COURSE SYLLABUS COVER SHEET

Lewis & Clark College
Graduate School of Education and Counseling

Please attach completed cover sheet to course syllabus.

Course Name	**Treatment Planning and Intervention With Children and Adolescents**
Course Number	**523**
Term	**Spring 2007**
Department	**CPSY**
Faculty Name	**Jennifer Barr DeHaan, PhD**

Catalogue Description *(copy from current catalogue)***:** Mental, emotional, and behavioral disorders of childhood and adolescents. Topics include identification, diagnosis, and planning of multifaceted intervention and treatment strategies; developmental, social, and cultural influences on diagnoses and interventions; multicultural considerations; and effects of substance abuse on individuals, families, schools, and other environments. **Corequisite:** CPSY 522. **Prerequisite:** CPSY 506. **Credit:** 3 semester hours.

Guiding Principles/Standards Addressed in Course:
(please check box to indicate which guiding principles/standards from the Conceptual Framework are addressed in this course)

Guiding Principles/Standards	
Learning Environments Create democratic learning communities in which caring, equity, social justice, and inclusion are practiced and diverse perspectives, supported.	**X**
Content Knowledge Integrate fundamental and emergent components of disciplinary knowledge in ways that extend learners' experience and enhance their own and students' capacity to solve problems.	**X**
Teaching Approaches Engage students and school personnel in meaningful learning experiences responsive to individual differences, interests, developmental levels, and cultural contexts.	**X**
Connection to Community Design educational activities that cultivate connections between learners and their communities and region.	**X**
Educational Resources Incorporate a wide range of teaching and technological resources from the school and community into experiences that support learning.	**X**
Assessment Assess, document, and advocate for the successful learning of all students and school stakeholders.	**X**
Research and Reflection Adopt habits of personal and scholarly reflection that examine professional practice and lead to systemic renewal.	**X**
Leadership and Collaboration Lead and collaborate with others to plan, organize, and implement educational practices and programs that confront the impact of societal and institutional barriers to academic success and personal growth.	**X**
Professional Life Pursue a professional identity that demonstrates respect for diverse peoples, ideas, and cultures.	**X**

Authorization Levels:
This course addresses preparation at specific authorization levels through readings and in-class discussions (indicate with an "R" in the appropriate box) and/or through a practicum experience (indicate with a "P" in the appropriate box).

Early Childhood Age 3-4th Grade	**R**
Elementary 3rd-8th Grades in an Elementary School	R
Middle Level 5th-9th Grades in a Middle or Junior High School	R
High School 7th-12th Grades in Subject/Dept. Assign. in a Mid- or Sr.-High School	R

*R = Readings and In-class Discussions *P = Practicum

Student Performance:
Student performance criteria appear on page(s) 2-3, 7-11 of this syllabus (student performance includes goals, evidence, and levels of performance).

Lewis and Clark College
Graduate School of Education and Counseling
Department of Counseling Psychology

Treatment Planning and Intervention
With Children and Adolescents
CPSY 523, Section 01; Spring 2007

Instructor	Jennifer Barr DeHaan, PhD
Phone	360.423.5727 (home); 360.270.7757 (cell)
E-Mail	jbarr@lclark.edu

Class Location	J.R. Howard Hall, Room 101
Class Time	Thursdays, 5:30 – 8:45 p.m.
Office Hours	By appointment (please call or e-mail to schedule)

Required Text:
Kazdin, A .E., & Weisz, J. R. (Eds.). (2003). *Evidence-based psychotherapies for children and adolescents*. New York: Guilford Press.

An article packet is available from the CPSY office during regular office hours.

Suggested Text:
American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders (4th ed. text revision)*. Washington, DC: Author.

Catalogue Description: Mental, emotional, and behavioral disorders of childhood and adolescents. Topics include identification, diagnosis, and planning of multifaceted intervention and treatment strategies; developmental, social, and cultural influences on diagnoses and interventions; multicultural considerations; and effects of substance abuse on individuals, families, schools, and other environments.

Course Description: Recognizing that child and adolescent problems exist within family, peer, school, community and cultural contexts, this course will acquaint mental health practitioners with psychological interventions appropriate for working with children in schools and other applied settings. Using a general framework of eco-systemic case conceptualization, students will develop skills in the fundamentals of interviewing, diagnosis, case conceptualization and treatment planning. Students will become familiar with empirically supported treatment strategies for the most common psychological disorders of children and adolescents (early childhood through adolescence).

