Social Work 605

Section 67406

Human Behavior and Mental Health
3 Units

Spring 2016

Instructor: Joan Landguth LCSW

Email: landguth@usc.edu **Course Day:** Monday

Telephone: 858-361-9366 **Course Time:**
- 67406: 7:00—8:15 am PST

Office: VAC **Course Location**: VAC

Office Hours:
- By Appointment on VAC   Preferred times on Monday
  - 6:00—6:45 am PST
  - 10:15—11:00 am PST

PLEASE NOTE:
- *Throughout this Syllabus there are important details that are written in Bold RED. These details are important so please make note of them.*
- *There may be other syllabi from other classes or sections of the VAC, but this is the "official" class syllabus for this class section. It should provide you with the information about this course. If there are necessary changes to this class or to this syllabus, you will receive an updated syllabus incorporating those changes.*

I. COURSE PREREQUISITES

SOWK 505

II. CATALOGUE DESCRIPTION

Understanding problem-producing behaviors and their ramifications on individuals, families, and groups that comprise the clientele in mental health settings. Required for students in Mental Health concentration.

III. COURSE DESCRIPTION

This 3-unit course builds on the content from the human behavior courses from the first year including social learning, psychodynamic, trauma, stress and coping, and neurobiology to help explain the mental health functioning of individuals seen in the mental health service system. Explanatory theories are expanded and deepened with a particular emphasis on the problems encountered in multicultural environments.

IV. COURSE OBJECTIVES

The Human Behavior and Mental Health course (SOWK 605) will:

Objective #	Objectives
1	Present the major theories of human behavior that explain particular syndromes and psychopathology most commonly seen in mental health settings.
2	Teach the impact of demographic factors such as age, gender, ethnicity/race, sexual orientation, socioeconomic status, and religious preference on mental health functioning; how they may assert risk or protective influence against mental health problems.
3	Provide opportunities to understand the interrelationship between oppression, disempowerment, and mental health problems.
4	Describe recent research and landmark studies of mental health for critical evaluation.
5	Teach aspects of neurobiology as they relate to mental health.

V. COURSE FORMAT / INSTRUCTIONAL METHODS

The format of the class will primarily be didactic and interactive. Students are expected to come to class prepared to discuss the material and are encouraged to share brief, relevant, clinical experiences. Appropriate videos and case vignettes will be used to illustrate class content.

VI. STUDENT LEARNING OUTCOMES

Student learning for this course relates to one or more of the following ten social work core competencies:

	Social Work Core Competencies	SOWK 605	Course Objective
1	**Demonstrate Ethical and Professional Behavior**		
2	**Engage in Diversity and Difference in Practice**	*	**2,3**
3	**Advance Human Rights and Social, Economic, and Environmental Justice**		
4	**Engage in Practice-informed Research and Research-informed Practice**		
5	**Engage in Policy Practice**		

6	**Engage with Individuals, Families, Groups, Organizations, and Communities**	*	**1,4.5**
7	**Assess Individuals, Families, Groups, Organizations, and Communities**		
8	**Intervene with Individuals, Families, Groups, Organizations, and Communities**		
9	**Evaluate Practice with Individuals, Families, Groups, Organizations and Communities**		

* Highlighted in this course

The following table explains the highlighted competencies for this course, the related student learning outcomes, and the method of assessment.

Competencies/ Knowledge, Values, Skills	Student Learning Outcomes	Method of Assessment
Demonstrate Ethical and Professional Behavior: ▪ Understand 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 ▪ Understand frameworks of ethical decision-making and how to apply principles of critical thinking to those frameworks in practice, research, and policy arenas ▪ Recognize personal values and the distinction between personal and professional values and understand how their personal experiences and affective reactions influence their professional judgment and behavior ▪ Understand the profession's history, its mission, and the roles and responsibilities of the profession ▪ Understand the role of other professions when engaged in inter-professional teams ▪ Recognize the importance of life-long learning and are committed to continually updating their skills to ensure they are relevant and effective ▪ Understand emerging forms of technology and the ethical use of technology in social work practice	Make ethical decisions by applying the standards of the NASW Code of Ethics, relevant laws and regulations, models for ethical decision-making, ethical conduct of research, and additional codes of ethics as appropriate to context	
	Use reflection and self-regulation to manage personal values and maintain professionalism in practice situations	
	Demonstrate professional demeanor in behavior; appearance; and oral, written, and electronic communication;	
	Use technology ethically and appropriately to facilitate practice outcomes;	
	Use supervision and consultation to guide professional judgment and behavior.	

Engage in Diversity and Difference in Practice: ▪ Understand how diversity and difference characterize and shape the human experience and are critical to the formation of identity. The 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 ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. ▪ Understand 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. ▪ Understand the forms and mechanisms of oppression and discrimination and recognize 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.	a. Apply and communicate understanding of the importance of diversity and difference in shaping life experiences in practice at the micro, mezzo, and macro levels;	Class discussions and exercises (e.g. case vignettes) Assignments 1-3
	b. Present themselves as learners and engage clients and constituencies as experts of their own experiences;	
	c. Apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituencies.	Class discussions and exercises (e.g. case vignettes) Assignments 1-3

Advance Human Rights and Social, Economic, and Environmental Justice: ▪ Understand that every person regardless of position in society has fundamental human rights such as freedom, safety, privacy, an adequate standard of living, health care, and education ▪ Understand the global interconnections of oppression and human rights violations, and are knowledgeable about theories of human need and social justice and strategies to promote social and economic justice and human rights. Social workers understand strategies designed to eliminate oppressive structural barriers to ensure that social goods, rights, and responsibilities are distributed equitably and that civil, political, environmental, economic, social, and cultural human rights are protected.	Apply their understanding of social, economic, and environmental justice to advocate for human rights at the individual and system levels;	
	Engage in practices that advance social, economic, and environmental justice	

Engage In Practice-informed Research and Research-informed Practice: ▪ Understand quantitative and qualitative research methods and their respective roles in advancing a science of social work and in evaluating their practice. ▪ Know the principles of logic, scientific inquiry, and culturally informed and ethical approaches to building knowledge. ▪ Understand that evidence that informs practice derives from multi-disciplinary sources and multiple ways of knowing. ▪ Understand the processes for translating research findings into effective practice.	Use practice experience and theory to inform scientific inquiry and research.	
	Apply critical thinking to engage in analysis of quantitative and qualitative research methods and research findings.	
	Use and translate research evidence to inform and improve practice, policy, and service delivery.	

Engage in Policy Practice: ▪ Understand that human rights and social justice, as well as social welfare and services, are mediated by policy and its implementation at the federal, state, and local levels. ▪ Understand the history and current structures of social policies and services, the role of policy in service delivery, and the role of practice in policy development. ▪ Understand their role in policy development and implementation within their practice settings at the micro, mezzo, and macro levels and they actively engage in policy practice to effect change within those settings. ▪ Recognize and understand the historical, social, cultural, economic, organizational, environmental, and global influences that affect social policy. ▪ Knowledgeable about policy formulation, analysis, implementation, and evaluation.	Identify social policy at the local, state, and federal level that impacts well-being, service delivery, and access to social services.	
	Assess how social welfare and economic policies impact the delivery of and access to social services.	
	Apply critical thinking to analyze, formulate, and advocate for policies that advance human rights and social, economic, and environmental justice.	

Engage with Individuals, Families, Groups, Organizations, and Communities:	a.Apply knowledge of human behavior and the social environment, person-in environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies.	Class discussions and exercises (e.g. case vignettes) Assignments 1-3
- Understand that engagement 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. - Value the importance of human relationships. - Understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to facilitate engagement with clients and constituencies, including individuals, families, groups, organizations, and communities. - Understand strategies to engage diverse clients and constituencies to advance practice effectiveness. - Understand how their personal experiences and affective reactions may impact their ability to effectively engage with diverse clients and constituencies. - Value principles of relationship-building and inter-professional collaboration to facilitate engagement with clients, constituencies, and other professionals as appropriate.	b.Use empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies.	Class discussions and exercises (e.g. case vignettes) Assignments 1-3

Assess Individuals, Families, Groups, Organizations, and Communities: - Understand that assessment 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. - Understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in the assessment of diverse clients and constituencies, including individuals, families, groups, organizations, and communities. - Understand methods of assessment with diverse clients and constituencies to advance practice effectiveness. - Recognize the implications of the larger practice context in the assessment process and value the importance of inter-professional collaboration in this process. - Understand how their personal experiences and affective reactions may affect their assessment and decision-making.	Collect and organize data, and apply critical thinking to interpret information from clients and constituencies	
	Apply knowledge of human behavior and the social environment, person in-environment, and other multidisciplinary theoretical frameworks in the analysis of assessment data from clients and constituencies.	
	Develop mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies.	
	Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies.	

