



Argosy University

Doctoral Program in Clinical Psychology

PP 7330 Child and Adolescent Psychopathology

Spring, 2009

Instructor: Deanna Reardon, Psy.D.

Campus: San Francisco Bay Area

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Office Hours: Monday: 11:30- 1:30; Tuesday: 2:30- 4:00; Wednesday: 12:30-1:00, 2:30-4:00; Thursday: 1:30-3:00

Course Length: 15 weeks

Contact Hours: 45 hours

Credit value: 3.0

Course Description:

This course examines the major psychopathologies of childhood. Various theories of the etiologies of child psychopathology are considered, and the implications for diagnosis, consultation, and treatment are also addressed.

Course Purpose:

This course is designed to provide students with an overview of child and adolescent disorders. We will use a developmental/relational lens to view child psychopathology and learn to differentiate between problems lodged inside the child, from reactive or situational symptoms. We will discuss personality and symptoms patterns, and look in depth into disorders commonly encountered in children and adolescents. Multicultural issues in working with diverse populations and empirically validated treatments will also be discussed.

Course Objectives:

By the time you complete this course, you will be able to:

1. Develop a framework for systematic observation of children.
2. Identify developmental, chronological and phase appropriate behaviors in children.
3. Describe how to conduct a clinical interview with children and their parents.
4. Identify and describe disorders commonly seen in children and adolescents.

5. Describe the intersection between class, culture and race on development and parenting.
6. Differentially diagnose and conceptualize disorders in children and adolescents.
7. Develop assessments for children that incorporate developmental, family, system and cultural perspectives.
8. Discuss the influence of culture in developing assessments and treatments.
9. Identify and discuss evidence-based research for therapeutic change in working with children and adolescents.
10. Discuss and describe treatment approaches and types of therapy with children.

Program Outcomes, Competencies and Objectives

***Goal 1:** The preparation of professionals who are capable of delivering effective and ethical diagnostic and assessment services to a diverse set of clients.*

***Objective a:** Students will acquire an understanding of the current body of knowledge in psychopathology and diagnosis.*

***Competency:** Students must be able to demonstrate an understanding of psychopathology and diagnosis.*

***Objective b:** Students will acquire an understanding of, and demonstrate competence in, a variety of therapeutic methodologies, including empirically supported therapeutic interventions.*

***Competency:** Students will acquire an understanding of, and demonstrate competence in, a variety of therapeutic methodologies, including empirically supported therapeutic interventions. Students will demonstrate familiarity with evidence-based research relevant to the therapy models.*

***Objective d:** Students will acquire an understanding of the current body of knowledge regarding how issues of diversity affect the practice of assessment.*

***Competency:** Students must demonstrate knowledge of diverse cultural groups and demonstrate skills in assessment and diagnosis that include an understanding of diversity.*

Required Texts:

DSM IV. (1994). Washington, D.C. American Psychiatric Association.

Greenspan, Stanley (2003). *The Clinical Interview of the Child, 3rd Edition*. Washington, DC and London: American Psychiatric Publishing, Inc. isbn-1-58562-137-4

Haddon. M. (2003). *Curious Incident of the Dog in the Nighttime*. New York: Random House. Isbn 1-4000-3271-7

Required Readings: Course Reader available at Copy Central 1553 Solano Ave. 510-527-5800.

