SW 625  
Interpersonal Practice with Children and Youth 
Spring/Summer 2009 

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Office hours -  
Tuesdays 12:15-2:00  
Others by appointment 

Don’t just do something. Stand there and pay attention!  
~Sally Provence 


NOTE: All three texts reference evidence-based practice 

Optional:  


Course Description: 

This course will examine practice theories and techniques for working directly with children, adolescents, and their caretakers. This course will emphasize evidence-based interventions that address diverse groups of children or adolescents within their social contexts (e.g., peer group, school, family, neighborhood). Special attention will be given to issues of diversity as it relates to building therapeutic relationships and intervening with children, adolescents and their families. The interaction between environmental risk factors, protective factors, promotive and developmental factors as they contribute to coping,
resiliency, and disorder, as well as how these might vary by child or adolescent diversity factors, such as race, ethnicity, disadvantage, gender, sexual orientation, sexual identity and culture will also be covered.

Course Content:

This course will present prevention, treatment, and rehabilitation models appropriate to interpersonal practice with children, youth and their families in a variety of contexts. Content will focus on the early phases of intervention, including barriers to engagement that may result from client-worker differences, involuntary participation on the part of the child, youth, or family, and factors external to the client-worker relationship, such as policy or institutional decisions that may influence or shape the therapeutic relationship. Since the intervention strategies taught in this course rely significantly on the social worker as a critical component of the change process, attention will be paid to the understanding of self as an instrument in the change process. A variety of evidence-based interventions for engaging children, youth, and their families (or other caretaking adults such as foster parents) will be presented. Assessment content will emphasize client and caretaker strengths and resources as well as risks to child or youth well-being that may result from internal or external vulnerabilities caused by trauma, deprivation, discrimination, separation and loss, developmental disability, and physical and mental illness. Particular attention will be paid to cultural, social, and economic factors that influence client functioning or the worker’s ability to accurately assess the child, youth, or family. These assessments include attention to life-threatening problems such as addictions, suicidal ideation, and interpersonal violence.

Content on intervention planning will assist students in selecting interventions which are matched with client problems across diverse populations, cultural backgrounds, socio-political contexts, and available resources. These interventions will be based on a thorough assessment, appropriate to the child’s or adolescent’s situation, and sensitive to and compatible with the child/adolescent’s and family’s expressed needs, goals, circumstances, values, and beliefs. Summary descriptions of developmental stages (i.e. infancy, toddlerhood, preschool age, school age, and adolescence) will be presented in terms of developmental characteristics and milestones, salient developmental challenges, and themes such as self-esteem and the development of peer relationships. Helping parents or other caretaking adults to understand the child’s or youth’s issues or behavior in developmental terms will also be discussed.

A range of evidence-based intervention approaches will be presented such as cognitive behavioral therapy, behavioral therapy, and parent management training. Promising practices for children and adolescents across child serving settings will also be reviewed. The use of play therapy in working with young children and children who have been traumatized will be explored. Since work
with children and youth almost always requires multiple intervention modalities, attention will be given to creating effective intervention plans through the integration of different modalities. Those intervention methods that have been empirically demonstrated to be effective will be given particular emphasis. Methods for monitoring and evaluating interventions will also be discussed and demonstrated in this course.

**Course Objective:**

Upon completion of the course, students will be able to:

1. Understand and address the impact of diversity (including ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), marital status, national origin, race, religion or spirituality, sex, and sexual orientation) of children, adolescents and their families and the social worker on practice process and outcomes.
2. Describe and apply a number of assessment procedures (e.g. direct observation of or interviews with the client, parent or caretaker, and collateral contacts with teachers, caseworkers, or other professionals) that identify internal and external risk protective and promotive factors that may affect children and adolescents.
3. Describe the primary developmental tasks and characteristics of childhood and adolescence as they relate to the selection and implementation of developmentally and culturally appropriate techniques for engaging and treating children and adolescents.
4. Identify the ways in which continuity or disruption in primary care relationships may impact children, adolescents, and the therapeutic relationship.
5. Engage in an assessment process that includes gathering information on the risk, protective and promotive factors at the intrapersonal, family, peer group, school and neighborhood levels in order to formulate and understanding of the child/adolescent’s presenting problems and circumstances.
6. Implement evidence-based prevention and intervention strategies (e.g. cognitive behavioral interventions, parent management training) that are compatible with child/adolescent and family or caretaker goals, needs, circumstances, culture, and values.
7. Develop advanced intervention skills in working with children, adolescents and their families.
8. Monitor and evaluate interventions with regard to: effectiveness, sensitivity to diversity factors; impact of child/adolescent’ and families’ social identities on their experience of power and privilege; and appropriateness of the intervention to specific child/adolescent needs resulting from conditions such as maltreatment, deprivation, disability, and substance abuse.
Course Design:

