COURSE TITLE: Clinical Skills in Working with Racial and Ethnic Minority Youth Who Attempt Suicide

COURSE NUMBER: SW 790
SECTION Sec 011 Wed & Thursday 9 am – 12 pm
DATES: September 18, 19, 25, 26, Oct 3
CREDIT HOURS: 3
LOCATION: School of Social Work Building (Room 1804)

Instructors
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Course Description
This course is designed to provide the student with an introduction to the fundamental knowledge and skills necessary for the understanding of and working in social work practice with underrepresented minority children and adolescents at risk for suicidal thoughts, attempts and completions. This mini course is not just a clinical course but will discuss suicide prevention and intervention from the micro, mezzo and macro levels. This course will review myths and facts of suicide and will provide information on the state of the evidence base for epidemiology, risk factors, prevention, intervention and postvention with the school-aged children and adolescents and special high risk populations such as Native Americans.

Course Content
Most social workers that work with adolescents will encounter suicidal teens—regardless of whether they work in an outpatient clinic, psychiatric hospital, emergency room, or school settings. This is because the prevalence rates for suicidal thoughts and attempts among teens are strikingly high and has increase among ethnic minority adolescents. According to recent U.S. data, 14% of high school students have seriously considered attempting suicide in the past year, 6% have made a suicide attempt, and 2% have made a suicide attempt that required medical treatment. The national strategy calls attention to the role social workers can play as gatekeeper in suicide awareness, prevention, and intervention as well as in the formulation of public policies and legislation that advance the efficacy of public health initiative.

This mini course will provide a clear, systematic strategy for identifying and working with teens at risk for suicide. The emphasis will be on up-to-date practical information, case
analyses, clinical tips, and practical take-home tools. Students are encouraged to bring questions from challenging real or hypothetical cases, and to benefit from the questions and experiences of others. If your professional macro or clinical practice include working with adolescents, this min course is likely to be beneficial to you.

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

1. Participants will understand the epidemiology of suicide across the lifespan.
2. Participants will understand the myths and facts regarding risk factors for underrepresented minority teen suicidal behavior and suicide, and gain practical skills in suicide risk assessment and formulation.
3. Participants will understand the issues for a social worker and intervening with an individual at risk for suicide.
4. Participants will learn how to translate risk formulations into care management plans for suicidal teens, involving families and schools as appropriate.
5. Participants will learn the fundamentals of approaches to prevention of suicidal behavior, ongoing care management with suicidal teens, including the use of safety planning tools.
6. Participants will increase their understanding of postvention and its role in preventing contagion.

Course Design
The course will use an integrative learning approach. Students will select to lead and participate in one local community-based evaluation project based on their social work areas of interest, educational needs, and career plans. Evaluation teams of 3 to 4 students will be established within the first two weeks of class. The community-based evaluation projects will be identified by the students and approved by the instructors.

Multiple pedagogical methods such as mini-lectures, participatory discussions, written assignments, student presentations, and role plays will be used. Client agency guests from the community may be invited to present evaluation needs and discuss evaluation results with the class. Experienced evaluators may also participate in Skype discussions with students to highlight important skills and offer perspective on innovations in program evaluation.

Students will access C-Tools for course-relevant readings, evaluation methodology protocols, examples of evaluation deliverables, and the document management of all community-based evaluation projects.

Each course session will include a 1.5 hour lecture followed by evaluation project team work sessions. Scheduled work group consultation appointments will occur with the instructors during the second half of class.

Relationship of the Course to Four Curricular Themes
- Multiculturalism and Diversity: Students will develop the capacity to identify ways in which dimensions of diversity (ability, age, class, color, culture, ethnicity, family structure, gender [including gender identity and gender expression], national origin, race, religion or spirituality, sex, and sexual orientation) influence evaluation processes
and outcomes. Because a collaborative, participatory process is critical to evaluation of social work interventions, attention to diversity is imperative for proper implementation of evaluation in social work contexts.

