Course Description:
This course will present the state-of-the-art knowledge and research on mental disorders of children and youth, as well as factors that promote mental health and prevent mental disorders in children and youth. Biopsychosocial theories of resiliency, coping, etiology, the impact of mental health disorders on children and family members, and the relationship of 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 to mental disorders will be examined. Classification systems of child and youth functioning and disorders will be presented such as the Diagnostic and Statistical Manual of Mental Disorders, DC:0-3 Diagnostic System of the National Center for Infants, Toddlers, and Families, and the Individuals with Disability Education Act. The impact of labeling and stigma will be explored in order to develop critical thinking about how mental disorders of children and youth are conceptualized.

Course Content:
This course will examine psychological, behavioral, and developmental disorders of childhood and adolescence. The particular disorders will be considered in broader psychosocial and ecological contexts which promote mental health or create and maintain symptomatic functioning. These broader contexts will be presented through an overview of theory and research on the following issues: 1) a transactional and developmental perspective on the etiology of mental disorders; 2) parent-infant attachment and family dynamics; 3) risk and protective factors (including individual, familial, and socio-cultural factors) and resiliency; and 4) stress and trauma theory, including the impact of maltreatment and loss. The following conditions will be reviewed in terms of presentation, etiology, prevalence, incidence, and assessment at different developmental stages and gender distributions: 1) relationship disorders; 2) stress-response syndromes, including post-traumatic stress disorder and acute stress reactions;
3) depression, bipolar disorder, and other mood problems; 4) anxiety disorders; 5) developmental disorders; 6) disruptive behavior disorders including ADHD and conduct disorder; 7) communication and learning disorders; 8) eating disorders; 9) substance use disorders; and 10) childhood schizophrenia and other psychotic disorders. Attention will be given to the analysis and assessment of strengths and adaptive functions that may coexist with disorders, as well as to issues in defining mental health and mental disorders in cultural terms. Evidence-based interventions of a psychosocial and pharmacological nature will be reviewed across each of the mental health problems identified above.

**Course Objectives:**
Upon completion of the course, students will be able to:
1. Identify factors influencing the development, natural history, expression, and outcomes of mental health and mental disorders of children and youth at the individual, familial, cultural/ethnic, and social levels. (Practice Behaviors 4.IP, 4.SPE, 4.CO, 4.MHS, 7.IP, 7.SPE, 7.CO, 7.MHS)
2. Describe the transactional processes among the above factors which influence the etiology and maintenance of mental disorders. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
3. Describe and critique classification systems of mental disorders of children and adolescents, particularly the Diagnostic and Statistical Manual of Mental Disorders (DSM) and Individuals with Disability Education Act (IDEA). (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
4. Identify and differentiate a number of disorders of children and adolescents and apply them to the evaluation of clients. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
6. Demonstrate empathic appreciation of the client's experience of disorders from the perspective of the client's inner world. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
7. Demonstrate an understanding of the impact of the child's or adolescent's difficulties on parents and other family members. (Practice Behaviors 2.IP, 2.SPE, 2.CO, 2.MHS)
8. Discuss common value and ethical concerns related to mental health and mental disorders of children and youth. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
9. Demonstrate knowledge of important developmental, structural, and contextual theories, research findings, and core concepts related to normative development of children and youth and the development of mental health problems. (Practice Behaviors 7.IP, 7.SPE, 7.CO, 7.MHS)
10. Assess and diagnose mental health problems in youth using widely applied rubrics such as DSM, DC:03R, and Individuals with Disabilities Educational Act Criteria.
11. Demonstrate knowledge regarding similarities and differences between clinically-based definitions of psychiatric disorders and educational disabilities.
12. Based on assessment, select empirically-supported, evidence based prevention and intervention methods appropriate for use with children, youth and families in individual and group settings.

**Course Themes:**

**Theme Relation to Multiculturalism & Diversity**
Multiculturalism and Diversity will be addressed through discussion of incidence and prevalence of child and adolescent mental disorders, as related to persons differing in 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, health status, and SES.

**Theme Relation to Social Justice**
Social Justice and Social Change will be addressed through discussion of the misapplication of mental health diagnoses based on race, class, and gender bias, and the potential impact of poverty, discrimination, and disenfranchisement on the development of mental disorders and disorders of parenting.

**Theme Relation to Promotion, Prevention, Treatment & Rehabilitation**
Promotion, Prevention, Treatment, and Rehabilitation will be addressed through discussion of protective factors which promote resiliency and positive adaptation.

**Theme Relation to Behavioral and Social Science Research**
Behavioral and Social Science Research will inform the entire content of this course, which will draw especially on current research in the following areas: developmental psychopathology, attachment, risk, resiliency and coping, trauma and maltreatment, and studies of particular disorders.