1. PDM Task Force (2006) Classification of child and adolescent mental health disorders. *Psychodynamic Diagnostic Manual* (175-231; 233-296; 319-379) Silver Spring, MD: Alliance of Psychoanalytic Organizations.
2. Bashe, P.R. (2001) What is asperger syndrome?; What asperger's syndrome looks like; How asperger syndrome is diagnosed. *The Oasis Guide to Asperger Syndrome: Advice, Support, Insights & Inspiration* (1-49) NY,NY: Crown Publishers.
3. Alvarez, A. (1992) Autism: the controversies; Rites and rituals in autism. *Live Company: Psychoanalytic Psychotherapy with Autistic, Borderline, Deprived and Abused Children*. (184-223) London: Routledge.
4. Levine, M. (1987) Attention deficits: the diverse effects of weak control systems in childhood. *Pediatric Annals*: 16(2) 233-241.
5. Levine, J. & Levine, R. (1986) Projective techniques with children in the clinic setting. In A. Rabin (ed.) *Projective Techniques for Adolescents & Children*. (323-330) Springer Publishing Co.
6. Papolos, D.F. and Papolos, J. (1999) Voices from the front; The Diagnostic dilemma. *The Bipolar Child: The Definitive and Reassuring Guide to Childhood's Most Misunderstood Disorder*. (3-26; 27-54) New York: Broadway Books.
7. Bloch, H.S. (1995) The developmental process during adolescence. *Adolescent Development, Psychopathology & Treatment* (139-191) International Universities Press.
8. Bruch, H. (2001) The hunger disease; The anorexic stance. *The Golden Cage: The Enigma of Anorexia Nervosa*. (1-21; 72-90)Cambridge, Mass: Harvard University Press.
9. Lock, J. (2001) Introduction and background information on anorexia nervosa; Family treatment for anorexia nervosa. *Treatment Manual for Anorexia Nervosa: A Family-Based Approach*. (1-12; 13-30) NY, NY: The Guilford Press.
10. Suberri, K. (1987) Children and different cultural backgrounds. In A. Thomas & J Grimes *Children's Needs: Psychological Perspectives*. (167-172) National Association of School Psychologists.
11. Flanagan, D. & Miranda. A. (1994) Best practices in working with culturally different families. *Children's Needs* (1049-1060) National Association of School Psychologists.
12. Birmaher, B. (2007) Practice parameter for the assessment and treatment of children and adolescents with depressive disorders. *Journal of American Academic Child Adolescent Psychiatry*, 46:11, 1503-1526.

13. Holmbeck, G, Greenley R.N., & Franks, E. (2003) Developmental issues and considerations in research and practice. In J. Norcross, L. Beutler, & R. Levant (Eds.) *Evidence-Based Practices in Mental Health* (21-41) Washington, D.C.: The Guilford Press
14. Fox, G. (2006) Development in family contexts. In L. Combrinck-Graham *Children in Family Contexts: Perspectives on Treatment*. (26-50) New York, NY: The Guilford Press
15. Lawrence, E. (2006) Guidelines for a family assessment protocol. In L. Combrinck-Graham *Children in Family Contexts: Perspectives on Treatment*. (52-70) New York, NY: The Guilford Press
16. Camino, I. & Spurlock, J. (2000) History taking: the influence of culture on diagnosis. *Culturally Diverse Children and Adolescents: Assessment, Diagnosis and Treatment, Second Edition*. (47-83) New York, NY: The Guilford Press
17. Greenspan, S. & Wieder, S. (2006) Assessment. *Infant and Early Childhood Mental Health: A Comprehensive Developmental Approach to Assessment and Intervention*.(41-63) Arlington, VA.: American Psychiatric Publishing, Inc.
18. Gibbs, J.T. & Huang, L. (2003) Introduction and overview: a conceptual framework for the psychological assessment and treatment of minority youth. *Children of Color: Psychological Interventions with Culturally Diverse Youth*. (31-39) San Francisco, CA.: Jossey-Bass.
19. Greenspan, S. & Wieder, S. (2006) A model for comprehensive prevention and early intervention services for all families. *Infant and Early Childhood Mental Health: A Comprehensive Developmental Approach to Assessment and Intervention*.(333-363) Arlington, VA.: American Psychiatric Publishing, Inc.
20. Faul, L. & Gross, A. (2006) Diagnosis and classification. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (3-15) Hoboken, NJ: John Wiley & Sons.
21. Dick, D. & Todd, R. (2006) Genetic contributions. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (16-28) Hoboken, NJ: John Wiley & Sons.
22. Brumback, R. & Coffey, C. (2006) Neuropsychiatric contributions. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (29-37) Hoboken, NJ: John Wiley & Sons.
23. Donohue, B., Romero, V. & Devore, G. (2006) Cognitive and behavioral contributions. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (38-46) Hoboken, NJ: John Wiley & Sons.
24. Wade, R. & Cairney, J. (2006) Sociological contributions. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (47-63) Hoboken, NJ: John Wiley & Sons.