Course Goals and Objectives:
1. Demonstrate the ability to perform a clinical interview with parents and children in a culturally sensitive manner.
2. Generate a knowledge base of current intervention and treatment protocols for common mental, emotional and behavioral disorders of children and adolescents.
3. Conceptualize cases and demonstrate the ability to plan and implement appropriate intervention and treatment strategies for children and adolescents.
4. Identify personal emerging theoretical orientation and learn to apply it to intervention and treatment strategies.
5. Demonstrate the ability to explain and defend intervention and treatment strategies using sound theoretical arguments and knowledge of empirically supported research through verbal and written formats.

Course Requirements:

Readings and Active Class Participation (5 points)**.** Students will be expected to complete selected readings and be prepared to ask questions, discuss material and apply the material during in-class group work.

Psychotherapy in the Popular Media (5 points). Students will be expected to share and critique an example of psychotherapy in the popular media, specifically a movie (or television) clip. In addition to showing a brief movie clip, students will facilitate class discussion and provide a written reflection to the instructor. (See Appendix A for complete description and rubric.)

Clinical Interview Templates (10 points). Students will work in small groups and individually to draft two clinical interview templates, one for parent use and one for child/adolescent use. Clinical interview templates will be submitted to instructor for review prior to the interview. (See Appendix B for complete description and rubric.)

Parent OR Child Clinical Interview (50 total points)**.** Students will be expected to conduct a clinical interview with a parent/guardian OR a child/adolescent. It will be your responsibility to find an individual willing to let you practice on them or their child/adolescent. Students will be provided with an informed consent form explaining that you are a student in training to be signed by the participants and their parent/guardian.

Students must tape the interview (30 minutes maximum time). You will choose a 10-minute segment of the tape to share in class, and work in small groups to provide feedback on the interview. Lastly, students will turn in the signed consent form, notes taking during the interview (i.e., completed clinical interview template), a formal written report and a DVD of their interview. (See Appendix B for complete description and rubric.)

Group Presentations (30 total points)**.** To encourage discussion of a variety of theoretical orientations, students will be expected to complete in-class presentations on interventions and treatment strategies not covered within the assigned class readings. Each group will present three times (order of presentations and assignment of disorders predetermined by instructor), and will disseminate a one-page summary to their peers. (See Appendix C for complete description and rubric.)

Treatment Plans and Accompanying Reflections (50 total points). Students will be required to complete two treatment plans based on case studies provided by the instructor. These treatment plans will serve as take-home midterm and final exams. The goal of the treatment plans is to demonstrate the ability to diagnose a disorder, formulate the case conceptualization and develop an appropriate treatment plan. Students will also include a reflection. Class examples may serve as models that you can adjust for your needs. Be prepared to discuss your conclusions about the best practices for the disorders presented in the case studies in class. (See Appendix D for complete description and rubric.)

Grading Policy:
I value collaborative relationships among students and faculty. I view this course as an opportunity for us to forge a community of scholars in which we examine conjointly emerging issues and current research in psychology.

Grades will be awarded upon the following criteria:

Assignment	Available Points
Readings & Participation	5
Psychotherapy in the Popular Media	5
Clinical Interview Templates	10
Parent OR Child Clinical Interview	50 total points
Group Presentations	30 total points
Treatment Plans & Reflections	50 total points
TOTAL	**150 POINTS**

Note: Grading system does not accept an A+
A = 140-150
A- = 135-139
B+ = 130-134
B = 125-129
B- = 120-124
<120 points = Conference with instructor

Attendance Policy:
Course attendance is expected. If you are unable to attend class for any reason, please notify the instructor as soon as possible.

Accommodations for Disabilities:
It is my strong desire to fully include all students in this course. Please discuss any desired accommodations with me as soon as possible. I require documentation of a learning disability or diagnosed medical condition prior to providing substantive accommodations (those that involve changes to deadlines, activities, or products).