**Relationship of the Course to Social Work Ethics and Values**
Ethical and value issues related to all course topics will be identified and discussed. Examples of these include: how views of the rights of children affect our understanding of child mental health, how societal values regarding child development affect judgments we make about the mental health of children, how the use social workers make of DSM-IV can bias judgments of child mental health, what the value issues are in paying attention to the child’s inner world, and how cultural and gender biases also affect professional views of child mental health. Issues related to person-centered mental health practice, client self-determination, confidentiality, dignity, HIPPA, duty to warn, and associated legal, ethical, and value concerns will also be addressed, particularly as they pertain to client services and intervention with youth with mental health problems.
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 social 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.

Students in Need of Accommodations
If you have a documented disability or condition that may interfere with your participation in this course, please schedule a private appointment with me as soon as possible to discuss accommodations for your specific needs. This information will be kept confidential. For more information and resources, please contact the Services for Students with Disabilities office at G664 Haven Hall, (734) 763-3000.

Course Design:
The objectives of this course will be pursued through lectures, class discussions, case analysis, and presentations. There will be two exams covering information given during class lectures, a written paper, and in-class group presentations covering assigned readings. Students are encouraged to join class discussions, including specific case examples from practicum experience/employment if applicable (keeping confidentiality in mind).

Course Requirements and grading:
- In class exam #1 (60 points) 30%
- In class exam #2 (60 points) 30%
- Written Assignment/Case Analysis Paper (60 points) 30%
- In class article review presentation (10 points) 5%
- Class attendance and participation (10 points) 5%

In class exams:
Examinations are not cumulative and will take place in class. Each exam will have 3 vignettes, for 20 points per vignette. (See class schedule for dates).

Written Assignment/Case Analysis Paper:
There will be two options for this assignment, clinical and non clinical.
Option #1: Clinical (Do this paper if you have or are currently working with clients):

- Using DSM V, choose a diagnosis given to your client OR choose a diagnosis that you believe better fits the individual you are treating (it may be different from the diagnosis given by another professional involved in the case). Read at least 5 current peer reviewed references regarding the diagnosis. The 5 required sources must be peer reviewed research articles or book chapters published within the last 15 years.
  1. Write a brief definition of the diagnosis and its common symptoms (this section may be a paraphrase of DSM V).
  2. Using the reference material, discuss:
     a. Common hypothesis regarding the development of the disorder, including psychological/biological factors (if applicable).
     b. Describe how the disorder is likely to affect an individual in terms of development, functioning, view of self, and relationships with others.
     c. Describe the potential impacts of the child’s/adolescent’s difficulties on the family and in school settings.
     d. Discuss evidence based treatments or interventions associated with the diagnosis you have chosen.
  3. Illustrate your researched topic using your clinical case. Be sure that your clinical case example illustrates behaviors or emotional symptoms that are features of the diagnosis.
  4. If relevant, discuss whether you feel your client has been misdiagnosed. That is, after exploring the child’s symptoms, contributing factors, and likely participants, discuss a diagnosis you feel might more appropriately fit this particular individual. If you feel that no one diagnosis is sufficient, discuss the option of dual (or multiple) diagnoses.
  5. Discuss what evidence based interventions are most appropriate based on associated diagnosis. (Ex. What appears to be working? Are there any barriers to treatment? How might they be overcome?)
  6. Please remember to include an introduction and conclusion section.

Option #2: Non-clinical (Do this paper if you have never worked with clients):

- Using DSM V, choose a diagnosis you are interested in. Please make sure to keep the focus of your paper on the diagnosis related to children and youth. Read at least 5 current peer reviewed research references regarding the diagnosis. The 5 required sources must be peer reviewed research articles or book chapters published within the last 15 years. One of these references must contain a case study that provides a detailed example of the clinical presentation of a child or adolescent with the relevant diagnosis. Please indicate which reference contains the clinical description.
1. Write a brief definition of the diagnosis and its common symptoms (This section may be a paraphrase of DSM V).

2. Using the reference material, discuss:
   a. Common hypothesis regarding the development of the disorder, including psychosocial and biological factors (if applicable).
   b. Describe how the disorder is likely to affect a child and/or youth in terms of development, functioning, view of self, and relationships with others.
   c. Describe the potential impacts of the child’s/adolescent’s difficulties on the family and in a school setting.
   d. Discuss treatments or intervention associated with the diagnosis you have chosen.

3. Present a clinical case example from the readings which illustrates the disorder. Be sure that your clinical case example illustrates behaviors or emotional symptoms that are features of the diagnosis.