Intervene with Individuals, Families, Groups, Organizations, and Communities:	Critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies.	
▪ Understand that 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. ▪ Knowledgeable about evidence-informed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. ▪ Understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to effectively intervene with clients and constituencies. ▪ Understand methods of identifying, analyzing and implementing evidence-informed interventions to achieve client and constituency goals. ▪ Value the importance of inter-professional teamwork and communication in interventions, recognizing that beneficial outcomes may require interdisciplinary, inter-professional, and inter-organizational collaboration.		
	Apply knowledge of human behavior and the social environment, person in-environment, and other multidisciplinary theoretical frameworks in interventions with clients and constituencies	
	Use inter-professional collaboration as appropriate to achieve beneficial practice outcomes	
	Negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies.	
	Facilitate effective transitions and endings that advance mutually agreed-on goals.	

Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities: ■ Understand that evaluation 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. ■ Recognize the importance of evaluating processes and outcomes to advance practice, policy, and service delivery effectiveness. ■ Understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge in evaluating outcomes. ■ Understand qualitative and quantitative methods for evaluating outcomes and practice effectiveness.	Select and use appropriate methods for evaluation of outcomes.	
	Apply knowledge of human behavior and the social environment, person in-environment, and other multidisciplinary theoretical frameworks in the evaluation of outcomes.	
	Critically analyze, monitor, and evaluate intervention and program Processes and outcomes.	
	Apply evaluation findings to improve practice effectiveness at the micro, mezzo, and macro levels.	

The following table explains the highlighted competencies for this course, the related student learning outcomes, and the method of assessment.

VII. COURSE ASSIGNMENTS, DUE DATES AND GRADING

Assignment	Due Date	% of Final Grade
Assignment 1: Paper	**Week 6**	**20%**
Assignment 2: Quiz	**Week 10**	**20%**
Assignment 3: Paper	**Finals week**	**50%**
Class Participation and Classroom Exercises	**Ongoing**	**10%**

Each of the major assignments is described below:

Assignment #1

The first assignment is a paper that is a clinical application of theory. The student is asked to apply Contemporary Attachment theory and Self Psychology to a client they currently see in treatment or saw in first year placement. This will be a scholarly paper, drawing on the relevant literature. Diversity issues must be addressed. Length: 6-10 pages. Other details and rubrics can be found at the end of this syllabus.

Due: Week 6 (February 15, 2016 at Start of Class)

This assignment relates to student learning outcomes 2a and 2c; 6a and 6b

Assignment #2

The second assignment is a take-home essay covering units 6-9 integrating both class lectures and assigned readings. The student is asked to respond to three essay questions that will be given out in class two weeks prior to the due date. Other details can be found at the end of the syllabus.

Due: Week 10 (March 17, 2016 at 11:59 pm)

This assignment relates to student learning outcomes 2a and 2c; 6a and 6b

Assignment #3

The final assignment is a paper. The student is asked to apply a theory that best explains a mental disorder (e.g., PTSD), symptom (e.g., depression), or problem (e.g., domestic violence). This is a scholarly paper, drawing upon empirical research and relevant literature. Diversity issues must be addressed. Length: 12-15 pages. Other details and rubrics can be found at the end of this syllabus.

Due: Last Day of Class Week 15   (Monday, April 18, 2016)

This assignment relates to student learning outcomes 2a and 2c; 6a and 6b.

Class Participation (10% of Course Grade)

Class participation is defined as students' active engagement in class-related learning. Students are expected to participate fully in the discussions and activities that will be conducted in class. Students are expected to contribute to the development of a positive learning environment and to demonstrate their learning through the quality and depth of class comments, participation in small group activities, and experiential exercise and discussions related to readings, lectures, and assignments. **Class participation should consist of meaningful, thoughtful, and respectful participation based on having completed required and independent readings and assignments prior to class.** When in class, students should demonstrate their understanding of the material and be prepared to offer comments or reflections about the material, or alternatively, to have a set of thoughtful questions about the material. Class participation evaluation will be based on the following criteria:

1. **Good Contributor:** Contributions in class reflect thorough preparation. Ideas offered are usually substantive, provide good insights, and sometimes direction for the class. Challenges are well substantiated and often persuasive. If this person were not a member of the class, the quality of discussion would be diminished. Attendance is factored in. (90% to 100% points)

2. **Adequate Contributor:** Contributions in class reflect satisfactory preparation. Ideas offered are sometimes substantive, and provide generally useful insights but seldom offer a new direction for the discussion. Challenges are sometimes presented, are fairly well substantiated, and are sometimes persuasive. If this person were not a member of the class, the quality of discussion would be diminished somewhat. Attendance is factored in. (80% or 90% points)

3. **Non-participant:** This person says little or nothing in class. Hence, there is not an adequate basis for evaluation. If this person were not a member of the class, the quality of discussion would not be changed. Attendance is factored in. (40% to 80% points).

4. **Unsatisfactory Contributor:** Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive, provide few if any insights, and never provide a constructive direction for the class. Integrative comments and effective challenges are absent. (0% to 40% points)

Note: Students who use their cellphones during class time, or use their computers for anything unrelated to the class, will be heavily penalized in the class participation grade.

Class grades will be based on the following:

Class Grades		Final Grade	
3.85 – 4.00	A	92.5 – 100	A
3.60 – 3.84	A-	89.5 – 92.4	A-
3.25 – 3.59	B+	86.5 – 89.4	B+
2.90 – 3.24	B	82.5 – 86.4	B
2.60 – 2.89	B-	79.5 – 82.4	B-
2.25 – 2.59	C+	76.5 – 79.4	C+
1.90 – 2.24	C	73.5 – 76.4	C
		70.5 – 73.4	C-

(*Note:* Please refer to the *Student Handbook* and the *University Catalogue* for additional discussion of grades and grading procedures.)

Within the School of Social Work, grades are determined in each class based on the following standards which have been established by the faculty of the School:

(1) Grades of **A** or **A-** are reserved for student work which not only demonstrates very good mastery of content but which also shows that the student has undertaken a complex task, has applied critical thinking skills to the assignment, and/or has demonstrated creativity in her or his approach to the assignment. The difference between these two grades would be determined by the degree to which these skills have been demonstrated by the student.

(2) A grade of **B+** will be given to work which is judged to be very good. This grade denotes that a student has demonstrated a more-than-competent understanding of the material being tested in the assignment.

(3) A grade of **B** will be given to student work which meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets basic course expectations.

(4) A grade of **B-** will denote that a student's performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations.

(5) A grade of **C** would reflect a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement.

(6) Grades between **C-** to **F** will be applied to denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student's performance on the assignment.

Cautionary Note to Students on Plagiarism

You are expected to know what plagiarism is. Being "unclear" on the citing format is not an acceptable excuse so please avail yourselves of the resources below. All papers go through "turnitin," a web-based plagiarism detection program. Once quotations and references are filtered, if an instructor sees more than 10% similarity index there may be significant consequences, up to and including failing the paper and/or course and being referred to the University Office of Judicial Affairs.

The following resources, as well as our writing support center, are provided for your support.

https://owl.english.purdue.edu/owl/resource/589/02/

https://owl.english.purdue.edu/owl/resource/589/1/

https://owl.english.purdue.edu/owl/section/3/33/

http://libguides.usc.edu/APA-citation-style

http://www.usc.edu/student-affairs/SJACS/pages/students/academic_integrity.html

Excerpt below is from your USC Student Guidebook: http://scampus.usc.edu/1100-behavior-violating-university-standards-and-appropriate-sanctions/

11.00 Behavior Violating University Standards and Appropriate Sanctions

General principles of academic integrity include and incorporate the concept of respect for the intellectual property of others, the expectation that individual work will be submitted unless otherwise allowed by an instructor, and the obligations both to protect one's own academic work from misuse by others as well as to avoid using another's work as one's own. All students are expected to understand and abide by these principles. Faculty members may include additional classroom and assignment policies, as articulated on their syllabus.

