**Social Work 650**

**Summer 2020**

**Military and Veteran Policy and Program Management**

**3 Units**

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| --- | --- | --- | --- |
| Instructor: Joseph Hunter, Ph.D., LCSW |  | | |
| E-Mail: [jshunter@usc.edu](mailto:jshunter@usc.edu) |  | Course Day: Wednesday |
| Telephone: 518/892-6276 |  | Course Time: 4-5:35PM PT |  |
| Office: virtual |  | Course Location: VAC |  |
| Office Hours: Wednesdays 5:45-6:30PM PT |  |
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# Course Prerequisites

SOWK 649 and SOWK 639

# Catalogue Description

This course addresses how military and veteran policy and programs within the Departments of Defense (DoD) and Veterans Affairs (VA) are developed and implemented to improve the health and wellbeing of service members, veterans and their families. Specific attention is given to policy and programs on the prevention and treatment of domestic violence, family maltreatment, sexual assault, suicide, substance abuse and other issues related to the military members, veterans, and their families. The roles of non-profits and veteran’s advocacy groups in the formation of policy and programs are also highlighted.

# Course Description

Social workers provide leadership in the development of the Department of Defense (DoD) and Veterans Affairs (VA) policy and programs designed to improve the health and welfare of service members, veterans, and families. This course provides military social work students with an in-depth understanding of how DoD and VA develops, funds and implements health and wellness programs. Social work students will learn how the VA and DoD fund health and wellness programs through the Plans, Programming, Budgeting and Execution System (PPBE).

Military social work students will gain detailed knowledge about the management and oversight of major DoD and VA programs including mental health, homelessness, vocational rehabilitation, GI bill, family advocacy, and prevention of sexual assault, suicide, domestic violence and alcohol and substance abuse. Special emphasis will be placed on how DoD and VA policy and programs advance diversity. The course will also address DoD and VA eligibility, compensation and benefits, and the disability rating system.

# Course Objectives

The Military and Veteran Policy and Program Management course (SOWK 650) will:

| **Objective #** | **Objectives** |
| --- | --- |
| 1 | Explain the complex interaction between civilian society and the military as two distinct yet interactive cultures |
| 2 | Illustrate how medical and behavioral health care doctrine and policies are developed, funded and implemented within the VA and DoD |
| 3 | Describe the major programs within the VA and DoD that address mental health, homelessness, vocational rehabilitation, GI bill, family advocacy, and prevention of sexual assault, suicide, domestic violence and alcohol and substance abuse |
| 4 | Analyze diversity policy within the VA and DoD as applied to sexual orientation, race, ethnicity and gender |
| 5 | Promote the value and scope of the role of the non-clinical social worker within the VA and DoD to improve the health and wellbeing of service members, veterans and their families |

# Course Format/Instructional Methods

Modes of instruction will consist of a combination of didactic lecture, in-class discussion, student case presentations, experiential exercise, and online teaching and learning environments.

# Student Learning Outcomes

The following table lists the nine Social Work core competencies as defined by the Council on Social Work Education’s 2015 Educational Policy and Accreditation Standards:

|  |  |
| --- | --- |
| **Social Work Core Competencies** | |
| 1 | **Demonstrate Ethical and Professional Behavior** |
| 2 | **Engage in Diversity and Difference in Practice** |
| 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** |
| 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 shows the competencies highlighted in this course, the related course objectives, student learning outcomes, and dimensions of each competency measured. The final column provides the location of course content related to the competency.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| Competency 5: Engage in Policy Practice Social workers understand that policy and its implementation at the federal, state, and local levels mediate human rights of individuals and social justice. Social workers understand the history and current structures of social policies and service delivery systems, the role of policy in service delivery, and the role of practice in policy development. Social workers actively engage in policy practice to effect change in communities, organizations and businesses. Social workers understand the historical, social, cultural, economic, organizational, environmental, and global influences that affect social policy, and are knowledgeable about policy formulation. | **1.** Explain the complex interaction between civilian society and the military as two distinct yet interactive cultures | **5a.** Identify social policies at the state, federal and global levels that emphasize the financial and personal well-being of individuals, families and communities | Skills | **Unit 1:** Society and the Military  **Unit 3:** Health Doctrine and Policy Approaches within the DoD and VA  **Unit 5:** DoD Policy/Programs and the Social Worker: Policies to Support Families  **Assignment 1:** Article Review |
| **Competency** | **Objective** | **Behaviors** | **Dimensions** | **Content** |
| Competency 8: Intervene with Individuals, Families, Groups, Organizations, and CommunitiesSocial workers are knowledgeable about evidence-based interventions that help them best address the goals of their clients and the systems that serve them. Social workers are able to intervene effectively at individual, group, and system levels. Social workers understand methods of identifying, analyzing and implementing evidence-informed interventions to promote the well-being of individuals. Social workers value the importance of inter-professional teamwork and communication in interventions, recognizing that beneficial outcomes may require interdisciplinary, inter-professional, and inter-organizational collaboration. | **3.** Describe the major programs within the VA and DoD where the social worker plays a key role such as mental health, homelessness, vocational rehabilitation, GI bill, family advocacy, and prevention of sexual assault, suicide, domestic violence and alcohol and substance abuse | **8a.** Use knowledge of evidence-informed interventions to initiate actions that enhance the capacity and sustainability of organizations | Knowledge | **Unit 2:** Overview of the Departments of Defense (DoD) and Veteran Affairs (VA) Health Structure and Functions  **Unit 6:** DoD Policy/Programs and the Social Worker: Substance and Alcohol  **Unit 7**: DoD Policy/Programs and the Social Worker: Sexual Assault Prevention and Response  **Unit 9:** VA Programs and the Social Worker  **Unit 10:** DoD and Veteran Research Structure  **Unit 13:** The Military Health System, TRICARE, and Medical Discharges  **Assignment 4:** Policy Implementation |

# Course Assignments, Due Dates, and Grading

| **Assignment** | **Due Date** | **% of Final Grade** |
| --- | --- | --- |
| **Assignment 1: Application Paper** |  | 30% |
| **Assignment 2: Policy Presentation** |  | 20% |
| **Assignment 3: Application Paper** |  | 40% |
| **Class participation** |  | 10% |

Each of the major assignments is described below.