25. Calkins, S. & Degnan, K. (2006) Temperament in early development. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (64-84) Hoboken, NJ: John Wiley & Sons.
26. Gleason, M. & Zeanah, C. (2006) Infant mental health. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (85-99) Hoboken, NJ: John Wiley & Sons.
27. Kuperminc, G. & Brookmeyer, K. (2006) Developmental psychopathology. In *Comprehensive Handbook of Personality and Psychopathology: Child Psychopathology*, Vol. 3. (100-116) Hoboken, NJ: John Wiley & Sons.
28. Smith, B., Barkley, R. & Shapiro, C. (2006) Attention-deficit hyperactivity disorder. In E. Mash & R. Barkley *Treatment of Childhood Disorders*, Third Edition. (65-136) NY, NY: The Guilford Press.
29. Stark, K., Sander, J., Hauser, M., Simpson, J., Schnoebelen, S, Glenn, R. & Molnar, J. (2006) Depressive disorders during childhood and adolescence. . In E. Mash & R. Barkley *Treatment of Childhood Disorders*, Third Edition. (336-407) NY, NY: The Guilford Press.
30. Achenbach, T. & Rescorla, L. (2007) Why Should we do multicultural research on children's problems? Contributions of multicultural research to understanding, assessing, preventing and treating child psychopathology. *Multicultural Understanding of Child and Adolescent Psychopathology: Implications for Mental Health Assessment*. (1-12; 273-282) NY, NY: The Guilford Press.
31. Nader, K. (2008) *Understanding and Assessing Trauma in Children and Adolescents: Measures, Methods, and Youth in Context*. (chapters to be determined) NY, NY: Routledge.

Course Policies

Attendance: Regular attendance is mandatory. This is to maximize your own learning and to respect your classmates. The effectiveness of our group depends on our relationships with one another, and relationship building requires consistency. In addition, presenting clinical work can be both a vulnerable and anxiety producing experience, and therefore requires a solid and consistent container. If you ever find it impossible to attend a class session, please inform me. Either leave a written message in my faculty mailbox or call my voicemail. If you have more than two (2) absences in this course, you risk receiving "no credit" for the course.

Active participation in class discussions and presentations is expected. You will be graded on the frequency and quality of your classroom participation in discussions of case material, readings and interaction with your peers. If I don't hear from you, I don't know what you are thinking and experiencing.

Behaving professionally. In class, you will demonstrate professional behavior by coming on time, being prepared for class, and turning in assignments on time. Since students will be presenting clinical material and are also likely to bring up personal and emotional issues, both respectful and non judgmental listening are expected. Please maintain confidentiality outside the classroom at all times.

Course Assignments

- (1) **Completion of assigned** readings as evidenced by participation in classroom discussions.

- (2) **Child or adolescent case presentation.** Provide a brief introduction to the client. Attempt to describe the patient so that they come to life; focus minimally on historical facts.
 - Who the person is: sex, age, ethnicity
 - What the problem is
 - A visual description, noting any behavioral characteristics
 - How long you've been seeing this person; how often.

Come prepared with process notes (I said...s/he said) for about 15 minutes of one session, or a detailed description of the play. These notes will be the most important part of your presentation.

Provide specific questions you would like the class to help you with, for example what difficulty is the patient having? Are you having? How do you feel about the patient? (troubling countertransference feelings). It's ok to present a case where you're not sure what's going on.

- (3) **Child observation, analysis and diagnosis.**

Observe a child with whom you do not have a previous relationship This is important so that you can remain as an observer and not involved in discussion or play with the child and/or his parent. Some settings you may choose to observe are in a classroom, a childcare center, a child unit at a hospital, a sport event or church. In most settings you will need to arrange in advance with the person in charge (principal, director, pastor) and the person whose group you will be observing to make sure it is ok for you to attend. Be pleasant, professional and as unobtrusive as possible. Do not discuss the observations with anyone.