The following are examples of violations of these and other university standards.

11.11

A. The submission of material authored by another person but represented as the student's own work, whether that material is paraphrased or copied in verbatim or near-verbatim form.
B. The submission of material subjected to editorial revision by another person that results in substantive changes in content or major alteration of writing style.
C. Improper acknowledgment of sources in essays or papers.

VIII.   REQUIRED AND SUPPLEMENTARY INSTRUCTIONAL MATERIALS AND RESOURCES

Required Textbooks

- Berzoff, J., Flanagan, L.M; & Hertz, P. (2011). *Inside out and outside in.* (3rd ed.). Lanham, MD: Rowman and Littlefield..

- Cozolino, L. (2010). *The neuroscience of psychotherapy.* New York, NY: W.W. Norton.

Recommended Textbook

- Applegate, J., & Shapiro, J. (2005). *Neurobiology for clinical social work: Theory and practice*. New York, NY: W.W. Norton.

- Cozolino, L. (2014). *The neuroscience of human relationships: Attachment and the developing social brain. (*2nd ed.). New York, NY: W.W. Norton.

On Reserve

All required articles, chapters in non-required books, and some recommended readings can be accessed through ARES. Books have been placed on reserve in Leavey Library.

Books in the ARES system can be accessed under the name of the VAC Lead Instructor: **Eileen Abel**
          (Note: If you encounter any difficulty, you can also access them under UPC Lead Doni Whitsett)

Additional NOTES from the Instructor to help you prepare for class:

- This course is rich with materials and concepts, and a social worker graduating from USC School of Social Work is presumed to have an education that includes the concepts covered in this course. If you intend to practice in social work, then **all of the topics** in this course are important to **ensure you are prepared for your social work practice**. In addition, being knowledgeable of these concepts forms the cornerstone of **ethical** social work practice in mental health. *(See the clause from the Social Work Code of Ethics below. [1])*

- To truly use the class sessions effectively you will **need to be prepared before class**. As an instructor **I will post some materials for you prior to class**. The materials are to serve as a **review of concepts from the readings and asynchronous sessions**, and sometimes to add additional concepts and references. Ideally you can use these materials to reinforce the concepts you have learned in your own learning activities.

If you have additional needs or concerns in terms of this class, you may deal with your needs in class, on the Class Wall, in emails to me, or by scheduling an appointment to meet with me during office hours.

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[1] *The **Social Work Code of Ethics** includes the following:*

> ***1.04 Competence:*** *(a)* Social workers should provide services and represent themselves as *competent only within the boundaries of their education,* training, license, certification, consultation received, supervised experience, or other relevant professional experience. (Italics added for emphasis.)

Course Schedule

Unit 1:	Biological Perspectives	Jan. 11, 2016

Topics

- Interface between neuroscience and psychological research
- Overview of brain structures and functions

This unit relates to course objectives 1 and 4

Required Reading

Cozolino, L. (2010). Building and rebuilding the brain: Psychotherapy and neuroscience. In *The neuroscience of psychotherapy* (2nd ed., pp. 12-31)*.* New York, NY: W.W. Norton.

Cozolino, L. (2010). The human nervous system: From neurons to neural networks. In *The neuroscience of psychotherapy* (2nd ed., pp. 55-72)*.* New York, NY: W.W. Norton.

Cozolino, L. (2010). The executive brain. In *The neuroscience of psychotherapy* (pp. 115-132). New York, NY: W.W. Norton.

Recommended Reading

Applegate, J., & Shapiro, J. (2005). The brain: An introductory tutorial. In *Neurobiology for clinical social work: Theory and practice* (pp. 1-14). New York, NY: W.W. Norton.

Applegate, J., & Shapiro, J. (2005). The neurobiology of memory. In *Neurobiology for clinical social work: Theory and practice* (pp. 15-25). New York, NY: W.W. Norton.

Unit 2:	Contemporary Attachment Theory	Jan. 18, 2016

Topic

- Attachment Theory and Neurobiology

This unit relates to course objectives 1, 4 and 5

Required Reading

Cozolino, L. (2010). The neurobiology of attachment. In *The neuroscience of psychotherapy* (2nd ed., pp. 213-238)*.* New York, NY: W.W. Norton.

Gerdes, K., & Segal, E. (2011). Importance of empathy for social work practice: Integrating new science. *Social Work, 56*(2), 141-148.

Schore, J., & Schore, A. (2012). Modern attachment theory: The central role of affect regulation in development and treatment. In *The science of the art of psychotherapy* (pp. 28-51). New York, NY: W.W. Norton.

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Recommended Reading

Amini, F., Lewis, T., Lannon, R., Louie, A., Baumbacher, G., McGuinness, T., & Schiff, E. Z. (1996). Affect, attachment, memory: Contributions toward psychobiologic integration. *Psychiatry, 59*, 213-239.

Applegate, J., & Shapiro, J. (2005). Affect: Toward a neuropsychological integration. In *Neurobiology for clinical social work: Theory and practice* (pp. 26-39). New York, NY: W.W. Norton.

Applegate, J., & Shapiro, J. (2005). Early affect regulation: Prelude to attachment. In *Neurobiology for clinical social work: Theory and practice* (pp. 40-57). New York, NY: W.W. Norton.

Applegate, J., & Shapiro, J. (2005). Attachment: The relational base of affect regulation. In *Neurobiology for clinical social work: Theory and practice.* (pp. 58-81). New York, NY: W.W. Norton

Brisch, K. H. (2011). *Treating attachment disorders: From theory to therapy* (2nd ed., pp. 7-82). New York, NY: Guilford Press.

Cicchetti, D., & Toth S. (1995). A developmental psychopathology perspective on child abuse and neglect. *Journal of the American Academy of Child and Adolescent Psychiatry, 34*, 541-565.

Cozolino, L. (2010). Multiple memory systems in psychotherapy. In *The neuroscience of psychotherapy* (2nd ed., pp. 73-92). New York, NY: W.W. Norton.

Glaser, D. (2000). Child abuse and neglect and the brain -- A review. *Journal of Child Psychology and Psychiatry, 41*(1), 97-116. (Instructor Note: Great review of the literature up to this date.)

Karr-Morse, R., & Wiley, M. (1997). *Ghosts from the nursery: Tracing the roots of violence.* New York, NY: Atlantic Monthly Press. (Instructor note: Classic)

Lyons-Ruth, K., & Block, D. (1996). The disturbed caregiving system: Relations among childhood trauma, maternal caregiving, and infant affect and attachment. *Infant Mental Health, 17*(3), 257-275.

Siegel, D. (2012). Mind, brain, and relationships. In *The developing mind* (2nd ed., pp. 1-45). New York, NY: Guilford Press.

Unit 3:	Theories of Stress	Jan. 25, 2016

Topics
- Neurobiology of stress
- Stress-Diathesis theory
- Impact of parenting behaviors on children
- Internalizing and externalizing disorders
- Film: *Stress: Portrait of a killer*

This unit relates to course objectives 1-5.

Required Reading

Cozolino, L. (2014). The impact of early stress. *The neuroscience of human relationships: Attachment and the developing social brain. (*2nd ed., 258-276). New York, NY: W.W. Norton.

Cozolino, L. (2014). Interpersonal stress.*The neuroscience of human relationships: Attachment and the developing social brain. (*2nd ed., pp. 277-293). New York, NY: W.W. Norton.

Perry, B., & Szalavitz, M. (2007). Stairway to heaven. In *The boy who was raised as a dog* (pp. 57-80). New York, NY: Basic Books.

Siever, L. J. (2008) Neurobiology of aggression and violence. *The American Journal of Psychiatry. 165*(1), 429-442.

Recommended Reading

Applegate, J., & Shapiro, J. (2005). Vulnerable dyads: The quality of early caregiving relationships. In *Neurobiology for clinical social work: Theory and practice* (pp. 82-118). New York, NY: W.W. Norton.

Applegate, J., & Shapiro, J. (2005). Infant mental health: From understanding to prevention. In *Neurobiology for clinical social work: Theory and practice* (pp. 119-140). New York: W.W. Norton.

