video: Group Counseling- A Multicultural Approach Assignment #1: Reflection Journal (K, V, S, C & AP) Assignment #2: Attachment Paper (K, V, C & AP) Assignment #4: Treatment Presentation (K, S)	Week 1 Week 2 Week 4 Week 3 Week 4 Week 6 Week 5, 6 Page 8 Page 9 Page 10
2.1.6 Engage with Individuals, Families, Groups, Organizations and Communities:	Lecture, readings, small and large group discussion, case application	

Competencies and Description	Course Content relevant to Dimensions that Comprise the Competency*	Location in Syllabus
Advanced Generalist social workers understand and demonstrate that engagement is an ongoing component of the dynamic and interactive process of social work practice in a focus area with, and on behalf of, diverse individuals, families, groups, organizations, and communities. They value the importance of human relationships. Advanced Generalist social workers understand and apply theories of human behavior and the social environment, and critically evaluate and apply this knowledge in a focus area to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. They understand and demonstrate an array of strategies to engage diverse clients and constituencies to advance practice effectiveness in a focus area. Advanced Generalist social workers demonstrate advanced understanding of how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies in a focus area. They value and employ principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals in a focus area.	videos and exercises related to (K, S, V, C & A): • Exploring how Attachment Patterns Impact Engagement • Identifying developmentally appropriate engagement strategies • Understanding how to partner with diverse children, biological families and foster/adoptive families • Building relationships in the service of interventions • Understanding strategies for facilitating engagement in group therapy Assignment #1: Reflection Journal (K, S) Assignment #2: Attachment Paper (K, V, S, C & AP) Assignment #4: Treatment Presentation (K, S, C & AP)	Week 2 Week 3 Week 3 Week 5 Week 6 Page 8 Page 9 Page 10
2.1.7 Assess Individuals, Families, Groups, Organizations, and Communities: Advanced Generalist social workers independently engage and apply their understanding of theories of human behavior and the social environment in the ongoing assessment of diverse individuals, families, groups, organizations and communities in a focus area. They engage in inter-professional collaboration and utilize methods of assessment appropriate to a focus area to advance practice effectiveness. Advanced Generalist social workers demonstrate an understanding of how their personal experiences and affective reactions may affect their assessment and decision-making	Lecture, readings, small and large group discussion and exercises related to (K, S, V, C & A): • Assessing Attachment Patterns • Assessment Using the ACE • Assessing for Risk Factors with case application: Assessment of "Leon" • Assessing for Resiliency • Diagnostic assessment using the DSM-5[TM3] • Review of Agency Assessment Forms • Assessing Using the Mental Status Exam	Week 2 Week 3 Week 3 Week 3 Week 4 Week 4 Week 4

Competencies and Description	Course Content relevant to Dimensions that Comprise the Competency*	Location in Syllabus
	• Assessment of levels of need in families	Week 6
	Assignment #1: Reflection Journal (K, S, C & AP)	Page 8
	Assignment #2: Attachment Paper (K, S)	Page 9
	Assignment #4: Treatment Presentation (K, S, C & AP)	Page 10
2.1.8 Intervene with Individuals, Families, Groups, Organizations, and Communities: Advanced Generalist social workers recognize and understand intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. They independently identify, analyze and implement evidence-informed interventions to achieve the goals of clients and constituencies in a focus area. Advanced Generalist social workers incorporate their knowledge of theories of human behavior and the social environment when selecting and implementing interventions in a focus area. They also engage in interdisciplinary, inter-professional, and inter-organizational collaboration as appropriate, in evaluating and implementing interventions.	Lecture, readings, small and large group discussion and exercises related to (K, S, V, C & A): • Interventions within Systems of Care • Understanding the potential benefits and challenges associated with psychopharmacological interventions • Identifying strategies for working with diverse children and families • Case Application: Identifying Interventions for "Leon" • Understanding and practicing individual (relational, play-oriented, cognitive –behavioral, and trauma-focused)	Week 1 Week 1 Week 3 Week 3[TM4] Week 5

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Competencies and Description	Course Content relevant to Dimensions that Comprise the Competency*	Location in Syllabus
	psychotherapeutic interventions with children/youth • Understanding and practicing parent-child dyad oriented interventions as well as interventions with family and group systems • Identifying intervention strategies for specific clinical problems presented by child clients Assignment #1: Reflection Journal (K, S) Assignment #2: Attachment Paper (K, S) Assignment #4: Treatment Presentation (K, S, C & AP)	Week 6 Week 7 Page 8 Page 9 Page 10

*K=Knowledge; V=Values; S=Skills; C & AP=Cognitive and Affective Process