Class format will include lecture, discussion, case analysis, skills development sessions and viewing of videotapes. Written assignments will integrate theory, evidence-based research, and case analysis, and when possible, the student’s practicum work.

Relationship of the Course to Four Curricular Themes:

- **Multiculturalism and Diversity** will be addressed through discussion of child/adolescent/family-worker differences and power/privilege differentials based on ability, age, class, color, culture, ethnicity, family structure, gender (including gender identity and gender expression), marital status, national origin, race, religion or spirituality, sex, and sexual orientation. Case examples of intervention and readings will reflect this theme.

- **Social Justice and Social Change** will be addressed through discussion of differences between problems responsive to interpersonal practice interventions and those which result from poverty, discrimination, and disenfranchisement, requiring systemic as well as individual interventions. Case advocacy for disadvantaged, deprived, victimized and underserved or inappropriately served children and adolescents and their families will also be emphasized.

- **Promotion, Prevention, Treatment, and Rehabilitation** will be addressed through discussion of risk, protective and promotive factors across the child/adolescent’s multiple contexts. Discussions will also emphasize intervention theories and techniques that support the child’s or adolescents’ developmental potentials.

- **Behavioral and Social Science Research** will be addressed in relationship to the selection, monitoring, and evaluation of assessment and intervention methods with specific emphasis on evidence-based interventions in the areas of developmental psychopathology, attachment, risk, resiliency and coping, trauma, and maltreatment. Students will develop advanced skills necessary to implement evidence-based interventions and critically evaluate intervention theories and approaches used with child and adolescent populations.

Relationship of the Course to Social Work Ethics and Values:

Social work ethics and values in regard to confidentiality, self-determination, and respect for cultural and religious differences are particularly important when working with children and youth. Social workers working with children and adolescents often need to make critical intervention decisions which may have to balance risks to the child’s or adolescent’s safety or emotional well-being with their need for ongoing connection to their families and communities. This course
will cover the complexities of ethical dilemmas as they relate to work with child and adolescent populations and the ways that the professional Code of Ethics may be used to guide and resolve value and ethical issues.

Intensive Focus on Privilege, Oppression, Diversity and Social Justice (PODS):

This course integrates PODS content and skills with a special emphasis on the identification of theories, practice and/or policies that promote social justice, illuminate injustices and are consistent with scientific and professional knowledge. Through the use of a variety of instructional methods, this course will support students developing a vision of social justice, learn to recognize and reduce mechanisms that support oppression and injustice, work toward social justice processes, apply intersectionality and intercultural frameworks and strengthen critical consciousness, self knowledge and self awareness to facilitate PODS learning.

Accommodations:

If you need or desire an accommodation for a disability, please let me know soon. The earlier that you make me aware of your needs the more effectively we will be able to use the resources available to us, such as the services for Students with Disabilities, the Adaptive Technology Computing Site and the like. If you do decide to disclose your disability, I will treat that information as private and confidential. Also, please notify me if religious observances conflict with class attendance or due dates for assignments so we can make appropriate arrangements.

Course Requirements:

- Attend and participate in all sessions (10 points); absences will lower your grade since:
  - Some material considered essential to the objectives of the course will only be presented in class
  - The application of key concepts and student co-learning requires participation in class discussions and exercises
  - Predictability, reliability and consistency are core to any strong relationship...“being there” is incredibly important to clients, so it is important in this class
  - If you are unavoidably absent, please let me know either before the class, or in the case of an emergency, as soon as possible following the class.
  - Participation means – active attention to discussions, being thoughtful about your responses (not dominating discussion but also making sure you contribute at least once or twice during the semester). Texting, writing papers, net surfing, messaging or emailing during class are a distraction to you, to me and to your classmates and is unacceptable. I may or may not say something to you if I notice you are
so engaged – but it will affect your participation grade. You are going into a field that needs you to be well equipped and you have a short amount of time in this program to obtain IP skills and knowledge.