Baron-Cohen, S., Tager-Flusberg, H., & Cohen, D. (2000). *Understanding other minds.* New York, NY: Oxford University Press.

Bradley, S. (2000). Externalizing disorders: The disruptive behavior disorders. In *Affect regulation and the development of psychopathology* (pp. 203-228). New York, NY: Guildford Press.

Brisch, K. H. (2012). Attachment disorders in school-age children: School phobias, underachievement, aggressiveness. In *Treating attachment disorders: From theory to therapy* (pp. 185-199). New York, NY: Guilford Press.

Burt, A., Krueger, R., McGue, M., & Iacono, W. (2003). Parent-child conflict and the comorbidity among childhood externalizing disorders. *Archives of General Psychiatry, 60*(5), 505-513.

Danzer, R., O'Connor, J., Freund, G., Johnson, G., & Kelley, K. (2008). From inflammation to sickness and depression: When the immune system subjugates the brain. *Neuroscience*, *9*, 46-57.

Fisher, P., Gunnar, M, Dozier, M., Bruce, J., & Pears, K. (2006). Effects of therapeutic interventions for foster children on behavioral problems, caregiver attachment, and stress regulatory neural systems. *Annals of the New York Academy of Sciences, 1094*, 215-225.

Gorman, C. (2003, July 28). The new science of dyslexia. *Time,* 52-59.

Granic, I., & Patterson, G. (2006). Toward a comprehensive model of antisocial development: A dynamic systems approach. *Psychological Review*, *113*(1), 101-131.

Harvard Mental Health Letter (2011). Understanding the stress response*, 27*(9), 4-5.

Karr-Morse, R., & Wiley, M. (1997). The hand that rocks. In *Ghosts from the nursery* (pp. 175-220)*.* New York, NY: Atlantic Monthly Press. (Instructor Notes: Classic.)

Lupien, S., McEwen, B., Gunnar, M., & Heim, C. (2009). Effects of stress throughout the lifespan on the brain, behaviour and cognition. *Neuroscience, 10*, 434-445.

Perry, B., & Szalavitz, M. (2010). No mercy. In *Born for love* (pp. 120-144). New York, NY: Harper Collins. (Instructor note: And other chapters.)

Schore, A. N. (2012). Relational trauma and the developing right brain: An interface of psychoanalytic self psychology and neuroscience (pp. 52-70). In *The science of the art of psychotherapy.* New York, NY: W.W. Norton.

Sontag, L., Graber, J., Brooks-Gunn, J., & Warren, M. (2008). Coping with social stress: Implications for psychopathology in young adolescent girls. *Journal of Abnormal Child Psychology, 36*, 1159-1174.

Szalavitz, M., & Perry, B. (2010). The intense world. In *Born for love* (pp. 72-95). New York, NY: Harper Collins. (Instructor note: On autism)

Waldinger, R., & Toth, S. (2001). Maltreatment and internal representations of relationships: Core relationship themes in the narratives of abused and neglected preschoolers. *Social Development, 10*(1), 41-58. (Instructor note: Empirical article supporting object relations theory)

Whitsett, D. (2006). The psychobiology of trauma and child maltreatment. *Cultic Studies Journal, 5*(3), 351-373.

Unit 4:	Current Psychodynamic Theories	Feb. 1, 2016

Topics
- Building on the past: from Freud to modern psychodynamic theory
- Overview of Object Relations and Self Psychology theories

This unit relates to course objectives 1-4

Required Reading

Carr, E. & Cortina, M. (2011). Heinz Kohut and John Bowlby: The men and their ideas. *Psychoanalytic Inquiry: A Topical Journal for Mental Health Professionals, 3,* 42-57.

Flanagan, L. M. (2011). Object relations theory. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in. (*3rd ed., pp. 118-157). Lanham, MD: Rowman & Littlefield. (Review from 503)

Flanagan, L. M. (2011). The theory of self psychology. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in. (*3rd ed., pp. 158-185). Lanham, MD: Rowman & Littlefield.

Kohut, H., & Wolf, E. (1978). Disorders of the self and their treatment: An outline. *International Journal of Psychoanalysis, 59*, 413-425 (Instructor note: Landmark article.)

Recommended Reading

Banai, E., Shaver, P., & Mikulincer, M. (2005). "Selfobject" needs in Kohut's self psychology. *Psychoanalytic Psychology, 22*(2), 224-259.

Review: Berzoff, J. (2011). Freud's psychoanalytic concepts. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in (*3rd ed., pp. 18-47). Lanham, MD: Rowman & Littlefield.

Cozolino, L. (2010). Neural integration in different models of psychotherapy. In *The neuroscience of psychotherapy* (2nd ed., pp. 22-35)*.* New York, NY: W.W. Norton.

Schore, J., & Schore, A. (2010). Clinical social work and regulation theory: Implications of neurobiological models of attachment. In S. Bennet & J. Nelson (Eds.), *Essential clinical social work series* (pp. 57-75). New York, NY: Springer.

Shamess, G., & Shilkret, R. (2011). Ego psychology. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 62-96). Lanham, MD: Rowman & Littlefield.

Shamess, G., (2011). Structural theory. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 48-61). Lanham, MD: Rowman & Littlefield.

Shilkret, R., & Shilkret, C. (2011). Attachment theory. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 186-207). Lanham, MD: Rowman & Littlefield. (Instructor note: Review.)

St. Clair. (2004). Margaret Mahler: The psychological birth of the individual. *Object relations and self psychology: An introduction* (4th ed., pp. 87-107). Ontario, Canada: Thomson: Brooks/Cole.

St. Clair, M. (2004). Stephen A. Mitchell: The integrated relational model. *Object relations and self psychology: An introduction* (4th ed., pp. 169-190). Ontario, Canada: Thomson: Brooks/Cole.

Unit 5:	**Psychosocial Perspectives**	**Feb. 8, 2016**

Topics

- Contextualizing stress: Influences of diversity and macro factors (e.g. oppression, discrimination) on stress and mental health

This unit relates to course objectives 2 and 3

Required Reading

Berzoff, J. (2011). Psychodynamic theory and gender. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in. (*3rd ed., pp. 241-257). Lanham, MD: Rowman & Littlefield. (Instructor note: Feminist theories)

Ludwig, J., Duncan, G., Gennetian, L., Katz, L., Kessler, R., Kling, J., & Sanbonmatsu, L. (2012). Neighborhood effects on the long-term well-being of low-income adults. *Science, 337,* 1505-1510.

Mattei, L. (2011). Coloring development: Race and culture in psychodynamic theories. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 258-283). Lanham, MD: Rowman & Littlefield.

Recommended Reading

Barnard, A. (2007). Providing psychiatric mental health care for Native Americans: Lessons learned by a non-Native American PMHNP. J*ournal of Psychosocial Nursing & Mental Health Services, 45*(5), 30-35.

Brill, S., & Pepper, R. (2008). Is my child transgendered? *The transgender child* (pp. 1-37). San Francisco, CA: Cleis Press.

Burdge, B. (2007). Bending gender, ending gender: Theoretical foundations for social work practice. *Social Work, 52*(3), 243-250.

Lee, K., & Yoon, D. (2011). Factors influencing the general well-being of low-income Korean immigrant elders. *Social Work, 56*(3), 269-278.

Lee, R., & Balick, M. (2003). Stealing the soul, soumwahu en naniak, and susto: Understanding culturally-specific illnesses, their origins and treatment. *Alternative Therapies in Health and Medicine, 9*(1), 106-111.

Link, B. & Phelen, J. (1995). Social conditions as fundamental causes of disease. *Journal of Health and Social Behavior,* Extra issue, 80-94.

Mather, C. (2005). Accusations of genital theft: A case from northern Ghana. *Culture, Medicine, & Psychiatry*, *29*, 33-52.

Mays, V., & Cochran, S. (2001). Mental health correlates of perceived discrimination among lesbian, gay, and bisexual adults in the United States. *American Journal of Public Health, 91*(11), 1869-1876.

Negy, C., Hammons, M., Reig-Ferrer, A., & Carper, T. (2010). The importance of addressing acculturative stress in marital therapy with Hispanic immigrant women. *International Journal of Clinical and Health Psychology, 10*(1) 5-21.

Phillips, M. (1998). The transformation of China's mental health services. *The China Journal, 19*(39), 1-36. (Instructor Note: Essential for international social work in China.)