**Assignment 1: Application Paper (30%)**

This short answer assignment asks students to apply their learning from the first half of the course. The answers to each of the questions should be between 1 to 2 pages. The entire paper should be 4 to 8 pages not counting the cover or reference pages that are required. Do not include the scenarios or questions in your answers, but do number your answers to correspond with the questions. The paper does NOT need an introduction or conclusion. The assignment should be 12 point-font, Times New Roman. Answers should be supported by at least **6 scholarly references** (overall) from the required or recommended readings.

Instructors will provide instructions with detailed requirements.

**Due: Week 6**

*This assignment relates to student learning outcomes 1, 2, 3.*

**Assignment 2: Policy Presentation (20%)**

Students will work in teams of two and partners and presentation dates will be assigned. This assignment is a **class** **presentation** that analyzes a DOD or Veteran program or policy that addresses a problem or issue related to military members, veterans, and/or their families. **Presentations are not to exceed 20 minutes.** A PowerPoint presentation will be used on the VAC platform for this presentation.

**Requirements:**

1. Demonstrate a working knowledge of a DOD or veteran program.
2. Discuss the targeted population for this program including how the program addresses race, gender or sexual orientation issues.
3. Discuss the effectiveness of this program.
4. Discuss lessons learned in reviewing the strengths and weaknesses of the program.
5. Propose a potential solution to either fixing the current program/policy or replacing it. This section does not need to be extensive, but should invite discussion from the class.

**Due: To be arranged by course instructor**

*This assignment relates to student learning outcomes 1, 2, 3, 4, and 5.*

## Assignment 3: Application Paper (40%)

This short answer assignment asks students to apply their learning from the first half of the course. The answers to each of the questions should be between 1 to 2 pages. The entire paper should be 5 to 10 pages not counting the cover or reference pages that are required. Do not include the scenarios or questions in your answers, but do number your answers to correspond with the questions. The paper does NOT need an introduction or conclusion. The assignment should be 12 point-font, Times New Roman. Answers should be supported by at least **8 scholarly references** (overall) from the required or recommended readings.

Instructors will provide instructions with detailed requirements.

**Due: Week 12**

*This assignment relates to student learning outcomes 1, 2, 3, 4, and 5.*

## Class participation

**This is 10% of class grade**. This grade is based on the student’s ability to demonstrate professional courtesy, support to peers, and active participation during discussions and presentations of fellow classmates. Cell phone usage (texting) and recreational computer use are not permitted during class.

Grades in the School of Social Work are determined based on the following standards that have been established by the faculty of the school:

**Grades of A or A–** are reserved for student work that not only demonstrates strong 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 his or her 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.

**A grade of B+** will be given to work that is judged to be very good and demonstrates a more-than-competent understanding of the material being tested in the assignment.

**A grade of B** will be given to student work that meets the basic requirements of the assignment and demonstrates work that meets course expectations at an adequate level.

**A grade of B–** will indicate that a student’s performance was less than adequate on an assignment and reflects only moderate grasp of content and/or expectations.

**A grade of C** will reflect a minimal grasp of the assignments, poor organization of ideas, and/or several areas requiring improvement.

**Grades between C– and F** will denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student’s performance on the assignment.

Class grades will be based on the following:

| **Class Grades** | | **Final Grade** | | |
| --- | --- | --- | --- | --- |
| 3.85–4.00 | A | | 93–100 | A |
| 3.60–3.84 | A– | | 90–92 | A– |
| 3.25–3.59 | B+ | | 87–89 | B+ |
| 2.90–3.24 | B | | 83–86 | B |
| 2.60–2.89 | B– | | 80–82 | B– |
| 2.25–2.59 | C+ | | 77–79 | C+ |
| 1.90–2.24 | C | | 73–76 | C |
|  |  | | 70–72 | C– |

Within the USC Suzanne Dworak-Peck 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- and 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.

As a professional school, class attendance and participation is an essential part of your professional training and development at the USC Suzanne Dworak-Peck School of Social Work. You are expected to attend all classes and meaningfully participate. For Ground courses, having more than 2 unexcused absences in class may result in the lowering of your grade by a half grade. Additional absences can result in additional deductions. For VAC courses, meaningful participation requires active engagement in class discussions and maintaining an active screen. Having more than two unexcused absences in class may result in the lowering of your grade by a half grade. Additional absences in the live class can result in additional deductions. Furthermore, unless directed by your course instructor, you are expected to complete all asynchronous content and activities prior to the scheduled live class discussion. Failure to complete two asynchronous units before the live class without prior permission may also lower your final grade by a half grade. Not completing additional units can result in additional deductions.

# Required and Supplementary Instructional Materials and Resources

## Required Textbooks

No textbooks are assigned in this course.

This syllabus lists the required and recommended readings for the course. Additional required and recommended readings may be assigned by the instructor throughout the course.

**Course Overview**

| **Unit** | **Topics** | **Assignments** |
| --- | --- | --- |
|  | | |
| **1** | * Society and the Military |  |
| **2** | * Overview of the Departments of Defense (DoD) and Veteran Affairs (VA) Health Care Mission, Structure and Functions |  |
| **3** | * Health Doctrine and Policy Approaches within the DoD and VA |  |
| **4** | * Fiscal Management within the DoD and VA |  |
| **5** | * DoD Policy/Programs and the Social Worker: Policies to Support Families |  |
| **6** | * DoD Policy/Programs and the Social Worker: Substance and Alcohol/Suicide/PTSD/TBI |  |
| **7** | * DoD Policy/Programs and the Social Worker: Sexual Assault Prevention and Response |  |
| **8** | * Combat Healthcare |  |
| **9** | * VA Programs and the Social Worker |  |
| **10** | * Non-profits and Veteran Advocacy Groups |  |
| **11** | * The Military Transition |  |
| **12** | * Military Social Work and Ethics/Diversity Policy |  |

**Course Schedule―Detailed Description**

| **Unit 1: Society and the Military** |  |
| --- | --- |
| **Topics**   * Military Culture * Evolving Military Culture * Military Life   This unit relates to course objectives 1 and 4. | |

**Required Readings**

## Hall, L. K. (2011). The Importance of Understanding Military Culture. *Social Work in Health Care, 50*, 4-18. doi:10.1080/00981389.2010.513914

Sarkesian, S. C., & Connor, R. E. (2006). *The US military profession into the twenty-first century: War, peace and politics* (2nd Edition). Portland, Oregon: Frank Cass.(Read Chapter 5, Civilian and Military Cultures, pp. 77-91.)