Spring 2007 Course Schedule

Date	Topic(s)	Reading(s)
01/11/2007	Introduction, Review of Syllabus, Ethics, Developmental Issues and Evidence-Based Practices	K & W Chs. 1-4 Readings 1.1-1.2
01/18/2007	Psychotherapy in the Popular Media **Movie Clip and Reflection Due**	N/A
01/25/2007	Interviewing, Assessment and Case Conceptualization	Readings 3.1
02/01/2007	Attention-Deficit/Hyperactivity Disorder **Clinical Interview Templates Due** **Group Presentation: Group #1**	K & W Ch. 11
02/08/2007	Conduct Problems (CD, ODD) **Group Presentation: Group #2**	K & W Chs. 12-15
02/15/2007	"Movie Night": Clinical Interviews **Parent OR Child Clinical Interview Due**	N/A
02/22/2007	Autism Spectrum Disorders **Treatment Plan #1 Disseminated (Midterm)** **Group Presentation: Group #3**	K & W Chs. 18-19
03/01/2007	Anxiety Disorders **Treatment Plan #1 Due (Midterm)** **Group Presentation: Group #1**	K & W Chs. 5-6 Readings 8.1-8.3
03/08/2007	Mood Disorders and Self-Injurious Behaviors **Group Presentation: Group #2**	K & W Chs. 7-10 Readings 9.1-9.2
03/15/2007	Eating Disorders, Obesity, and Pain/Chronic Health Conditions **Group Presentation: Group #3**	K & W Chs. 20-21
03/22/2007	Tourette Syndrome, Childhood-Onset Schizophrenia and Play Therapy **Group Presentation: Group #1**	Readings 11.1-11.3
03/29/2007	NO CLASS: Spring Break ☺	
04/05/2007	Substance Abuse and Narrative Therapy **Group Presentation: Group #2**	K & W Ch. 24
04/12/2007	Sleep Disorders, Elimination Disorders and Effects of War **Group Presentation: Group #3** **Treatment Plan Two Disseminated (Final Exam)**	K & W Ch. 22 Readings 13.1

04/19/2007	Class Reflection and Review of Final Exam **Treatment Plan Two Due (Final Exam)**	K & W Ch. 25

Article Packet

1.1 Schroeder, C.S., & Gordon, B.N. (2002). Development of psychopathology. In Schroeder & Gordon (Eds.), *Assessment and Treatment of Childhood Problems: A Clinician's Guide (2nd Ed.)* (pp. 3-39). New York: Guilford Press.

1.2 Ollendick, T.H., & King, N.J. (2000). Empirically supported treatments for children and adolescents. In Kendall (Ed.), *Child and Adolescent Therapy: Cognitive-Behavioral Procedures (2nd Ed.)* (pp. 386-425). New York: Guilford Press.

3.1 Sattler, J.M. (1992). Assessment of behavior by interview methods. In Sattler (Ed.), *Assessment of Children (3rd Ed.)* (pp. 400-471). San Diego, CA: Jerome M. Sattler, Publisher, Inc.

8.1 March, J.S., Franklin, M., & Foa, E. (2005). Cognitive-behavioral psychotherapy for pediatric obsessive-compulsive disorder. In Hibbs & Jensen (Eds.), *Psychosocial Treatment for Child and Adolescent Disorders: Empirically Based Strategies for Clinical Practice (2nd Ed.)* (pp. 121-142). Washington, DC: American Psychological Association.

8.2 Krysanski, V. L. (2003). A brief review of selective mutism literature. *The Journal of Psychology, 137(1),* 29-40.

8.3 Davidson, J. R. T. (2001). Recognition and treatment of posttraumatic stress disorder. *Journal of the American Medical Association, 286(5),* 584-588.

9.1 Asarnow, J. R., Jaycox, L. H., & Tompson, M. C. (2001). Depression in youth: Psychosocial intervention. *Journal of Clinical Child Psychology, 30(1),* 33-47.

9.2 Zila, L. M., & Kiselcia, M. S. (2001). Understanding and counseling self-mutilation in female adolescents and young adults. *Journal of Counseling and Development, 79(1),* 46-52.

11.1 Asarnow, J. R., & Asarnow, R. F. (2003). Childhood-onset schizophrenia. In Mash & Barkley (Eds.), *Child Psychopathology (2nd Ed.)* (pp. 455-485). New York: Guilford Press.

11.2 Knell, S. M. (1999). Cognitive-behavioral play therapy. In Russ and Ollendick (Eds.), *Handbook of Psychotherapies with Children and Families* (pp. 385-404). New York: Kluwer Academic/Plenum Publishers.

11.3 O'Connor, K.J., & Ammen, S. (1997). Interventions. In O'Connor & Ammen (Eds.), *Play Therapy Treatment Planning and Interventions: The Ecosystemic Model and Workbook (Practical Resources for the Mental Health Professional)* (pp. 120-143). San Diego, CA: Academic Press.