Ranjith, G., & Mohan, R. (2006). Dhat syndrome as a functional somatic syndrome: Developing a sociosomatic model. *Psychiatry, 69*(2), 142-150.

Rodriguez, E. (2010). At the intersection of church and gay: A review of the psychological research on gay and lesbian Christians. *Journal of Homosexuality, 57*(1), 5-38. Where should this go?

Sianko, N. (2011). Gender equality and women's mental health: What's on the agenda? *American Orthopsychiatric Association, 81*(2), 167-171.

Siegel, D. (2012). *The developing mind* (2nd ed.). New York, NY: Guilford Press.

Viladrich, A., & Abraı´do-Lanza, A. F. (2009). Religion and mental health among minorities and immigrants in the U.S. In S. Loue & M. Sajatovic (Eds.), *Determinants of minority mental health and wellness (*pp. 149-174). New York, NY: Springer.

Whitsett, D., & Whitsett, D. (1996). Anti-Black racism and its consequences: A self psychology/object relations perspective. *Journal of Analytic Social Work, 3*(4), 61-81.

Yakushko, O., Watson, M., & Thompson, S. (2008). Stress and coping in the lives of recent immigrants and refugees: Considerations for counseling. *International Journal for Advanced Counseling, 30*, 167-178.

Yeh, C. J. (2003). Age, acculturation, cultural adjustment, and mental health symptoms of Chinese, Korean, and Japanese immigrant youths. *Cultural Diversity and Ethnic Minority Psychology*, *9*(1), 34-48.

Unit 6:   Anxiety and Obsessive-Compulsvie Disorders   Feb. 15, 2016
          NOTE: Assignment 1 Due

Topic

▪ Anxiety disorders from childhood to adulthood

This unit relates to course objectives 1, 2, and 4

Required Reading

Berzoff, J. (2011). Anxiety and its manifestations. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 416-439). Lanham, MD: Rowman & Littlefield.

Borden, W. (2009). Psychoanalysis in Great Britain: Melanie Klein and beyond. *Contemporary psychodynamic theory and practice.* Chicago, IL.: Lyceum Books. 63-74.

Clark, D., & Beck, A. (2010). Cognitive theory and therapy of anxiety and depression: Convergence with neurobiological findings. *Trends in Cognitive Sciences, 14*(9), 418-424.

Cozolino, L. (2010). The anxious and fearful brain. In *The neuroscience of psychotherapy* (2nd ed., pp. 239-261). New York, NY: W.W. Norton.

Recommended Reading

Brisch, K. H. (2011). Attachment disorders in adults. *Treating attachment disorders: From theory to therapy* (pp. 219-255). New York, NY: Guilford Press.

Drake, K. & Ginsburg, G. (2012). Family factors in the development, treatment, and prevention of childhood anxiety disorders. *Clinical Child and Family Psychological Review, 15,* 144-162.

Mahoney, D. (2000). Panic disorder and self states. *Clinical Social Work Journal, 28*(2), 197-212.

O'Connor, J. J. (2008) A flaw in the fabric: Toward an interpersonal psychoanalytic understanding of obsessive–compulsive disorder. *Journal of Contemporary Psychotherapy, 38*(1), 87-96.

Pennington, B. (2002). Disorders of action regulation. In *The development of psychopathology: Nature and Nurture* (pp. 194-207). New York, NY: Guildford Press.

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Unit 7: Trauma and Stressor Related Disorders   **Feb. 22, 2016**

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Topics
▪ Neurobiological and biopsychological paradigms
▪ Focus on interpersonal violence (IPV), disasters, and combat-related trauma
▪ Simple vs. complex trauma
▪ Coping theory, resiliency, and posttraumatic growth

This unit relates to course objectives 1-5

Required Reading

Basham, K. (2011). Trauma theories and disorders. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 440-474). Lanham, MD: Rowman & Littlefield.

Charuvastra A. & Cloitre, M. (2008). Social bonds and posttraumatic stress disorder. *Annual Review of Psychology, 59*, 301-328.

Levendosky, A.A., Lannert, B. & Yalch, M. (2012). The effects of intimate partner violence on women and child survivors: An attachment perspective. *Psychodynamic Psychiatry*, *40*(3), 397-433

Moran, S., Burker, E., & Schmidt, J. (2013). Posttraumatic growth and posttraumatic stress in veterans. *Journal of Rehabilitation, 79*(2). 34-43.

Satcher, D., Tepper, M.S., Thrashwer, C., & Rachel, S. (2012). Breaking the silence: Supporting intimate relationships for our wounded troops and their partners: A call to action. *International Journal of Sexual Health, 24.* 6-13.

Van der Kolk, B. (2014). Developmental trauma: The hidden epidemic. *The body keeps the score.* (pp.149-168). New York, NY: Viking Publishing Co.

Recommended Reading

Bremner, J. D., & Marmar, C. (Eds.) (1998). *Trauma, memory, and dissociation.* Washington, DC: American Psychiatric Press.

Cook, A., Spinazzola, J., Ford, J., Lanktree, C., Blaustein, M., Cloitre, M., DeRose, R., Hubbard, R., Kagan, R., Liautaud, J., Mallah, K., Olafson, E., & van der Kolk, B. (2005). Complex trauma in children and adolescents. *Psychiatric Annals*, *35*(5), 390-398.

Degruy Leary, J. (2005). Posttraumatic slave syndrome. In *Posttraumatic slave syndrome* (pp. 114-143). Portland, OR: Upton Press.

Herman, J. L. (1992). *Trauma and recovery.* New York, NY: Basic Books. (Instructor note: Classic; every student should read this book.)

Liotti, G. (1992). Disorganized/disoriented attachment in the etiology of the dissociative disorders. *Dissociation, 4*, 196-204. (Instructor note: Classic.)

Ringel, S. (2012). Attachment theory, infant research, and neurobiology. In*. S. Ringel & J. Brandell. (Eds.),*Trauma* (pp. 77-96). Los Angeles, CA: Sage.

Siegel, D. (2003). An interpersonal neurobiology of psychotherapy: The developing mind and the resolution of trauma. In M. Solomon & D. Siegel (Eds.), *Healing trauma* (pp. 1-56)*.* New York, NY: W.W. Norton.

Solomon, M., & Siegel, D. (Eds.) *Healing trauma.* New York, NY: W.W. Norton.

Tedeschi, R. (2011). Posttraumatic growth in combat veterans. *Journal of Clinical Psychology in Medical Settings. 18*(2). 137-144.

Terr, L. (1991). Childhood traumas: An outline and overview. *American Journal of Psychiatry, 148*(1), 10-20. (Instructor Note: Classic.)

Van der Kolk, B. (1996). The black hole of trauma. In B. van der Kolk, A. McFarlane, & L. Weisaeth (Eds.), *Traumatic stress* (pp. 3-23). New York, NY: Guilford Press.

Van der Kolk, B. (2003). Posttraumatic stress disorder and the nature of trauma. In M. Solomon & D. Siegel (Eds.), *Healing trauma* (p. 168). New York, NY: W.W. Norton.

Woodhead, C., Wessely, S., Jones, N., Fear, N., & Hatch, S.L. (2012). Impact of exposure to combat during deployment to Iraq and Afghanistan on mental health by gender. *Psychological Medicine, 42,* 1985-1996.

Unit 8: Dissociative Phenomena	Feb. 29, 2016

Topics
- Dissociation
- W.D.R. Fairbairn

This unit relates to course objectives 1, 4 and 5

Required Reading

Borden, W. (2009). W.R.D. Fairbairn: Inner experience and outer reality. *Contemporary psychodynamic theory and practice* (pp.75-88). Chicago, IL.: Lyceum Books .

Cozolino, L. (2010). Trauma and neural network dissociation. In *The neuroscience of psychotherapy* (2nd ed., pp. 262-285)*.* New York, NY: W.W. Norton.

Gill, S. (2010). The therapist as psychobiological regulator: Dissociation, affect attunement and clinical process. *Clinical Social Work Journal, 38*(1), 260-268.

Van der Kolk, B. (2014). The unbearable heaviness of remembering. *The body keeps the score.* New York, NY: Viking Publishing Co. 184-199.