- **Completion of a reading reflection about the weekly reading - 20 points - June 8th - Due on Ctools by June 10th at 11:00 p.m.**

I will send out a “prompt” question that will require you to apply readings from that week’s assignment (and any other prior readings) in order to answer the question. I will be looking for your understanding of and ability to apply principles we have learned through the readings, as well as class discussions. Your grade is based on your ability to apply clinical principles to presented material. **Responses will be limited to 5 pages double-spaced.** These reflections will be due by the Friday of the week they are assigned and are to be submitted through Ctools. This will give time for class discussion of the articles and any questions before the paper is due.

- **Mid-Term Quiz - 20 points - June 29 - Due on Ctools by July 1 at 11:00 p.m. - Open book, on-line. It will be available on line on the evening of Friday, June 26.**

Quiz will be 40 multiple choice, fill in the blank or T/F questions. *It is not designed to trick you* - it is designed to insure you have the opportunity to do some of the reading. It will incorporate reading and lecture from beginning of the course through the June 29 readings. Some questions will be easy and straightforward, others will require that you can apply what you have read to a scenario or will require distillation and application of knowledge.

- **Completion of a Final Clinical paper - 50 points - DUE July 13 on Ctools at 11:00 p.m.**

The aim of this paper is to give you a chance to reflect on your clinical work in a concentrated and organized manner. You have a choice between A or B, depending on your experience. Students newer to a client or in a new field placement will probably want to do Assignment A, which focuses on evaluation and treatment planning. Students who have been in placement longer may prefer to write B, which deals with ongoing treatment.

Although the assignments are quite detailed in their expectations, not all cases will “fit” the assignment. **If you need to alter or reformulate the assignment to match the reality of your placement or the particular work you are doing, please discuss with me before writing the papers.**

****To preserve client confidentiality, please disguise your case material, by using pseudonyms for all family members, omitting or changing specific
geographical information, and avoiding mention of details that identify clients.****

- Length: 8 - 10 pages (must be thorough yet concisely written)

OPTION A: Choose a child or adolescent and parents with whom you have begun to work. This option is for work with a newer client. (Note that forming a working hypothesis regarding a child/youth is applicable in hospital and school settings, even when therapy is not provided, thus, this alternative can be used for by students who do not work with children therapeutically.) Write a detailed summary of an assessment (and, if relevant, the early treatment work) that includes:

- Precipitant for referral, presenting problem and psychosocial/family history. Include also a discussion of protective factors, risk factors and environmental issues.

- Describe one or a few critical incidents that enabled you to come to a clearer understanding of the case.
  - In the assessment and treatment process, "critical incidents" occur which crystallize the practitioner's understanding of a case. A critical incident may take various forms. Examples include: a repeated play sequence, the reporting of an important memory, fantasy or dream, an observed interaction between child and parent(s), impressions of the worker-client relationship such as a particular transference (or counter-transference) response, a style of resistance, information about traumatic or stressful events in the client's or family's history, classroom observations, or results of psychological/educational testing in a client's school file. What makes such an incident "critical" is that it enables the social worker to reach a clearer understanding of the client's experience, circumstances and internal psychological processes. From this understanding, hypotheses can be generated and interventions can be planned.

- Be concrete, specific and detailed in your presentation of the clinical material and describe how you interpreted the meaning of the incidents. (Selecting material from process recordings of interviews is a very appropriate way to present critical incidents.)

- Formulation of a clinical hypothesis (or hypotheses) which takes into account developmental, psychodynamic and family/interactional issues.

- Treatment plan, in terms of treatment format and specific goals of treatment. *Indicate your rationale for choosing the approach you did. The relationship between the clinical hypotheses and treatment plan should be
clearly stated. For example, if a client is suffering from PTSD episodes, your first goal should be connected to that (i.e., not to anger management, though that may be another goal). If relevant, describe components of the treatment plan that involve case management, as an adjunct or alternative to clinical work, such as referral for other services, coordination with other professionals, etc. If multiple systems (such as foster care, juvenile court, medical personnel, school personnel, day care, etc.) are involved with the client, discuss your plans for interacting with these other parties and indicate any need you see to advocate on behalf of your client with these systems and individuals.