13.1 La Greca, A. M., & Silverman, W. K. (2006). Treating children and adolescents affected by disasters and terrorism. In Kendall (Ed.), *Child and Adolescent Therapy: Cognitive-Behavioral Procedures* (pp. 356-382). New York: Guilford Press.

Appendix A: Psychotherapy in the Popular Media

Goal: Students will be expected to share and critique an example of psychotherapy (with a child and/or adolescent) in the popular media.

Action: Students will choose a 10-minute video/DVD clip of their choice depicting psychotherapy with a child and/or adolescent. Students will show the video/DVD clip, and orally critique the clip based on the following criteria:

- Are you able to identify a theoretical orientation guiding psychotherapy as demonstrated in this clip (i.e., cognitive-behavioral, psychodynamic, etc.)? Why/why not?
- Do you feel the clip accurately represents a "true" psychotherapy treatment session? Why/why not?
- What aspects would you like to incorporate into your own practice? Why? How might you accomplish that goal? Are there aspects you would avoid in your own practice? Again, why and how might you accomplish that goal?
- Any additional thoughts or concerns?

Students will be expected to have their videos/DVDs cued to the correct starting and stopping points prior to class.

Product: Students will be expected to turn in a reflection addressing the above bulleted domains. This reflection should be no more than two pages in length, double-spaced, and stapled in the left-hand corner. Times New Roman font (12 point) is expected. Student name, course number and title of assignment are also expected.

Rubric:

Appropriateness of video/DVD clip	1 point
Oral critique of video/DVD clip	1 point
Written product (reflection)	3 points
	5 points total

Appendix B: Clinical Interview

Goal: Students will gain experience planning for, executing and disseminating a product (written report) from a clinical interview with a parent/guardian OR a child/adolescent.

Action: Students will work in small groups and individually to draft two clinical interview templates, one for parent/guardian use and one for child/adolescent use. Class examples will be shared as models that you can adjust for your needs. Clinical interview templates will be submitted to instructor for review prior to the interview (2/1/2007).

Students will be expected to use the templates to conduct a clinical interview with a parent/guardian OR a child/adolescent. It will be your responsibility to find an individual willing to let you practice on them. Students will be provided with an informed consent form explaining that you are a student in training to be signed by the participants and their parent/guardian. Please refer to the end of this document for Informed Consent to Interview.

Students must tape the interview (30 minutes maximum time). Video cameras may be checked out from the CPSY office during business hours. Video clips may be formatted to DVD at the library/media center for a minimal cost. It is your responsibility to provide a blank video (for taping purposes) and finance the formatting cost. You will choose a 10-minute segment of the interview in DVD format (2/15/2007), and work in small groups to provide feedback on the interview.

Product: Students will turn in the signed consent form, notes taking during the interview (i.e., completed clinical interview template) and DVD of their interview. Students are also expected to turn in a formal written report of their interview (2/15/2007). The report should be no more than three pages in length, double-spaced, and stapled in the left-hand corner. Times New Roman font (12 point) is expected. Student name, course number and title of assignment are also expected. General guidelines for the interview report are as follows:

Interview Report

Recognizing that this is one of your first experiences with report writing, I am providing some general "guidelines" for the report. These guidelines may help to guide your interview as well.

Section One: Introduction/Identifying Information (approximately 1 paragraph)
The first portion of the report should summarize key identifying information, including the child/adolescent's name, age, gender, etc (pseudonyms should be used for this assignment). For example, "Johnny Smith was interviewed by Jennifer Barr DeHaan, School Psychologist, on May 24, 2006. Johnny is an 11-year-old male student at Chinook Elementary School…." You should note if the parent/guardian was present and contributed information. For example, "Johnny was accompanied to the interview by his father, Mr. Smith."

Your interview may be solely with the parent/guardian. If so, you will want to keep Johnny at the forefront of the report, but acknowledge your data source. For example, "Mrs. Smith was interviewed by Jennifer Barr DeHaan, School Psychologist on May 24, 2006 to obtain information regarding her son, Johnny Smith. Johnny is an 11-year-old…"

Section Two: Presenting Problem (if applicable) (approximately 1-2 paragraphs)
Interviews conducted within a clinical or school setting will focus on the chief presenting problem after the identifying information. I recognize that for the purpose of this assignment, your "client" may not have a specific "problem" as they are volunteers. If this is the case, please ignore this section and proceed. If a

problem is solicited, it should be described (in detail) here. You will want to use the *exact* wording as your client to document the problem. Thus, *detailed notes are essential for this portion of the interview!*