Soeters, J. L., Winslow, D. J., & Weibull, A. (2006). Military culture. In G. Caforio (Ed.) *Handbook of Sociology of the Military* (pp. 237-254). New York, NY: Kluwer Academic/Plenum Publishers. doi:10.1007/0-387-34576-0

**Recommended Readings**

Coll, J., Weiss, E., & Metal, M. (2013). Military culture and diversity. In A. Rubin, E. Weiss, & J. Coll (Eds.), *Handbook of military social work* (pp. 21-36). Hoboken, NJ: Wiley. (Read pp. 21-28)

Dunivin, K. O. (1994). Masculine culture: Change and continuity. *Armed Forced and Society, 20*(4), 531-547.

Hajjar, R. M. (2014; 2013). Emergent postmodern US military culture. *Armed Forces & Society,* 40(1), 118-145. doi:10.1177/0095327X12465261

Kadis, J., & Walls, D. (2006). *Military facts for non-military social workers.* Washington, DC: Veterans Health Association Handbook. (Strongly recommended for students with no experience with the military)

Kohn, R. H. (2009). TARNISHED BRASS: Is the U.S. military profession in decline? *World Affairs, 171*(4), 73-83. doi:10.3200/WAFS.171.4.73-83.

MacLean, A., & Elder, G. H. (2007). Military service in the life course. *Annual Review of Sociology, 33,* 175-196.

| **Unit 2: Health Doctrine and Policy Approaches within the DoD and VA** |  |
| --- | --- |
| **Topics** | |
| |  | | --- | | Health Care Policy   * Role of policy * Development and dissemination of policy * Policy evaluation   This unit relates to course objectives 2, 3 and 4. | | |

**Required Reading**

Congressional Budget Office (2017). *Approaches to changing military healthcare.* Washington, DC. (SKIM).

Department of Defense. (2017). *Joint Publication 4-02: Health Services Support.* Retrieved from <https://www.jcs.mil/Portals/36/Documents/Doctrine/pubs/jp4_02ch1.pdf>. (Read summary and Chapter 1.)

Mundell, B. F., Friedberg, M. W., Eibner, C., & Mundell, W. C. (2013). US military primary care: Problems, solutions, and implications for civilian medicine. *Health Affairs (Project Hope), 32*(11), 1949-1955.

Netting, F. E., Kettner, P., & McMurty, S. L. (2012). Assessing human service organizations. In *Social work macro practice* (5th ed., Chapter. 8, pp. 258-305). Boston, New York, San Francisco: Pearson. (SKIM)

Review these websites:

<https://www.va.gov/vhapublications/publications.cfm?pub=1>

<https://www.health.mil/dha>

<http://www.health.mil/dhapublications>

<http://www.tricare.mil/CoveredServices/HowBenefitBecomesCovered.aspx>.

Review some of the videos at this site: <https://www.youtube.com/user/DARPAtv>.

**Recommended Readings**

Defense Laboratories Enterprise. Retrieved from <http://www.acq.osd.mil/chieftechnologist/publications/docs/Defense_Laboratory_Enterprise.pdf>

Girard, P. (2007). Military and VA telemedicine systems for patients with traumatic brain injury. *Journal of Rehabilitation Research and Development*, 44, 1017-1026.

Parker, V. A., Wubbenhorst, W. H., Young, G.I., Desai, K.R., & Charns, M.P. Implementing Quality Improvement in Hospitals: The Role of Leadership and Culture. *American Journal of Medical Quality, 14*, 64-69. doi: 10.1177/106286069901400109.

Weinberger, S. (2008). Military research: The pentagon's culture wars. *Nature, 455*(7213), 583-585. doi:10.1038/455583a

| **Unit 3: Overview of the Departments of Defense (DoD) and Veteran Affairs (VA) Health Care Mission, Structure and Functions** |  |
| --- | --- |

**Topics**

* Structure and Function of the Military Health System (DoD) and the VA Health Care System
* Services for military members, veterans, and their families
* Role of policy within the DoD and VA
* Wellness research within the DoD
* Military laboratories and infrastructure
* VA research centers

This unit relates to course objectives 2, 3 and 5.

**Required Reading**

Department of Defense. (February, 2019). *Evaluation of the Tricare Program: Fiscal Year 2019) Report to Congress.* (Read page 1-44, SKIM the rest.)

Department of Defense. (August, 2014). *Final Report to the Secretary of Defense: Military Health System Review.* Washington, D.C. (Overview of DoD’s Military Health System (pp. 19-32).

Department of Veterans Affairs. (2019). *Federal Benefits of Veterans, Dependents, and Survivors.* (Read Chapter 1 Health Care Benefits, pp. 1-13, SKIM the rest). Retrieved from https://www.va.gov/opa/publications/benefits\_book/2016\_Federal\_Benefits\_for\_Veterans.pdf

Jansen, D. J. (2014). Military medical care: questions and answers. *Congressional Research Service.* [www.crs.gov](http://www.crs.gov). RL33537.

Resnik, L., Reiber, G. E., Steager, P., Evans, R.K., Barnabe, K, & Harris, J. (2013). VA/DoD Collaboration Guidebook for Healthcare Research. <http://www.research.va.gov/va-dod/va-dod-guidebook-2013.pdf>. (Read pp. 1-16, Skim the rest.)

Smith, D. J., Bono, M.D., & Slinger, B. J. (2017). Transforming the military health system. *JAMA*, 318(24),2427-2428.

Review these websites:

<http://www.defense.gov/>

<http://www.va.gov/>

**Recommended Readings**

Department of Veterans Affairs. (n.d.). VA History in Brief. Retrieved from <http://www.va.gov/opa/publications/archives/docs/history_in_brief.pdf>.

Department of Veterans Affairs. (2014). *Federal Benefits of Veterans, Dependents, and Survivors.* Retrieved from <http://www.va.gov/opa/publications/benefits_book/2014_Federal_Benefits_for_Veterans_English.pdf>.

| **Unit 4: Fiscal Management with DoD and VA** |  |
| --- | --- |
| |  | | --- | | **Topics** | | * Overview of the Congressional budget process * The Plans, Program, Budgeting and Execution (PPBE) |   This unit relates to course objectives 2 and 5. | |

### Required Reading

Department of Defense. (February, 2019). *Evaluation of the Tricare Program: Fiscal Year 2019) Report to Congress.* (Read page 173-198, SKIM the rest.)