- Description of your beginning relationship with the clients--both child and adolescent and parents. Describe some critical incidents that illustrate the initial relationship, and discuss any transference and countertransference issues that appear to be emerging. Describe any racial/ethnic/class/cultural issues that may influence the relationship, if relevant. Assess the family's capacity for treatment by discussing strengths and vulnerabilities of the clients and their circumstances that may promote or impede successful intervention.

- Describe your thoughts/feelings regarding the prognosis for successful intervention and analyze the reasons for your point of view.

- Conclude with a discussion of what issues this child/family has evoked or could evoke in you...what issues might you need to take to supervision. If you don't have a reflective supervisor, what issues might you have wished to talk about in supervision? This is not a place for you to discuss what you wish the parents or system would do (unless your reaction is tied to feelings about this). In other words, this is not a place to critique others, but to reflect on what your emotional/cognitive response is to what you are seeing.

Alternative B: Choose a child or adolescent and parents with whom you have worked during this year. Write a case review that includes:

- Precipitant for referral, presenting problem and brief psychosocial/family history. Include also a brief discussion of risk factors and environmental issues.
- Formulation of a clinical hypothesis (or hypotheses) which takes into account developmental, psychodynamic and family/interactional issues.
- Treatment plan. Indicate your rationale for choosing the approach you did.
- Describe the treatment relationship in terms of attachment and transference issues. Note countertransference and ethnic/cultural issues, if relevant.
- Descriptive account of the treatment process, including critical incidents in treatment, and an assessment of the client's progress in terms of the objectives of the treatment plan. Though the focus of this part should be
on the treatment process with the child or adolescent, also include an account of work with parent(s). This section should be the bulk of the paper.

- Brief account of case management issues (if relevant) and contacts with others involved with the child/adolescent, e.g. school personnel, foster care worker, day care provider, probation officer, etc.
- Plans for continuing treatment, termination or transfer. If ongoing treatment is needed, note future treatment goals
- Conclude with a discussion of what issues this child/family has evoked or could evoke in you...what issues might you need to take to supervision. If you don't have a reflective supervisor, what issues might you have wished to talk about in supervision? This is not a place for you to discuss what you wish the parents or system would do (unless your reaction is tied to feelings about this). In other words, this is not a place to critique others, but to reflect on what your emotional/cognitive response is to what you are seeing.

Alternative Paper Topics: Students who do not have child or adolescent clients can discuss alternative topics with me. This option is open only to those students not doing direct work with children, adolescents and/or their parents. Possible topics include doing an observation of a child and/or interview with a parent or a research paper on intervention approaches to a particular problem of childhood or adolescence. If you intend to use one of these options, see me as soon as possible and I will provide guidelines.

In any alternate assignment, the self-reflection section is still required (see requirement above).

Grading:

My practice is to provide detailed feedback on your papers. As such, it may take me up to three weeks to return them. Papers are graded on:

Quality of clinical thinking
Papers that rate the highest will show strong analytic skills; evidence strong clinical insight; show strong understanding of human behavior; demonstrate a curiosity about what they hear or see; have a level of empathy for others and know when they are struggling to achieve that; and demonstrate an ability to think about what they heard, as well as what they did not hear.

Integration of materials
Papers that rate the highest will show superior skill in linking reading and lecture materials to their written work; pull from multiple sources; typically go above the requirements but not excessively so; go beyond "person on the street" thinking
Level of Self-reflection
Papers that rate the highest will show a strong self-awareness or willingness to
develop that capacity; they show a willingness to take risks with thinking or note
areas where that is difficult; are able to address what is evoked in them response
to the work

Writing skills
Papers that rate the highest will have no typographical or grammatical errors.
They will be well written, comprehensive and coherent. They will be within the
guidelines, neither excessively short nor excessively long. Any citations will be
accurate and there will be effective use of quotations.