- Social Justice and Social Change: Students will develop the capacity to analyze the impact and efficiency of services and policies as they relate to social change and social justice. Participatory, collaborative, change-oriented evaluation processes and appropriate dissemination activities can promote the achievement of social justice and change and therefore are emphasized in the class. Also important are an examination of the role of power in practice and the development of knowledge, skills, and capacities that clients can mobilize to shift imbalances of power and resources.

- Promotion and Prevention: Students will develop the capacity to develop and evaluate prevention and promotion as well as rehabilitation programs that are designed to reduce risk of onset of problems and promote healthy development.

- Social Science: Students will strengthen their capacity to use theoretical and empirical social science literature to develop and understand whether interventions are appropriately designed as well scientifically and culturally sound.

**Relationship of the Course to Social Work Ethics and Values**

This course will emphasize the relationship of the NASW’S Code of Ethics, specifically those sections pertaining to the core values and ethical principles of social work as well as the standards of research and evaluation that under gird ethical behavior in the conduct of scientific evaluations. Additionally, this course will emphasize the relationship between the NASW’S Code of Ethics and other ethical codes governing evaluation research such as the Nuremberg Code, Declaration of Helsinki, 1974 National Research Act (PL93-348) and the 1996 Health Insurance Portability and Accountability Act (HIPAA).

**Educational Policy 2.1.1 - Identity as a professional social worker and conduct oneself accordingly**

2.1.1-2a Practice personal reflection to assure continual professional development in clinical practice with families and children  
2.1.1-2b Practice self-correction to assure continual professional development in clinical practice with families and children.  
2.1.1-3a Adhere to clinical professional practice roles with families and children  
2.1.1-3b Adhere to clinical professional boundaries with families and children

**Educational Policy 2.1.2 - Apply social work ethical principles to guide professional practice.**

2.1.2-1a Recognize personal values in a way that allows professional values to guide clinical practice.  
2.1.2-1b Manage personal values in a way that allows professional values to guide clinical practice  
2.1.2-2a Make ethical decisions in clinical practice by applying standards of the National Association of Social Workers Code of Ethics.

Educational Policy 2.1.3 - Apply critical thinking to inform and communicate professional judgments.
2.1.3-1a Distinguish multiple sources of knowledge, including research-based knowledge relevant to families and children.
2.1.3-1b Distinguish multiple sources of knowledge, including clinical practice wisdom relevant to families and children.
2.1.3-1c Appraise multiple sources of knowledge, including research-based knowledge relevant to families and children.
2.1.3-1d Appraise multiple sources of knowledge, including clinical practice wisdom relevant to families and children.
2.1.3-1e Integrate multiple sources of knowledge, including research-based knowledge relevant to families and children.
2.1.3-1f Integrate multiple sources of knowledge, including clinical practice wisdom relevant to families and children.
2.1.3-2a Analyze clinical models of assessment
2.1.3-2b Analyze clinical models of prevention.
2.1.3-2c Analyze clinical models of intervention.
2.1.3-2d Analyze clinical models of evaluation.

Educational Policy 2.1.4 - Engage diversity and difference in practice.
2.1.4-1a Recognize the extent to which a culture’s structures may be related to oppression that impacts families and children.
2.1.4-1b Recognize the extent to which a culture’s structures may be related to marginalization that impacts families and children.
2.1.4-1c Recognize the extent to which a culture’s structures may be related to alienation that impacts families and children.
2.1.4-1d Recognize the extent to which a culture’s structures may create or enhance privilege that impacts families and children.
2.1.4-1e Recognize the extent to which a culture’s structures may create or enhance power that impacts families and children.
2.1.4-1f Recognize the extent to which a culture’s values may be related to oppression that impacts families and children.
2.1.4-1g Recognize the extent to which a culture’s values may be related to marginalization that impacts families and children.
2.1.4-2a Gain sufficient self-awareness to eliminate the influence of personal biases in working with diverse groups of families and children in clinical practice.
2.1.4-2b Gain sufficient self-awareness to eliminate the influence of personal values in working with diverse groups of families and children in clinical practice.
2.1.4-4 View themselves as learners and engage with families and children as informants.