Recommended Reading

Alim, T., Charney, D., & Mellman, T. (2005). An overview of posttraumatic stress disorder in African Americans. *Journal of Clinical Psychology, 62*(7), 801-813.

Cozolino, L. (2010). Laterality: One brain or two? In *The neuroscience of psychotherapy* (2nd ed., pp. 93-111)*.* New York, NY: W.W. Norton.

Kisiel, C., & Lyons, J. (2001). Dissociation as a mediator of psychopathology among sexually abused children and adolescents. *American Journal of Psychiatry, 158*, 1034-1039.

Units 9 and 10: Depression and Bipolar Disorders
NOTE: Week 10: Assignment 2 Due

Week 9: Mar 7, 2016
Week 10: Mar 14, 2016

Topics

- Unipolar and bipolar depressions
- From adolescence to adulthood
- Film: *Out of the shadows*

This unit relates to course objectives 1, 3-5

Required Reading

Almeida, J., Johnson, R., Corliss, H., Molnar, B., & Azrael, D. (2009). Emotional distress among LGBT youth: The influence of perceived discrimination based on sexual orientation. *Journal of Youth Adolescence*, *38*, 1001-1014.

Beck, A. (2008). The evolution of the cognitive model of depression and its neurobiological correlates. *American Journal of Psychiatry*, *165*(8), 969-977.

Berzoff, J., & Mendez, T. (2011). Mood disorders, with a special emphasis on depression and bipolar disorder. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 372-415). Lanham, MD: Rowman & Littlefield.

Zayas, L., Gulbas, L., Fedoravicius, N., & Cabassa, L. (2010). Patterns of distress, precipitating events, and reflections of suicide attempts by young Latinas. *Social Sciences and Medicine, 70*, 1773-1779.

Recommended Reading

Applegate, J., & Shapiro, J. (2005). Affect: Toward a neuropsychological integration. In *Neurobiology for clinical social work: Theory and practice* (pp. 26-39). New York, NY: W.W. Norton.

Clark, D. & Beck, A. (2010). Cognitive theory and therapy of anxiety and depression: Convergence with neurobiological findings. *Journal of Trends in Cognitive Sciences, 14*(9), 418-424.

Deitz, J. (1991). The psychodynamics and psychotherapy of depression: Contrasting the self psychological and the classical psychoanalytic perspectives. *American Journal of Psychoanalysis*, *51*(1), 61-70.

Disner, S., Beevers, C., Haigh. E., & Beck, A. (2011). Neural mechanisms of the cognitive model of depression. Nature Reviews/ *Neuroscience,* Advance online publications, 1-11.

Field, N. (2006). Unresolved grief and continuing bonds: An attachment perspective. *Death Studies, 30,* 739-756.

Haas, A., Eliason, M., Mays, V. M., Mathy, R. M., Cochran, S. D., D'Augelli, & A. R.,Clayton, P. J. (2011). Suicide and suicide risk in lesbian, gay, bisexual, and transgender populations: Review and recommendations. *Journal of Homosexuality, 58*(1), 10-51.

Nuttbrock, L., Hwahng, S., Bockting, W., Rosenblum, A., Mason, M., Macri, M., & Becker, J. (2010). Psychiatric impact of gender-related abuse across the life course of male-to-female transgender persons. *Journal of Sex Research, 47*(1), 12-23.

Shobe, M., Coffman, M., & Dmoschowski, J. (2009). Achieving the American dream: Facilitators and barriers to health and mental health in Latino immigrants. *Journal of Evidence-Based Social Work, 6*, 92-110.

Wei, M., Liao, K., Chao, R., Mallinckrodt, B., & Botello-Zamarron, P. (2010). Minority stress, perceived bicultural competence, and depressive symptoms among ethnic minority college students. *Journal of Counseling Psychology, 57*(4), 441-422.

Whybrow, P. (1997). The legacy of the lizard. The anatomy of the emotional brain. In *A mood apart* (pp. 121-147). New York, NY: Harper Perennial. (Instructor Note: Other chapters also recommended; classic.)

Unit 11:	Personality Disorders: Narcissistic Personality Disorder	March 21, 2016

Topic

- Focus on Narcissistic Personality Disorder

This unit relates to course objectives 1-5

Required Reading

Cozolino, L. (2010). The self in exile: Narcissism and pathological caretaking. In *The neuroscience of psychotherapy* (2nd ed., pp. 286-304)*. New York, NY: W.W. Norton.

Hertz, P. (2011). Personality disorders with a special emphasis on borderline and narcissistic syndromes. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 325-371). Lanham, MD: Rowman & Littlefield.

Samuel, D. & Widiger, T. (2009). Comparative gender biases in models of personality disorder. *Personality and Mental Health, 3*(1), 12-25

Recommended Reading

Borden, W. (2009). W.R.D. Fairbairn: Inner experience and outer realities. *Contemporary psychodynamic theory and practice.* (pp.75-88). Chicago, IL.: Lyceum Books.

Miller, A. (1986). Depression and grandiosity as related forms of narcissistic disturbance. In A. Morrison (Ed.), *Essential papers on narcissism* (pp. 323-347). New York, NY: New York University Press. (Instructor note: Classic.)

Schore, A. (1994). Developmental psychopathology of personality disorders. In *Affect regulation and the origin of the self* (pp. 415-430)*. Hillsdale, NJ: Lawrence Erlbaum Publishing.

St. Clair, M. (2004). Heinz Kohut: Self psychology and narcissism. In *Object relations and self psychology: An introduction* (4th ed., pp. 145-168). Ontario, Canada: Thomson: Brooks/Cole.

Unit 12:	Personality Disorders: Borderline Personality Disorder	March 28, 2016

Topic

- Focus on Borderline Personality Disorder

This unit relates to course objectives 1-5

Required Reading

Cozolino, L. (2014). Borderliine personality disorder: When attachment fails. *The neuroscience of human relationships: Attachment and the developing social brain. (*2nd ed., pp. 319-337). New York, NY: W.W. Norton.

Fonagy, P., Luyten, P., & Strathearn, L. (2011). Borderline personality disorder, mentalization, and the neurobiology of attachment. *Infant Mental Health, 32*(1), 47-69.

Lawson, C. (2000). Make-believe mothers. In *Understanding the borderline mother* (pp. 3-30). New York: Rowman & Littlefield. (Good clinical description and relevance).

Palombo, J., Bendicsen, H., & Koch, B. (2010). Otto F. Kernberg (1928). *Guide to psychoanalytic developmental theories* (pp. 181-196). New York, NY: Springer.

Unit 13:	The Schizophrenia Spectrum	April 4, 2016

Topics
- Neurobiology of Schizophrenia
- Psychosocial aspects of psychoses and paranoid states
- Stress-diathesis perspective
- Key features

This unit relates to course objectives 1-5

Required Reading

Hertz, P. (2011). The psychoses, with a special emphasis on schizophrenia. In J. Berzoff, L.M. Flanagan, & P. Hertz (Eds.), *Inside out and outside in* (3rd ed., pp. 294-324). Lanham, MD: Rowman & Littlefield.

Fatemi, S.H. & Folsom, T.D. (2009). The neurodevelopmental hypothesis of schizophrenia, revisited. *Schizophrenia Bulletin, 35*(3), 528-548.

Recommended Reading

Insel, T. (2010). Rethinking schizophrenia. *Nature, 468*, 187-193.

Harvard Mental Health Letter. (2009). Infection, inflammation, and mental illness, *26*(4), 1-3.

Unit 14: Eating Disorders	April 11, 2016A

Topic
- Focus on anorexia nervosa and bulimia

This unit relates to course objectives 1, 2, 4 and 5

Required Reading

Budd, G. (2007). Disordered eating: Young women's search for control and connection. *Journal of Child and Adolescent Psychiatric Nursing, 20*(2), 96-106.

Farber, S. (2008). Traumatic attachment and dissociation in self-harm: Eating disorders and self-mutilation. *Clinical Social Work Journal, 36*(1), 63-72.

Wolrich, M. (2011).Body dysmorphic disorder and its significance to social work. *Clinical Social Work Journal,* 39, 101-110.

Recommended Reading

Bachar, E. (1998). The contributions of self psychology to the treatment of anorexia and bulimia. *American Journal of Psychotherapy, 52*(2), 147-165.