Garrick J. (2017) Whistleblowers Can Benefit from Peer Support to Remain Resilient while Dealing with Organizational Retaliation and Adversity. *Federal Practitioner,* 34(7), 38-41.

Gregerson, B. (2012). Curing military health care. *Armed Forces Journal*, 14.

Shevin-Coetzee, M. (2016). The Labyrinth Within: Reforming the Pentagon’s Budgeting Process. Center for New American Security. Retrieved from <https://www.jstor.org/stable/resrep06219?seq=1#metadata_info_tab_contents>.

[Video: The PPBE System: https://www.youtube.com/watch?v=LVe9E1qCwsY](Video:%20%20%20The%20PPBE%20System:%20%20https://www.youtube.com/watch?v=LVe9E1qCwsY)

**Recommended Reading**

Department of Defense (2006). Department of Defense planning, programming, budgeting, and execution system (PPBE) process/Army planning, programming, planning, budgeting and execution (PPBE) process – An executive primer. Access at: http://www.acqnotes.com/Attachments/Army%20PPBE%20Executive%20Primer.pdf.

Department of Defense. (2014). Planning and Programming. *Defense Contract Management Agency.*

Holcombe, S.G. & Johnston, N.C. (2008). Analysis of the PPBE Process in the current dynamic political environment. Naval Postgraduate School, Monterey, CA.

Smith, B. (2012). Understanding the PPBE Process. *Navy Supply Corps Newsletter, 75*, ISSN 0360-716X.

| **Unit 5: DoD Policy/Programs and the Social Worker: Policies to Support Families** |  |
| --- | --- |
| **Topics** | |
| * Family Advocacy Program (FAP) * Exceptional Family Member Program * Support Programs | |

This unit relates to course objectives 2, 3, 4 and 5.

### Required Reading

Blaisure, K. R., Saathoff-Wells, T. Pereia, A. Wadsworth, S. M. & Dombro, A. L. (2016). *Serving Military Families: Theories, Research, and Application* (2nd Edition)*.* (Read Chapter 11, pp. 259-286.). New York: Rutledge.

*Military Personnel: DOD Should Improve Its Oversight of the Exceptional Family Member Program*. (2018). US Government Accountability Office. SKIM

Milner, J. S. (2015). Child maltreatment in United States military families: The military family advocacy program has given increased attention to the prevention of family violence. *Child Abuse & Neglect, 47*, 102-118.

Wheeler, B.Y., McGough, D., & Goldfarb, F. (2013). The Exceptional Family Member Program: Helping special needs children in military families. In A. Rubin, E.L. Weiss, & J.E. Coll, (Eds.) *Handbook of Military Social Work (pp. 359-381).* Hoboken, NJ: Wiley & Sons, Inc.

**Review these websites:**

<http://www.myarmyonesource.com/familyprogramsandservices/default.aspx>

<https://www.jointservicessupport.org/fp/default.aspx>

**Recommended Reading**

Department of the Air Force. (2015). *Air Force Instruction 40-301: Family Advocacy Program.* .

Department of the Army. (2011). *Army Regulation 608-18: The Family Advocacy Program*.

Lutgendorf, M. A., Snipes, M. A., Rau, T., Busch, J. M., Zelig, C. M., & Magann, E. F. (2012). Reports to the navy's family advocacy program: Impact of removal of mandatory reporting for domestic violence. *Military Medicine, 177*(6), 702-708. doi:10.7205/MILMED-D-11-00436

| **Unit 6: DoD Policy/Programs and the Social Worker: Substance and Alcohol Abuse/Suicide/PTSD/TBI** |  |
| --- | --- |
| **Topics** | |
| * Alcohol and Substance Abuse Program (ASAP) * Suicide * Post-Traumatic Stress Disorder * Traumatic Brain Injury | |

This unit relates to course objectives 2, 3, 4 and 5.

### Required Reading

Congressional Research Service. (2013). *Post-traumatic stress disorder and other mental health problems in the military. CRS report.*

Olenick, M., Flowers, M., & Diaz, V. (2015). US veterans and their unique issues: Enhancing health care professional awareness. *6*, 635-639.

**Recommended Readings**

Barlas, F. M., Higgins, W. B., Pflieger, J. C., & Diecker, K. (2013). *2011 Health Related Behaviors Survey of Active Duty Personnel.* Washington, DC: U.S. Department of Defense. Access at <http://www.murray.senate.gov/public/_cache/files/889efd07-2475-40ee-b3b0-508947957a0f/final-2011-hrb-active-duty-survey-report.pdf> (SKIM)

Department of Defense. (2014). *Problematic Substance Use by DOD Personnel.* Number 1010.04. Retrieved from <http://www.dtic.mil/whs/directives/corres/pdf/101004p.pdf>.

Department of Defense (2015). *Department of Defense Strategy of Suicide Prevention.* Retrieved from <http://www.dspo.mil/Portals/113/Documents/TAB%20B%20-%20DSSP_FINAL%20USD%20PR%20SIGNED.PDF> (Read Sections 1 and 2).

Hanwella, R., Silva, V. A., & Jayasekera, N. E. (2012). Alcohol use in a military population deployed in combat areas: A cross sectional study. *Substance Abuse Treatment, Prevention, and Policy, 7*(24), 1-7.

Institute of Medicine (IOM). (2012). *Substance use disorders in the U.S. armed forces.* (Read Chapter 6, pp. 137-183.) Washington, DC: National Academies Press.

Miech, R. A., London, A. S., Wilmoth, J. M., & Koester, S. (2013). The effects of the military's antidrug policies over the life course: The case of past-year hallucinogen use. *Substance use & Misuse, 48*(10), 837-853. doi:10.3109/10826084.2013.800120

Moore, M. (2013). Mild traumatic brain injury: Implications for social work research and practice with civilian and military populations. *Social Work in Health Care, 52*(5), 498-518.

Yarvis, J. (2013). Posttraumatic stress disorder (PTSD) in veterans. In A. Rubin, E. Weiss, & J. Coll (Eds.), *Handbook of military social work* (pp. 81-97). Hoboken, NJ: Wiley.