Section Three: General Information (length will vary; approximately 1 paragraph for each subsection; aim for conciseness)
This section will be the bulk of the report. You will document information from each of the domains questioned, such as:

- Activities and Interests
- School and Homework
- Friendships and Peer Relations
- Home Situation and Family Relations
- Self-Awareness and Feelings
- Adolescent Issues (if appropriate)

Each domain will likely have enough information to constitute a paragraph. However, if the domain is an area of concern, it may be longer than one paragraph. You may have different domains if interviewing a parent/guardian only (i.e., developmental milestones, etc.). Tailor the domains to align with your interview experience.

Section Four: Observations (approximately 1 paragraph)
This section will include any behavioral observations made during the interview process. You may want to comment on: appearance; affect; mood; orientation; rapport; speech; nonverbal behaviors; etc.

Section Five: Summary and Target(s) for Intervention (approximately 1-2 paragraphs)
This is a time to summarize the above information and include any clinical impressions you have from the data you gathered. Based on one interview, you will not be making DSM-IV diagnoses (as you have only one source of data), but commenting on patterns of reported and observed behaviors and providing examples. An example sentence may include, "Johnny's mother reported symptoms of inattention across home and school. For example, Johnny has difficulty following multi-step directions at home. This is consistent with Johnny's appearance during the interview as he would be staring blankly out of the window when asked a question." These behaviors of concern would then become your target(s) for intervention.

Section Seven: Signature and Title
Self-explanatory.

Section Eight: Reflection
Time to reflect on the interview, including strengths and areas for improvement. For example, how comfortable did you feel explaining confidentiality? How would you revise your interview draft form? What follow-up questions would have been appropriate? Were you able to establish rapport? What would you do the same? Differently?

Rubric:	Clinical interview templates	10 points (5 points each)
	Signed consent form	5 points
	Notes from interview	5 points
	DVD of interview	5 points
	In-class oral critique of interview	5 points
	Written report	30 points
		60 points total

Appendix C: Group Presentations

Goal: Students will gain experience researching and presenting information on a variety of intervention and treatment strategies from various theoretical orientations as well as disseminate research to their peers.

Action: Students will be expected to research and complete three in-class presentations (pre-assigned) on intervention and treatment strategies for children/adolescents not covered within the assigned class readings (i.e., other than cognitive-behavioral for the majority of disorders). The presentations will be approximately 20-25 minutes in length, and should include the following information:

- Developers of the intervention/treatment strategy
- Guiding theoretical orientation
- Characteristics of the intervention/treatment strategy
- Research supporting the use of the intervention/treatment strategy
- Generalizability to non-research (i.e., clinic or school) settings
- Strengths, weaknesses and overall impressions

Students are encouraged be creative when planning their presentations, and may chose to incorporate a reading, group activity, video/DVD clip, etc.

Product: In addition to the in-class presentation, groups will be expected to develop a one-page handout to disseminate to their peers, summarizing the above points. The handout should be e-mailed to the instructor at least 24 hours prior to the presentation for photocopying purposes).

Rubric:

In-class presentation	6 points
Handout	4 points
	10 points total (x three)

Appendix D: Treatment Plans and Reflections

Goal: Students will complete two treatment plans. The goal of the treatment plans is to demonstrate the ability to diagnose a disorder, formulate a case conceptualization, develop an appropriate intervention/treatment strategy and reflect on the process.

Action: Students will be provided case studies by the instructor, and given one week to develop a respective treatment plan and reflection. Class examples may serve as models that you can adjust for your needs. Students should be prepared to discuss their conclusions about the best practices for the disorders presented in the case studies.

Product: Students will turn in two treatment plans that will serve as take-home midterm and final exams. These treatment plan should be no longer than 5 pages in length (including reflection), double-spaced, and stapled in the left-hand corner. Times New Roman font (12 point) is expected. Student name, course number and title of assignment are also expected. Treatment plans may include the following information:

- Reason for Referral
- Relevant History/Background
- Conclusions & Recommendations
- Treatment Goals
    - Mention of theoretical and diagnostic perspectives
    - Research to support the intervention/treatment strategy?
    - Limitations?
- Measuring Treatment Progress
- Recommendations for Parents/Family
- Recommendations for Teachers/School
- Reflection

Rubric:

Treatment plan	20 points
Reflection	5 points
	25 points total (x two)