Final Grades
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Semester Outline (Basic outline – may change based on needs of class):

Class One – May 11
Introduction to Course
Context of Intervention:
Development, Attachment, Interaction, and Psychodynamics
Brief lecture/video:
Video Clip – The Mission

Reading Assignment
(Ctools) Westen, D. et. al.(2004). The empirical status of empirically
supported psychotherapies: Assumptions, findings, and reporting in controlled
clinical trials. Psychological Bulletin 130(4).
Intro to EBP in Social work practice with children and youth
http://www.lib.umich.edu/socwork/orientation/mswchildrenyouth.html

Class Two – May 18
Assessment and Evaluation
Treatment Planning
“Critical Incidents”
Video: Critical incident with a 5 year old

Reading Assignment
Davies: Chapter 3 and 4 (pp.61 – 130) – Risk and Protective Factors
Oppenheim: Chapter 1 (pp. 3 – 30) – Constructing a Relationship Formulation for Mother and Child: Clinical Application of the Working Model of the Child Interview (NOTE: Read this chapter with attention to what the clinician is attending to, how he frames follow up questions and his commentary – this will begin to help you learn about “critical incidents” even though this case is specific to an infant).

Hirshberg: History-Making, not History-Taking. In New visions for the developmental assessment of infants and young children (pp. 85 – 124)

MAY 25 - NO CLASS - Memorial Day

Class Three – June 1

Context of Intervention
Office
Toys
Therapeutic Stance
Use of Listening and Interpretation

Video: Brief clips of a playroom and toys
Video: Techniques of Play Therapy

Reading Assignment
Oppenheim Chapter 2 (pp. 31-57) – Keeping the Inner World of the Child in Mind
Axline – Room set up (Chap. 3 in Play Therapy)

Taffel, R. (2005). Breaking through to Teens. Intro through Chapter 2 – First Meeting (pp. 1 – 45) NOTE: Book is on reserve in library


Class Four - June 8 (Reflection Paper Due)

Adult and Child Attachment Patterns
The Strange Situation Procedure

Videos: Looking at hallmarks of attachment templates

Reading Assignment
Davies: Intro to Part 1 and Chapter 1– Attachment as a Context for Development (pp. 3-38).

(Ctools) Hesse. The adult attachment interview: historical and current perspectives (pp.396-411, only)

**Working Model of the Child Interview - PDF


**Class Five – June 15**
- Brain Development
- Trauma

*Reading Assignments*

- **Davies**: Chap. 2 – *Brain Development* (pp. 39 – 60)
- **Teicher** – *Scars that Won’t Heal: The Neurobiology of Abuse*

**Class Six – June 22**
- Working with Adolescents
  - Adolescents who in engage in Self-Harming Behavior
  - Allies for LGBTQ teens

*Reading Assignments*


- Hand-out - Psychiatry Today article

Class Seven – June 29
Working with Infants and Parents
Video: Looking at cues of an infant
Video: When the Bough Breaks

Reading Assignments

Lieberman and Van Horn (pp. 43-77)
Davies Intro to Part II – Chapter 6 (pp. 139-192)
ctoolsBlum: Chapter 2 – Untouched by Human Hands (pp. 31- 60)
ctoolsLieberman, et. al– Angels in the Nursery. pp. 504-520
ctoolsWeatherston “She does love me, doesn’t she?” pp. 6 –10

Class Eight - June 29
Working with Toddlers
Clinical Case Presentation

Reading Assignments
Davies Chap. 7 & 8 (pp. 193 – 258)

Oppenheim, Chap. 7 (pp. 172- 202)


Class Nine – July 6
Working with Preschoolers
Clinical Case Presentation
Video: Family Transitions: Young Children Speak their Minds about Divorce.

Reading Assignments

Davies, Chap. 9 and 10, pp. 259-334
Lieberman and Van Horn pp. 78 – 110
Oppenheim, Chapter 8, pp. 203 - 225

Class Ten – July 13
Clinical Paper Due through Ctools
Working with School-Aged children
Video and Case Presentation: Working with a school aged child with FASD and learning disabilities
Video: Understanding the Defiant Child
Reading Assignments


Davies, Chap. 11-12 (pp. 335-418)


Class Eleven– July 20
Separation and Loss
Foster Care and Adoption Issues
Video: Robertson tapes: John

Reading Assignments

Oppenheim Chap. 3 & 4 (pp. 58 – 108)