Walton, T. O., Walker, D. D., Kaysen, D. L., Roffman, R. A., Mbilinyi, L., & Neighbors, C. (2013). Reaching soldiers with untreated substance use disorder: Lessons learned in the development of a marketing campaign for the warrior check-up study. *Substance use & Misuse, 48*(10), 908-921. doi:10.3109/10826084.2013.797996.

| **Unit 7: DoD Policy/Programs and the Social Worker: Sexual Assault Prevention and Response.** |  |
| --- | --- |

**Topics**

* Military Sexual Assaults
* SAPR

This unit relates to course objectives 1, 2, 3, and 4.

**Required Readings**

Castro, C. A., Kintzle, S., Schuyler, A. C., Lucas, C. L., & Warner, C. H. (2015). Sexual assault in the military. *Current Psychiatry Reports, 17*(7), 1-13. doi:10.1007/s11920-015-0596-7

Department of Defense. (2015). *Sexual Assault Prevention and Response Program Procedures.* Retrieved from <http://www.dtic.mil/whs/directives/corres/pdf/649502p.pdf>. (SKIM)

National Defense Research Institute. (2014). Top-Line estimates for active-duty service members from the 2014 RAND military workplace study. Sexual Assault and Sexual Harassment in the U.S. military. (Read pages 9-30). Retrieved from <http://www.rand.org/content/dam/rand/pubs/research_reports/RR800/RR870/RAND_RR870.pdf>.

Review this website: <http://www.sapr.mil/>

**Recommended Readings**

Sexual assault in the military: Sexual misconduct and the culture of the U.S. armed forces. (2013). *Congressional Digest, 92*(8), 1.

U.S. Commission on Civil Rights. (2013). *Sexual Assault in the Military.* Retrieved from <http://www.usccr.gov/pubs/09242013_Statutory_Enforcement_Report_Sexual_Assault_in_the_Military.pdf>

| **Unit 8: Combat Healthcare** |  |
| --- | --- |

* Military medicine
* Casualty Care
* Resilience

**Required Readings**

Department of the Air Force. (2014). *TTP 3-42.71, Expeditionary Medical Support (EMEDS) and Air Force Theater Hospital (AFTH).* (SKIM).

Litz, B. T. (2014). Resilience in the aftermath of war trauma: A critical review and commentary. *Interface Focus, 4*(5), 20140008-20140008. doi:10.1098/rsfs.2014.0008

Kellerman, A. L. & Elster, E. (Eds.) (2017). *Out of the Crucible: How the US Military Transformed Combat Casualty Care in Iraq and Afghanistan*. Department of Defense, Department of the Army, Borden Institute. (Read pp. 53-82).

Spelman, J., Hunt, F., Seal, S., & Burgo-Black, C. (2012). Post Deployment Care for Returning Combat Veterans. *Journal of General Internal Medicine,* *27*(9), 1200-1209.

Review these websites:

<http://militarymedic.com/combat-support-hospital/>

<http://www.airforcemedicine.af.mil/>

<http://www.med.navy.mil/Pages/default.aspx>

**Recommended Readings**

Blackbourne, L. H., Baer, D. G., Eastridge, B. J., Renz, E. M., Chung, K. K., Dubose, J.. . Holcomb, J. B. (2012). Military medical revolution: Deployed hospital and en route care. *The Journal of Trauma and Acute Care Surgery, 73*(6 Suppl 5), S378-S387. doi:10.1097/TA.0b013e3182754900

Donohue, J., H J. (1992). A combat support hospital in the gulf war. *Physician Executive, 18*(1), 29.

Gibbons, S. W., Shafer, M., Aramanda, L., Hickling, E. J., & Benedek, D. M. (2014). Combat health care providers and resiliency: Adaptive coping mechanisms during and after deployment. *Psychological Services, 11*(2), 192-199.

Hatzfeld, J. J., Dukes, S., & Bridges, E. (2014). Innovations in the en route care of combat casualties. *Annual Review of Nursing Research, 32*, 41.

Harvis, L. H. (2010). *Rescue from chaos: USAF responds to disaster in Haiti.* Dog Ear Publishing.

Johannigman, J. (2008). Maintaining the continuum of en route care. *Critical Care Medicine, 36*(7 Suppl), S377-S382. doi:10.1097/CCM.0b013e31817e31e1

Mitka, M. (2013). Combat casualty care research. *Journal of the American Medical Association, 309*(14), 1452. doi:10.1001/jama.2013.3559

Owens, B. D., Kragh, J., John F, Wenke, J. C., Macaitis, J., Wade, C. E., & Holcomb, J. B. (2008). Combat wounds in operation iraqi freedom and operation enduring freedom. *The Journal of Trauma: Injury, Infection, and Critical Care, 64*(2), 295-299. doi:10.1097/TA.0b013e318163b875

Sorbero, M. E., Olmsted, S. S., Morganti, K. G., Burns, R. M., Haas, A. C., & Biever, K. (2013). *Improving the deployment of army health care professionals: An evaluation of PROFIS.* RAND Corporation.

| **Unit 9: VA Programs and the Social Worker** |  |
| --- | --- |
| **Topics** | |
| * Homelessness * Vocational Rehabilitation * Patient and Family * Veteran Courts * The GI Bill | |

This unit relates to course objectives 3, 4 and 5.

### Required Readings

Balshem, H., Christensen, V. A., Tuepker, A. (2011). *A critical review of the literature regarding homelessness among veterans*. Washington, DC: Department of Veterans Affairs, Veterans Health Administration, Health Services Research & Development Service. (Read the Executive Summary.)

Gundlapalli, A. V., Fargo, J. D., Metraux, S., Carter, M. E., Samore, M. H., Kane, V., & Culhane, D. P. (2015). Military misconduct and homelessness among US veterans separated from active duty, 2001-2012. *JAMA, 314*(8), 832-834.

Katz, I. R. (2012). Geriatric psychiatry in the department of veterans affairs: Serving the needs of aged and aging veterans. *The American Journal of Geriatric Psychiatry,* 20(3), 195-198.

Roberts, J. (2013). Navigating systems of care. In A. Rubin, E. Weiss, & J. Coll (Eds.), *Handbook of military social work* (pp. 271-280). Hoboken, NJ: Wiley.

Review this website: <http://www.benefits.va.gov/gibill/>

Review this website: <https://www.va.gov/oig/>

**Recommended Readings**

Altschuler, G. C., Blumin, S. M. (2009). *The GI bill: A new deal for veterans*. New York: Oxford University Press.