Educational Policy 2.1.6 - Engage in research-informed practice and practice-informed research.
2.1.6-2 Use research evidence to inform clinical practice.
Educational Policy 2.1.7 - Apply knowledge to human behavior and the social environment.

2.1.7-1a Utilize strength-based empowerment perspectives to guide the process of assessment in clinical practice.
2.1.7-1b Utilize strength-based empowerment perspectives to guide the process of intervention in clinical practice.
2.1.7-2a Critique clinical knowledge to understand person and environment for families and children.
2.1.7-2b Apply clinical knowledge to understand person and environment for families and children.

Educational Policy 2.1.8 - Engage in policy practice to advance social and economic wellbeing and to deliver effective social work services.

2.1.8-1a Analyze policies that advance social well-being for families and children from a global perspective.
2.1.8-2a Collaborate with colleagues for effective policy action for families and children from a global perspective.
2.1.8-2b Collaborate with clients for effective policy action for families and children from a global perspective.

Educational Policy 2.1.10 A-D - Engage, assess, intervene, and evaluate with individuals, families, groups, organizations, and communities.

2.1.10(a) ENGAGEMENT
2.1.10(a)-1a Substantively and affectively prepare for clinical practice with individuals.
2.1.10(a)-1b Substantively and affectively prepare for clinical practice with children.
2.1.10(a)-1c Substantively and affectively prepare for clinical practice with families.
2.1.10(a)-1f Substantively and affectively prepare for clinical practice with communities.
2.1.10(a)-2a Use empathy.
2.1.10(a)-2b Use interpersonal clinical skills.
2.1.10(a)-3a Develop a mutually agreed-upon strengths-based empowerment focus of work in clinical practice.
2.1.10(a)-3b Develop a mutually agreed-upon strengths-based empowerment desired outcomes in clinical practice.

2.1.10(b) ASSESSMENT
2.1.10(b)-1a Collect client data for clinical practice.
2.1.10(b)-1b Organize client data for clinical practice.
2.1.10(b)-1c Interpret client data for clinical practice.
2.1.10(b)-2a Assess client strengths.
2.1.10(b)-2b Assess client limitations.
2.1.10(b)-3 Develop mutually agreed-upon strengths-based empowerment intervention goals and objectives.
2.1.10(b)-4 Select appropriate clinical strengths-based empowerment intervention strategies.

2.1.10(c) INTERVENTION
2.1.10(c)-1 Initiate actions to achieve organizational goals that meet the needs of children and families.
2.1.10(c)-2a Implement strengths-based empowerment prevention that enhances client capacities.
2.1.10(c)-2b Implement strengths-based empowerment intervention that enhances client capacities.
2.1.10(c)-3 Help clients resolve problems from a strengths-based empowerment approach.
2.1.10(c)-4a Negotiate for clients utilizing a collaborative strengths-based empowerment perspective.
2.1.10(c)-4b Mediate for clients utilizing a collaborative strengths-based empowerment perspective.
2.1.10(c)-4c Advocate for clients utilizing a collaborative strengths-based empowerment perspective.
2.1.10(c)-5 Facilitate clinical transitions and endings

2.1.10(d) EVALUATION
2.1.10(d)-1a Social workers critically analyze their clinical interventions.
2.1.10(d)-1b Social workers monitor their clinical interventions.
2.1.10(d)-1c Social workers evaluate their clinical interventions.