Boisvert, J. A., & Harrell, W. A. (2009). The effects of English-speaking in the household and immigrant heritage on eating disorder symptomatology among Canadian women & men. *Women's Health and Urban Life, 8*(2), 64-83.

Farber, S., Tabin, J., Jackson, C., & Bachar, E. (2007). Death and annihilation anxieties in anorexia nervosa, bulimia, and self-mutilation. *Psychoanalytic Psychology, 24*(2), 289-305.

Weltzin, T. (2012). Gender differences: Eating disorders in males. Part 2.*Psychiatric Times,* 32-33.

Unit 15: Substance-Related and Addictive Disorders   **April 18, 2016**   **NOTE: Final Assignment Due**

Topic

- Focus on alcohol and drug abuse

This unit relates to course objectives 1, 2, 4 and 5

Required Reading

McNeece, C.A. & DiNitto, D. (2012). The etiology of addiction. In C.A. McNeece & D. DiNitto (Eds.), *Chemical dependency: A systems approach* (pp.25-38). Boston, MA: Pearson.

Padilla, Y., Crisp, C., & Rew, D. L. (2010). Parental acceptance and illegal drug use among gay, lesbian, and bisexual adolescents: Results from a national survey. *Social Work, 55*(3), 265-275.

Wilcox, R. & Erickson, C. (2012). The brain biology of drug abuse and addiction. In C.A. McNeece & D. DiNitto, *Chemical dependency: A systems approach* (pp.39-55). Boston, MA: Pearson.

University Policies and Guidelines

IX. ATTENDANCE POLICY

Students are expected to attend every class and to remain in class for the duration of the unit. Failure to attend class or arriving late may impact your ability to achieve course objectives which could affect your course grade. Students are expected to notify the instructor by email (xxx@usc.edu) of any anticipated absence or reason for tardiness.

University of Southern California policy permits students to be excused from class for the observance of religious holy days. This policy also covers scheduled final examinations which conflict with students' observance of a holy day. Students must make arrangements *in advance* to complete class work which will be missed, or to reschedule an examination, due to holy days observance.

Please refer to Scampus and to the USC School of Social Work Student Handbook for additional information on attendance policies.

X. ACADEMIC CONDUCT

Plagiarism – presenting someone else's ideas as your own, either verbatim or recast in your own words – is a serious academic offense with serious consequences. Please familiarize yourself with the discussion of plagiarism in *SCampus* in Section 11, *Behavior Violating University Standards*https://scampus.usc.edu/1100-behavior-violating-university-standards-and-appropriate-sanctions/. Other forms of academic dishonesty are equally unacceptable. See additional information in *SCampus* and university policies on scientific misconduct, http://policy.usc.edu/scientific-misconduct/.

Discrimination, sexual assault, and harassment are not tolerated by the university. You are encouraged to report any incidents to the *Office of Equity and Diversity* http://equity.usc.edu/ or to the *Department of Public Safety* http://capsnet.usc.edu/department/department-public-safety/online-forms/contact-us. This is important for the safety whole USC community. Another member of the university community – such as a friend, classmate, advisor, or faculty member – can help initiate the report, or can initiate the report on behalf of another person. *The Center for Women and Men* http://www.usc.edu/student-affairs/cwm/ provides 24/7 confidential support, and the sexual assault resource center webpage sarc@usc.edu describes reporting options and other resources.

XI. SUPPORT SYSTEMS

A number of USC's schools provide support for students who need help with scholarly writing. Check with your advisor or program staff to find out more. Students whose primary language is not English should check with the *American Language Institute* http://dornsife.usc.edu/ali, which sponsors courses and workshops specifically for international graduate students. *The Office of Disability Services and Programs* http://sait.usc.edu/academicsupport/centerprograms/dsp/home_index.html provides certification for students with disabilities and helps arrange the relevant accommodations. If an officially declared emergency makes travel to campus infeasible, *USC Emergency Information http://emergency.usc.edu/*will provide safety and other updates, including ways in which instruction will be continued by means of blackboard, teleconferencing, and other technology.

XII. STATEMENT ABOUT INCOMPLETES

The Grade of Incomplete (IN) can be assigned only if there is work not completed because of a documented illness or some other emergency occurring after the 12th week of the semester. Students must NOT assume that the instructor will agree to the grade of IN. Removal of the grade of IN must be instituted by the student and agreed to be the instructor and reported on the official "Incomplete Completion Form."

XIII. POLICY ON LATE OR MAKE-UP WORK

Papers are due on the day and time specified. Extensions will be granted only for extenuating circumstances. If the paper is late without permission, the grade will be affected.

XIV. POLICY ON CHANGES TO THE SYLLABUS AND/OR COURSE REQUIREMENTS

It may be necessary to make some adjustments in the syllabus during the semester in order to respond to unforeseen or extenuating circumstances. Adjustments that are made will be communicated to students both verbally and in writing.

XV. CODE OF ETHICS OF THE NATIONAL ASSOCIATION OF SOCIAL WORKERS (OPTIONAL)

Approved by the 1996 NASW Delegate Assembly and revised by the 2008 NASW Delegate Assembly [http://www.socialworkers.org/pubs/Code/code.asp]

Preamble

The primary mission of the social work profession is to enhance human wellbeing and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession's focus on individual wellbeing in a social context and the wellbeing of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living.

Social workers promote social justice and social change with and on behalf of clients. "Clients" is used inclusively to refer to individuals, families, groups, organizations, and communities. Social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice. These activities may be in the form of direct practice, community organizing, supervision, consultation administration, advocacy, social and political action, policy development and implementation, education, and research and evaluation. Social workers seek to enhance the capacity of people to address their own needs. Social workers also seek to promote the responsiveness of organizations, communities, and other social institutions to individuals' needs and social problems.

The mission of the social work profession is rooted in a set of core values. These core values, embraced by social workers throughout the profession's history, are the foundation of social work's unique purpose and perspective:

- Service
- Social justice
- Dignity and worth of the person
- Importance of human relationships
- Integrity
- Competence

This constellation of core values reflects what is unique to the social work profession. Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience.

XVI. COMPLAINTS

If you have a complaint or concern about the course or the instructor, please discuss it first with the instructor. If you feel you cannot discuss it with the instructor, contact the lead instructor Dr. Doni Whitsett. If you do not receive a satisfactory response or solution, contact your advisor and/or Vice Dean Dr. Paul Maiden for further guidance.

XVII. TIPS FOR MAXIMIZING YOUR LEARNING EXPERIENCE IN THIS COURSE

- ✓ Be mindful of getting proper nutrition, exercise, rest and sleep!
- ✓ Come to class.
- ✓ Complete required readings and assignments BEFORE coming to class.
- ✓ BEFORE coming to class, review the materials from the previous Unit AND the current Unit, AND scan the topics to be covered in the next Unit.
- ✓ Come to class prepared to ask any questions you might have.
- ✓ Participate in class discussions.
- ✓ AFTER you leave class, review the materials assigned for that Unit again, along with your notes from that Unit.
- ✓ If you don't understand something, ask questions! Ask questions in class, during office hours, and/or through email!
- ✓ Keep up with the assigned readings.

Don't procrastinate or postpone working on assignments.

HUMAN BEHAVIOR AND MENTAL HEALTH
Spring 2015
Assignment #1:

Assignment #1: Clinical Application of Explanatory Theory

Please choose a client with whom you are currently working or with whom you have worked in the past. Analyze the case in terms of *Contemporary Attachment Theory*, an integration of *Attachment Theory* and *Neurobiology* with an emphasis on Neurobiology. The latter would include information on how stress affects your client. Next, please switch to a *Self Psychology* paradigm, analyzing the case using a Kohutian framework. A brief introduction of the case should take up no more than ½ page.

Students should draw upon the material presented in this course which includes the readings on the syllabus and class lectures/discussions. Please include some issues of diversity where applicable.

This is a scholarly paper; at least 10 references are required, 6 of which must be from the syllabus. *Power Point slides and class lectures (including class notes provided by the instructor) may not be counted among these references, scholarly references only. Please do your own research by following up on sources or concepts provided to you).*

The paper should be 8 – 10 pages in APA style, using 12 pt. font, either 1.5 or double spaced. There is a lot to get into these pages so make every sentence count. Be succinct, no fluff! There will be no "do overs." Paper is worth 20% of the final grade. This assignment is due on **February 15, 2016 at the beginning of class. (e.g. not at Midnight or 11:59—Please read that again!).** Please submit an electronic copy through the VAC assignment submission site. **Please remember that this site automatically reviews your paper through *TurnItIn* .** Check your originality report to make sure it is no more than 5%, not including direct quotes and bibliography.