Belanger, H. G., Uomoto, J. M., & Vanderploeg, R. D. (2009). The veterans health administration system of care for mild traumatic brain injury: Costs, benefits, and controversies. *The Journal of Head Trauma Rehabilitation, 24*(1), 4-13. doi:10.1097/HTR.0b013e3181957032

Bradley, M. H. (2010). *Veterans' benefits and care*. Hauppauge, N.Y: Nova Science Publishers.

Slattery, M., Dugger, M. T., Lamb, T. A., & Williams, L. (2013). Catch, treat, and release: Veteran treatment courts address the challenges of returning home. *Substance use & Misuse, 48*(10), 922-932. doi:10.3109/10826084.2013.797468

United States. Government Accountability Office. (2012). *Recovering servicemembers and veterans: Sustained leadership attention and systematic oversight needed to resolve persistent problems affecting care and benefits: Report to congressional committees*. Washington, D.C.: United States Government Accountability Office.

| **Unit 10: Non-profits and Veterans Advocacy Groups** |  |
| --- | --- |
| **Topics** | |
| * What is a non-profit? * Organization and role of non-profits as veteran support organizations * Influence and impact of veteran advocacy groups | |

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

### Required Reading

Stone, F. P. (2017). Veterans and civic engagement. In Hicks, L., Weiss, E. L. & Coll, J. E. (Eds.) *The civilian lives of US veterans: Issues and identities (2 volumes)* (pp. 181-199)*.* Santa Barbara, CA: Praeger.

Tanielian, T., Martin, L., & Epley, C. (2014). *Enhancing Capacity to Address Mental Health Needs of Veterans and Their Families: The Welcome Back Veterans Initiative*. Retrieved from http://search.proquest.com/docview/1820787037/

Wilson, C. E. (2013). Leadership, collaboration, and Veterans‐Related nonprofit organizations. *Journal of Leadership Studies, 7*(1), 48-53. doi:10.1002/jls.21279

Zacchea, M. (2013). Veteran’s advocacy: Social justice and healing through activism. In R. M. Scurfield & K. T. Platoni (Eds.), *Healing war trauma: A handbook of creative approaches* (Chapter 3, pp. 30-44). New York, NY: Taylor & Francis.

Review these websites:

<http://servicewomen.org/>

<http://www.militaryreligiousfreedom.org/appeal-2015/appeal.html>

<http://www.militaryfamily.org/about-us/>

<http://www.woundedwarriorproject.org/>

**Recommended Reading**

Balassiano, K., & Chandler, S. M. (2010). The emerging role of nonprofit associations in advocacy and public policy: Trends, issues, and prospects. *Nonprofit and Voluntary Sector Quarterly, 39*(5), 946-955. doi:10.1177/0899764009338963

Boris, E. T. (2012). Introduction—Nonprofit organizations in a democracy: Varied roles and responsibilities. In E. T. Bois & Steuerle, C. E. (Eds.) *Nonprofits & government: Collaboration & conflict* (2nd ed.). Washington, D.C: Urban Institute Press.

Levasseur, D. G. (2005). The role of public opinion in policy argument: An examination of public opinion rhetoric in the federal budget process. *Argumentation and Advocacy*, 41, 64-79.

| **Unit 11: The Military Transition** |  |
| --- | --- |
| **Topics** | |
| * Military Transition Theory * Individual and role of DoD and VA in the transition process * Role of the community in the transition process | |

This unit relates to course objectives 1, 3 and 5.

### Required Reading

Castro, C. A., Kintzle, S. & Hassan, A. (2014). *The state of the American veteran: The Los Angeles country veterans study.* USC School of Social Work: Center for Innovation and Research on Veterans & Military Families. (SKIM).

Congressional Budget Office. (2014) *Veterans’ Disability Compensation: Trends and Policy Options. Congress of the United States.* Retrieved from <https://www.cbo.gov/sites/default/files/113th-congress-2013-2014/reports/45615-VADisability_2.pdf>.

Heflin, C. M., Hodges, L. B., & London, A. S. (2017). TAPed out: A study of the Department of Defense Transition Assistance Program. In Hicks, L., Weiss, E. L. & Coll, J. E. (Eds.) *The civilian lives of US veterans: Issues and identities (2 volumes)* (pp. 61-90)*.* Santa Barbara, CA: Praeger.

Robertson, H., & Brott, P. (2014). Military veterans’ midlife career transition and life satisfaction. *The Professional Counselor, 4*(2), 139-149. doi:10.15241/hcr.4.2.139

### Recommended Reading

Amdur, D., Batres, A., Belisle, J., Brown, J. H., Cornis-Pop, M., Mathhewson-Chapman, M….Washam, T. (2012). VA integrated post-combat care: a systematic approach to caring for returning veterans. In Beder, J. (Ed.), *Advances in social work practice with the military* (Chapter 16, pp. 253-262). New York: Routledge. doi:10.4324/9780203825747

Buddin, R. & Kapur, K. (2005). An analysis of military disability compensation. Santa Monica, CA: RAND. Retrieved from <http://www.rand.org/pubs/monographs/MG369.html> (Read Chapters 1 and 2).

Burnett-Zeigler, I., Valenstein, M., Ilgen, M., Blow, A. J., Gorman, L. A., & Zivin, K. (2011). Civilian employment among recently returning Afghanistan and Iraq national guard veterans. *Military Medicine, 176*(6), 639-646. doi:10.7205/MILMED-D-10-00450

Castro, C. A. (2014). The US framework for understanding, preventing, and caring for the mental health needs of service members who served in combat in Afghanistan and Iraq: A brief review of the issues and the research. *European Journal of Psychotraumatology, 5*, 1-12. doi:10.3402/ejpt.v5.24713

Congressional Research Service. (2019). *Military retirement: Background and recent developments.* Retrieved from <https://fas.org/sgp/crs/misc/RL34751.pdf>.

Department of the Army (2012). *Physical evaluation for retention, retirement, or separation.* Army Regulation 635-40.

Hazle, M., Wilcox, S.L., & Hassan, A.M. (2012). Helping veterans and their families fight on! Advances in Social Work, 13(1), 229-242.