RELEVANT POLICIES

1. Religious Holidays
Students who observe a religious holiday on the same day as class will have access to the class materials covered that day. Students are expected to notify the instructor if they plan to miss class. The official UM policy on religious holidays and a list of possible conflicts with classes can be found at: http://www.provost.umich.edu/calendar/religious_holidays.html

2. Learning Needs and Disabilities
Students with specialized learning needs are requested to make an appointment with the instructor to discuss the necessary arrangements. If you have a disability or condition that may interfere with your participation in this course, please schedule a private appointment with the instructor as soon as possible to discuss accommodations for your specific needs. This information will be kept strictly confidential. For more information and resources, please contact the Services for Students with Disabilities office at G664 Haven Hall, (734) 763-3000.

3. Attendance
The School of Social Work attendance policy can be found in the Student Guide. Attendance is not included in the grading rubric for this course with the exception of required site visits. Students are expected to visit the client agency at least twice during the semester. Students are expected to participate in lectures, project group meetings, and project consultation appointments with the instructor.

4. Deadline Expectations
Project assignments will be graded at three points during the semester according to the syllabus. All project assignments must be submitted by the last lecture. Assignments submitted more than two days late will be graded down one full grade (points are calculated
by assignment) when the assignment is submitted late. Exceptions will need prior permission of the instructor.

5. Incompletes
Incompletes are not granted unless it can be demonstrated that it would be unfair to hold the student to the normal expectations of the course. The student must formally request an incomplete with the instructor prior to the final weeks of class. Please review the Student Guide section on Ethical Conduct in the University Environment. This section addresses plagiarism, harassment and discrimination policies.

6. General Expectations and Format for Written Work
   • You must use scholarly literature to support you’re your work. All assumptions and ideas included in students’ presentation of materials should be appropriately supported with in text citations and a reference list. You need to use multiple sources and synthesize them. Do not rely on direct quotations from your sources; instead summarize them in your own words.
   • Students must use a 12-point font. Use APA style for your papers or presentations, including proper headings and citations (Publication Manual of the American Psychological Association. Sixth edition, Washington, D.C: APA (2010).
   • You may find it useful to have someone who is unfamiliar with your subject read your paper before you turn it in. An outside reader can tell you if your writing is clear or not, if you omitted a word or phrase, or if you used the wrong word. Spell checkers and grammar checkers are useful tools, but not as reliable as a human reader. For assistance with writing, contact The Sweetland Writing Center, 1139 Angell Hall, (734) 764-0429; http://www.lsa.umich.edu/swc/contact.html
   • All written documents should be properly formatted with 1 inch margins all around, include a title page, appropriate subheadings and page numbers.

COURSE ASSIGNMENTS

Project Team will consist of 3 to 5 students. Assignment materials will be submitted on C-tools drop box for grading. In addition, a hard copy per group will be submitted at class.

DESCRIPTION OF ASSIGNMENT:

Real World Application Project and Presentation:
As a part of a team, students will create materials and/or educational products for a community prevention or public awareness campaign. You will need to decide and justify what type of prevention you are targeting (i.e. universal, selective, or indicate) and where on the continuum of suicide prevention are you targeting. Using your particular background (clinical, program, agency or policy), you will be part of a team that integrates material from the course and your research outside of class. Pick one of the following projects:
1. Pick a specific population and design a public awareness prevention message that reflects public health messaging guidelines and is relevant to the intended audience (eg. Youth, elderly, agency, juvenile justice, etc)
The project should show evidence that you have carefully read and thought about the reading(s) from class and your outside research. You must follow safe messaging guidelines. Be creative (e.g., comic book, you tube video, education brochure, skit & script, novella, series of letters to the editor). If your project is deemed appropriate it may be incorporated into a prevention effort in the local community. Teams will make a brief presentation on your "products" on Oct 3, 2013. Presentations should be able to explain why this type of prevention initiative is important/necessary (using statistics/data), who is the target audience, its purpose, its intended outcome, how your initiative will be disseminate (how will you reach your audience), and how will you know your initiative is effective. You will need to be able to field questions from the audience.

**SUGGESTED READINGS**


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