4. Discuss whether or not you agree with the diagnosis the client has been in the case example and why. That is, after exploring the child’s symptoms, contributing factors, and likely precipitants, discuss a diagnosis you feel might appropriately fit this individual if different that the diagnosis stated. If you feel that no one diagnosis is sufficient, discuss the option of dual (or multiple) diagnoses.

5. Given the research you have done, briefly discuss evidence based treatment interventions for the case study you presented.

6. Please remember to include an introduction and conclusion to your paper.

Details:

- **Confidentiality**: As in all class discussions, please disguise your case material by using alternate names and delete or disguise any other identifying information.
- **Bibliography**: Include an APA style bibliography of the references you have cited.
- **Paper length**: 6-8 pages (including bibliography)
- **Grades**: This paper is worth 30% of your grade. Grade is based on organization, following each of the terms of the assignment, clarity of the writing, and accurate application of the concepts.
- **Format**: All paper must be typed, 12 pt. font, double spaced and one-inch margins. Use appropriate APA format. It is critical to reference all sources in your writing. Direct quotes in particular must be identified as such. Situations of apparent plagiarism or academic dishonesty will be handled according to University policy.

***Papers are to be turned in to me in class on the date that they are due (See schedule for date).
**In class article review presentations:**
Each student is responsible for one brief article presentation. There will be approximately 3 presentations during each class period.

Each presentation is expected to last approximately 10 minutes and is to include the following:
1. General Review of the article
2. Personal Response to the article (You may choose to relate it to an existing client case, talk about it in relation to PODS, etc.)
3. 2-3 group discussion questions to share with the class

**Attendance and Participation:**
In the unlikely event that you must miss class, please call or email me to inform me of your absence. If you miss more than 2 classes, your grade will be lowered one half letter grade. Participation is about being present during class discussions and bringing a positive learning attitude. Each of us participates differently, and I will strive to honor that diversity among us.

**Text and Reading assignments:**

I strongly encourage you to purchase a physical copy of the DSM V if you are considering clinical work after graduation. You can find used copies easily on amazon.com and I have also reserved some at Ulrich’s. However, if you prefer to utilize an online copy, you may do so through the Library website using the following search: https://www.lib.umich.edu/mlibrary/search/searchtools/DSM%2520V

- DSM-5 online supplemental information can be found at http://www.psychiatry.org/dsm5

***Additional readings will be on electronic reserve on Canvas for this class section. See class schedule for dates.

**Course Schedule:**

**Session #1 September 18:** Welcome, Introduction to DSM-V, and Assessment.

**Assigned Readings:**
1. DSM-V (pp. 5-17, pp. 19-25)


**Session #2 September 25:** Depressive Disorders-- Major Depressive Disorder, Dysthymia

**Assigned Readings:**

1. DSM-V (pp. 155-188)


**Session #3 October 2:** Mood Disorders, Bipolar Disorders, Psychosis in Children

**Assigned Reading:**

1. DSM-V (p. 123-154)


**Session #4 October 9:** Childhood Trauma, Posttraumatic Stress Disorder, Adjustment Disorders, Exam Review

**Assigned Readings:**
1. DSM-V (pp. 265-290)

**Guest Speaker:** Kirby Paterson, LMSW

**Session #5 October 16:** Examination #1, Pharmacology

**Session #6 October 23:** Attention Deficit Hyperactivity Disorder, Disruptive Behavior Disorders, Oppositional Defiant Disorder, Conduct Disorder

**Assigned Readings:**
1. DSM-V (pp. 59-66, 461-476)

**Session #7 October 30:** Autism Spectrum Disorder, Learning Disorders, Intellectual disabilities, IDEA Act

**Assigned Readings:**
1. DSM-V (pp. 31-50, 50-59, 66-77)


**Guest Speaker: Isaiah Keefer, IDEA Act**

**Session #8 November 6:** Childhood Anxiety Disorders, Generalized Anxiety Disorder, Panic Disorder, Separation Anxiety Disorder, Specific Phobia, Social Anxiety

**Assigned Readings:**
1. DSM-V (pp. 189-225, 233)

**Session #9: November 13: PAPER DUE;** Obsessive Compulsive Disorder, Tic Disorders, Anxiety, cont.

**Assigned Readings:**
1. DSM-V (pp. 235-242, 81-85)

**Guest Speaker: Dan Fischer, LMSW**

**Session #10 November 20**: Substance Use Disorders, Social Justice Issues, Stigma

**Assigned Readings:**
1. DSM-V (pp. 481-584)

**November 27: NO CLASS: Thanksgiving Holiday Break**

**Session #11 December 4**: Eating Disorders, Mandated Reporting, Exam Review

**Assigned Readings:**
1. DSM-V (pp. 329-354)

**Guest Speakers: Carrie Craun, PCC-S; Cara Douglas, PCC-S**

**Session #12 December 11: EXAMINATION #2—End of Semester**