Heaton, P., Loughran, D. S., & Miller, A. R. (2012). *Compensating wounded warriors: An analysis of injury, labor market earnings, and disability compensation among veterans of the Iraq and Afghanistan wars*. Santa Monica, Calif: RAND. doi:10.7249/mg1166osd

Hudak, R. P., Morrison, C., Carstensen, M., Rice, J. S., & Jurgersen, B. R. (2009). The U.S. army wounded warrior program (AW2): A case study in designing a nonmedical case management program for severely wounded, injured, and ill service members and their families. *Military Medicine, 174*(6), 566-571. doi:10.7205/MILMED-D-04-0408

Institute of Medicine (2010). *Returning home from iraq and afghanistan: Preliminary assessment of readjustment needs of veterans, service members, and their families*. Washington, D.C: National Academies Press.

Muller, L. S., Early, N. & Ronca, J. (2014). Veterans who apply for social security disability worker benefits after receiving a department of veterans affairs rating of “total disability” for service-connected impairments: characteristics and outcomes. *Social Security Bulletin, 74*, No. 3. Retrieved from <http://www.ssa.gov/policy/docs/ssb/v74n3/v74n3p1.html>.

Panangala, S.V. & Jansen, D.J. (2011). *TRICARE and VA health care: Impact of the patient protection and affordable care act (PPACA).* Congressional Research Service. Retrieved from <http://www.ncsl.org/documents/health/TRICARE&VA_PPACA.pdf>.

Scott, C., Panangala, S.V. & Henning, C. A. (2010). Disability evaluation of military service members. In M. H. Bradley (Ed.), *Veterans' benefits and care* (Chapter 6, pp. 123-142). Hauppauge, N.Y: Nova Science Publishers.

Veterans Administration (2014). Federal Benefits for Veterans, Dependents, and Survivors. <http://www.va.gov/opa/publications/benefits_book/2014_Federal_Benefits_for_Veterans_English.pdf>

Wilcox, S. L., Oh, H., Redmond, S. A., Chicas, J., Hassan, A. M., Lee, P., & Ell, K. (2015). A scope of the problem: Post-deployment reintegration challenges in a National Guard unit. *Work (Reading, Mass.), 50*(1), 73-83.

Wilcox, S. L., Redmond, S., & Hassan, A. M. (2014). Sexual functioning in military personnel: Preliminary estimates and predictors. *The Journal of Sexual Medicine, 11*(10), 2537-2545. doi:10.1111/jsm.12643

William, M. B. (2013). Slogging the bog of war to return to the world of work. In R. M. Scurfield & K. T. Platoni (Eds.), *Healing war trauma: A handbook of creative approaches* (Chapter 18, pp. 273-286). New York, NY: Taylor & Francis.

Wolpert, D. S. (2000). Military retirement and the transition to civilian life. In J. A. Martin, L. N. Rosen, & L. R. Sparacino (Eds.). *The military family: A practice guide for human service providers* (pp. 103-122). Westport, CT: Praeger.

| **Unit 12: Military Social Work and Ethics/Diversity** |  |
| --- | --- |
| **Topics** | |
| * Challenges of Military Social Work * Ethical Challenges * LGBTQI in the military * Race and ethnicity issues in the military * Gender, Sex, and the Military | |

This unit relates to course objectives 2, 3, 4 and 5.

**Required Reading**

Belkin, A., Ender, M. G., Frank, N., Furia, S. R., Lucas, G., Packard, G., & Segal, D. R. (2013). Readiness and DADT repeal: Has the new policy of open service undermined the military? *Armed Forces & Society, 39*(4), 587-601.

Burk, J., & Espinoza, E. (2012). Race relations within the U.S. military. *Annual Review of Sociology, 38*, 401-422. Congressional Research Service **(**7-5700), R40795.

Daley, J. (2013). Ethical decision making in military social work. In A. Rubin, E. Weiss, & J. Coll (Eds.), *Handbook of military social work* (pp. 51-66). Hoboken, NJ: Wiley.

Matthews, M. & Lim, N. (2015). *Improving the timeliness of equal employment opportunity complaint processing in department of defense*. Santa Monica, Calif: RAND Corporation. (Read the Summary and Chapter 2).

Simmons, C. A., & Rycraft, J. R. (2010). Ethical challenges of military social workers serving in a combat zone. *Social Work, 55*(1), 9-18.

Review the videos at this website: <https://www.voanews.com/a/reflections-on-race-unity-inclusion-within-us-military/4257160.html>

**Recommended Reading**

Hall, J. C. (2009). Utilizing social support to conserve the fighting strength: Important considerations for military social workers. *Smith College Studies in Social Work, 79*(3/4), 335-343*.*

Jeffrey, T. B., Rankin, R. J., & Jeffrey, L. K. (1992). In service of two masters: The ethical-legal dilemma faced by military psychologists. *Professional Psychology: Research and Practice, 23*(2), 91-95. (Classic reading)

Tallant, S. H., & Ryberg, R. A. (1999). Common and unique ethical dilemmas encountered by military social workers. In J. G. Daley (Ed.), *Social work practice in the military* (pp. 179-187). New York: Haworth Press.

Truhon, S. A. (2008). Equal opportunity climate in the United States military: Are differences in the eye of the beholder? *European Journal of Work and Organizational Psychology, 17*(1), 153-169. doi:10.1080/13594320701643535

**University Policies and Guidelines**

# 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](mailto: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.

# Statement on Academic Conduct and Support Systems

**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 Part B, Section 11, “Behavior Violating University Standards” [policy.usc.edu/scampus-part-b](https://policy.usc.edu/scampus-part-b/). Other forms of academic dishonesty are equally unacceptable. See additional information in SCampus and university policies on scientific misconduct, [policy.usc.edu/scientific-misconduct](http://policy.usc.edu/scientific-misconduct).

**Support Systems:**

*Counseling and Mental Health - (213) 740-9355 – 24/7 on call*

[studenthealth.usc.edu/counseling](https://studenthealth.usc.edu/counseling/)

Free and confidential mental health treatment for students, including short-term psychotherapy, group counseling, stress fitness workshops, and crisis intervention.

National Suicide Prevention Lifeline - 1 (800) 273-8255 – 24/7 on call

[suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org/)

Free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

Relationship and Sexual Violence Prevention Services (RSVP) - (213) 740-9355(WELL), press “0” after hours – 24/7 on call

[studenthealth.usc.edu/sexual-assault](https://studenthealth.usc.edu/sexual-assault/)

Free and confidential therapy services, workshops, and training for situations related to gender-based harm.