Grading Guidelines

Theoretical Perspective = 75%

      Papers will be graded on accuracy, comprehension, and depth of understanding. You do not need to use readings other than those on the syllabus. Because you have a limited number of pages you will need to be succinct and make every sentence count.

Writing style = 25%

      Writing style includes good English grammar, syntax, sentence structure, and spelling. It also includes clarity of concepts and ideas (articulation).

HUMAN BEHAVIOR AND MENTAL HEALTH
Fall 2015
Assignment #2

Assignment #2: Take Home Essay Question Quiz

This 2nd assignment consists of two short essays. You will be given a choice of five questions to consider two weeks before the quiz is due. You will choose 2 of the 5 questions, and will write two essays to address your chosen questions. References are required, you must use APA formatting style, and you must have a reference page. There is no required number of references for this assignment.

Please answer the questions in 4-6 pages. NOTE: *This means that each question will require <u>at least 2 pages each</u> to address, with an additional page required for references. (e.g. You cannot be graded on what you do not say!)*

Your answers to the questions should be based upon scholarly sources and we strongly encourage use of the readings from the syllabus. *PowerPoint* slides and class handouts are not considered scholarly. If you use these for guides, you must follow-up with your own research of the primary sources or additional sources. **Please include diversity issues wherever applicable.** (**Hint:** If you don't find any related diversity issues, summarize your research noting where you looked, and state you did not find an issue. (And *not finding anything* related to diversity <u>in a social work issue</u> is unusual. Considering *Diversity* issues is a trademark of our profession.)

Paper is worth 20% of the final grade. This assignment is **due on March 14, 2016 at the beginning of class.** Please submit an electronic copy through the VAC assignment link.

Questions will be handed out two weeks before the paper is due—typically at the end of class in Week 8.

HUMAN BEHAVIOR AND MENTAL HEALTH
Spring 2015
Assignment 3

Assignment #3: Application of Theory to a Mental Health issue

o   Description: **Select one mental health topic** in which you have an interest, which can include a **Symptom** (examples might be pathological lying or mania or panic attacks) , a **Disorder** (examples might be DSM 5 diagnostic categories like Depression, Personality Disorders), or a **Problem** (examples might be Cannabis addiction or a form of Intimate Partner abuse).

    o   (A useful analogy to consider in selecting a topic is to imagine or remember encountering a client or clients who has/have a mental health issue with which you are not familiar. Rather than fly by the seat of your pants, as a social worker you would go out and research the issue to understand more about it, and you would also research possible interventions to use for your client.)

o   **Write a scholarly paper about your topic and research.**

    o   **Do not write a case study,** such as you would for practice. You might use a hypothetical client example, but you are writing about the issue, not your specific client.

COMPONENTS OF THE SCHOLARLY PAPER

FORMAT

12-15 pages; double spaced

Use normal fonts (nothing smaller than the type on this sheet, please!) and normal margins. APA style is required (which includes headings).

At least 12 references are required with 8 coming from the syllabus. Class lectures and Power Points may not count among them.

Due date/times and delivery methods: Papers are due on Monday April 18 at 11:59 pm PST (e.g. usually referred to as "midnight"). Please submit papers electronically to the VAC assignment website. Please submit your paper in Word (e.g. "doc." format, not in "pdf" or other formats).

The paper must cover the following topics:

1.) Theoretical explanation of your chosen topic:

Discuss your selected *symptom*, *disorder*, or *problem* from **one of the following theoretical perspectives**:

o   Theory 1: Object Relations theory – an integration of at least two theorists;

    o   (This is an advanced review, e.g. not Bowlby or Mahler:

        ▪   (e.g. consider research Bion, Klein, Rank, Sandler, Guntrip, Greenberg and Mitchell, Stolorow's [intersubjectivity]). (Fonagy's Mentalization theory) or Kernberg, Masterson, or Fairbairn)

o   Theory 2: Contemporary Cognitive Behavioral theory

    o   (This includes neurobiology, as well as an exploration of CBT beyond the "first wave theorists")

- Theory 3: Trauma theories
    - (e.g. an integration of psychological and biological theory, includes dissociation)
- Theory 4: Social Learning theory
    - (Note, this should be at a more advanced level than 1st year)

Theories you may not use are the following:
- Ecological, Systems, Erikson, Freud, and any others emphasized in HBSE 1st year.

It is strongly suggested that you run the theory by the instructor to make sure it meets the requirements of the assignment.

We are going for depth rather than breadth in this section. Please note **the theoretical section is worth 55%** of the final assignment grade. Your discussion of your theory should include a discussion of a treatment using that theory.

2.) Neurobiological research findings around your chosen issue:
A section on neurobiology is required.

3.) Diversity factors that might be considered around your issue:
Diversity issues must also be included. You don't have to cover them all, but you need to demonstrate an awareness of how these factors may impact upon your subject
(e.g. Examples can be to consider class or socioeconomic issues, gender, ethnicity, race, sexual orientation, or culture, including unique cultural experiences such as the military or the child welfare systems),
(e.g. Examples of other kinds of factors might be the population of individuals who have experienced a unique stressor, such as immigration, or combat, or domestic violence. These experiences might be linked to specific disorders, such as women who have been incested and the relationship to borderline personality disorder development).

4.) Treatment application of your theoretical perspective
A small treatment section (2-3 pages) is also required. **Your treatment selection must be an obvious flow from your theoretical perspective**, which means you will specifically link it to aspects of your theory in the Theory section, or in the Treatment Section.

- *Evidence Based Practice* are preferred but not required. However, it is required that you demonstrate that you researched for evidence that your selected treatment has been considered for the specific area you have identified.)

ADDITIONAL INSTRUCTIONS: Please read carefully

You may not use the same topic for this paper that you use for your Practice paper.
- In the past, students who have done so overlap too much and end up essentially plagiarizing themselves (i.e. using the same paper for two courses which is against university policy).
- Please review the issues around Plagiarism to be sure that you are not cutting and pasting from papers submitted to previous classes or websites (this will be flagged by

TurnItIn) and that you are summarizing sources *in your own words* or using quotation marks and page numbers for specific quotes.

An "A" paper demonstrates an integration of assigned readings, class lectures, and your own research. Internet resources should be limited to 3 sites and the websites clearly identifying the subject. Please be sure these are reputable sites (e.g. Cochrane or Campbell Collaborations, Medscape) and preferably peer reviewed. While Wikipedia may be a starting point for some research, the information it contains should be verified through other sources. Please demonstrate original thinking wherever possible. You may use a case or small vignettes to illustrate the concepts but please remember this is not a practice paper so a vignette should be no more than one page.

Papers will be graded not only on content but on writing style as well. In other words, papers should be well-written, well-organized, and concepts clearly articulated.

Extensions will be given only in rare cases and under extenuating circumstance. Papers submitted late without permission of the instructor will be penalized 3 points per day.

Please also be aware that a grade of *incomplete* cannot be given except in cases of "a documented illness or other emergency occurring after the twelfth week of the semester." An emergency, as defined by University policy, is "*a situation or event which could not be foreseen and which is beyond the student's control, and which prevents the student from ... completing the course requirements*." (Scampus)

GRADING GUIDELINES

The paper is worth 50% of your course grade. Following is a grading rubric:

Content:	75%	
Process:	<u>25%</u>	
	100%	Total
<u>Content</u>		
Introduction	<u>5%</u>	
Theoretical perspective*	55%	
Neurobiology	5%	
Diversity	5%	
Treatment section	5%	
	75%	Total Credit
<u>Process</u>		
Writing style**	20%	
Critical thinking	<u>5%</u>	
	25%	Total Credit

*<u>Theoretical perspective</u> includes use of the literature (readings on the syllabus as well as outside readings) and demonstrating integration of class lecture material.

*<u>Writing style</u> includes good English grammar, syntax, sentence structure, and spelling. It also includes clarity of concepts and ideas (articulation). An "A" paper demonstrates mastery of the topic as well as understanding of the complex nature of the subject. (See student handbook for further elaboration).