*Office of Equity and Diversity (OED) - (213) 740-5086 | Title IX – (213) 821-8298*

[equity.usc.edu](https://equity.usc.edu/), [titleix.usc.edu](http://titleix.usc.edu)

Information about how to get help or help someone affected by harassment or discrimination, rights of protected classes, reporting options, and additional resources for students, faculty, staff, visitors, and applicants.

*Reporting Incidents of Bias or Harassment - (213) 740-5086 or (213) 821-8298*

[usc-advocate.symplicity.com/care\_report](https://usc-advocate.symplicity.com/care_report/)

Avenue to report incidents of bias, hate crimes, and microaggressions to the Office of Equity and Diversity |Title IX for appropriate investigation, supportive measures, and response.

*The Office of Disability Services and Programs - (213) 740-0776*

[dsp.usc.edu](http://dsp.usc.edu/)

Support and accommodations for students with disabilities. Services include assistance in providing readers/notetakers/interpreters, special accommodations for test taking needs, assistance with architectural barriers, assistive technology, and support for individual needs.

*USC Campus Support and Intervention - (213) 821-4710*

[campussupport.usc.edu](https://campussupport.usc.edu/)

Assists students and families in resolving complex personal, financial, and academic issues adversely affecting their success as a student.

*Diversity at USC - (213) 740-2101*

[diversity.usc.edu](https://diversity.usc.edu/)

Information on events, programs and training, the Provost’s Diversity and Inclusion Council, Diversity Liaisons for each academic school, chronology, participation, and various resources for students.

*USC Emergency - UPC: (213) 740-4321, HSC: (323) 442-1000 – 24/7 on call*

[dps.usc.edu](http://dps.usc.edu/), [emergency.usc.edu](http://emergency.usc.edu/)

Emergency assistance and avenue to report a crime. Latest updates regarding safety, including ways in which instruction will be continued if an officially declared emergency makes travel to campus infeasible.

*USC Department of Public Safety - UPC: (213) 740-6000, HSC: (323) 442-1200 – 24/7 on call*

[dps.usc.edu](http://dps.usc.edu/)

# Support Systems

*Student Counseling Services (SCS) – (213) 740-7711 – 24/7 on call*

Free and confidential mental health treatment for students, including short-term psychotherapy, group counseling, stress fitness workshops, and crisis intervention. [engemannshc.usc.edu/counseling](https://engemannshc.usc.edu/counseling)

*National Suicide Prevention Lifeline – 1 (800) 273-8255*

Provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org/)

*Relationship and Sexual Violence Prevention Services (RSVP) – (213) 740-4900 – 24/7 on call*

Free and confidential therapy services, workshops, and training for situations related to gender-based harm. [engemannshc.usc.edu/rsvp](https://engemannshc.usc.edu/rsvp/)

*Sexual Assault Resource Center*

For more information about how to get help or help a survivor, rights, reporting options, and additional resources, visit the website: [sarc.usc.edu](http://sarc.usc.edu/)

*Office of Equity and Diversity (OED)/Title IX Compliance – (213) 740-5086*

Works with faculty, staff, visitors, applicants, and students around issues of protected class. [equity.usc.edu](http://equity.usc.edu/)

*Bias Assessment Response and Support*

Incidents of bias, hate crimes and micro aggressions need to be reported allowing for appropriate investigation and response. [studentaffairs.usc.edu/bias-assessment-response-support](https://studentaffairs.usc.edu/bias-assessment-response-support/)

*The Office of Disability Services and Programs*

Provides certification for students with disabilities and helps arrange relevant accommodations. [dsp.usc.edu](http://dsp.usc.edu/)

*USC Support and Advocacy (USCSA) – (213) 821-4710*

Assists students and families in resolving complex issues adversely affecting their success as a student EX: personal, financial, and academic. [studentaffairs.usc.edu/ssa](https://studentaffairs.usc.edu/ssa/)

*Diversity at USC*

Information on events, programs and training, the Diversity Task Force (including representatives for each school), chronology, participation, and various resources for students. [diversity.usc.edu](https://diversity.usc.edu/)

*USC Emergency Information*

Provides safety and other updates, including ways in which instruction will be continued if an officially declared emergency makes travel to campus infeasible. [emergency.usc.edu](http://emergency.usc.edu)

*USC Department of Public Safety – UPC: (213) 740-4321 – HSC: (323) 442-1000 – 24-hour emergency or to report a crime.* Provides overall safety to USC community. [dps.usc.edu](http://dps.usc.edu/)

# Additional Resources

Students enrolled in the Virtual Academic Center can access support services for themselves and their families by contacting Perspectives, Ltd., an independent student assistance program offering crisis services, short-term counseling, and referral 24/7.  To access Perspectives, Ltd., call 800-456-6327.

# 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.”

# 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.

# 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.

# Code of Ethics of the National Association of Social Workers (Optional)

*Approved by the 1996 NASW Delegate Assembly and revised by the 2017 NASW Delegate Assembly* [*https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English*](https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English)

## Preamble

The primary mission of the social work profession is to enhance human well-being 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 well-being in a social context and the well-being 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.

# Academic Dishonesty Sanction Guidelines

Some lecture slides, notes, or exercises used in this course may be the property of the textbook publisher or other third parties. All other course material, including but not limited to slides developed by the instructor(s), the syllabus, assignments, course notes, course recordings (whether audio or video) and examinations or quizzes are the property of the University or of the individual instructor who developed them. Students are free to use this material for study and learning, and for discussion with others, including those who may not be in this class, unless the instructor imposes more stringent requirements. Republishing or redistributing this material, including uploading it to web sites or linking to it through services like iTunes, violates the rights of the copyright holder and is prohibited. There are civil and criminal penalties for copyright violation. Publishing or redistributing this material in a way that might give others an unfair advantage in this or future courses may subject you to penalties for academic misconduct.

# Complaints

If you have a complaint or concern about the course or the instructor, please discuss it first with the instructor. If you feel cannot discuss it with the instructor, contact the chair of the [xxx]. If you do not receive a satisfactory response or solution, contact your advisor and/or Associate Dean and MSW Chair Dr. Leslie Wind for further guidance.

1. **Tips for Maximizing Your Learning Experience in this Course (Optional)**

* 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.*