Go to the observation site and watch for awhile. What is the atmosphere like:

calm? Chaotic? Structured? Note how many children and adults are present. What's happening in the environment? What relationships do you see? Is there evidence of comfort or tension, likes and dislikes, formal or hidden agendas? Jot down your observations.

Next, turn your attention to the child you are most interested in watching. Write down a brief description of the child; include any notable things in appearance or manner. Write down everything s/he does or says and how h/she looks in sequence. Keep your eyes on the child, not on the paper you are writing on. If the child is interacting with others, write the verbal and nonverbal responses where they occur in sequence. This is the running record of the behavior—what a video camera would record.

Organize and write up your data in the format discussed in class, including Greenspan's categories of analysis, as well as other factors from readings.

Your final paper should include the following elements:

a) a brief summary of the site you observed, noting answers to the questions above.

b) Mental Status Exam and observations of the child's play (Refer to handouts and case illustrations in Greenspan's Chapter 4.)

c) A comments section that provides an analysis of your observations, similar to the comments sections in Greenspan's Chapter 4.

d) A diagnosis, if any, a GAF, and a formulation similar to those in Green's chapter 6, pages 211ff. The purpose of this formulation is to describe the child's social, emotional and developmental functioning, as well as his/her defensive structure. Explain what you believe has contributed to the child's development and problems, if there are problems in behavior.

(4) Adolescent analysis and formulation

The purpose of this assignment is to give you an opportunity to analyze and formulate hypotheses about one adolescent's feelings, thoughts and behaviors. Source material may be taken from a fiction or non fiction book about an adolescent or therapy sessions you conduct with an adolescent. As you read about or work with the adolescent, use the class readings, discussions and the outline you developed for the child observation to guide your thinking.

Your final paper should include:

- a) a descriptive summary of the adolescent and his/her key issues and problems
- b) a discussion of the adolescent's emerging personality patterns, including examples.
- c) A diagnosis and formulation that explains what you believe has contributed to this person's development, identity and problems.

Grading Criteria:

10% Individual class participation

45% Child observation, analysis and formulation

45% Adolescent analysis and formulation

100%

Grades:

A = 93-100

A- = 90-92

B+ = 87-89

B = 83-86 B- = 80-82

C+ = 77-79 C = 73-76

F < 73

Grading Evaluation:

Individual class participation:

A = 90+ Active participation in all discussions. Nearly all comments are thought-provoking and incorporate material from assigned readings.

B = 80-89 Active participation in most discussions. Most comments are thought-provoking and incorporate material from assigned readings.

C = 70-79 Participation in more than 70% of discussions. Comments demonstrate surface level understanding of course topics.

F = <70 Participation in less than 70% of discussions. Comments did not demonstrate an understanding of course topics.

Child Observation, Analysis and Formulation

A = Detailed observation notes; comprehensive and accurate analysis of findings based on Greenspan's developmental guidelines and other course readings covering culture, multicultural issues, family and system influences; and concise, thoughtful and original formulation that summarizes your hypotheses about how this child developed into the person s/he is today. Paper is well-written, organized, logical and easy to read.

B = One aspect of the assignment, i.e. observation notes, analysis or formulation is not presented accurately or indepth OR paper is not well-written, organized, logical or easy to read.

C = One aspect of the assignment is not presented as required AND paper is not well-written, organized, logical or easy to read.

F = Two aspects of the assignment are not presented; paper is not well-written OR paper is not turned in.

Adolescent analysis and formulation

A = Paper includes detailed, accurate, comprehensive analysis and formulation of an adolescent; paper is well-written, logical, organized and easy to read.

B = Paper is missing an important part of the analysis OR formulation OR paper is not well-written, logical, organized and easy to read.

C = Paper is missing an important part of the analysis or formulation AND is not well-written, logical, organized and easy to read.

F = Analysis and formulation are not accurate or comprehensive; paper is not well-written, logical, organized and easy to read.

Class Topics, Readings and Assignments

Week	Class Topics and Assigned Readings	Activities
1	<i>Introduction</i>	Movie in class
2	<p><i>Assessment</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Greenspan (2003), Ch. 2,3,4 2. Faul & Gross (2006) Diagnosis and classification 3. Dick & Todd (2006) Genetic contributions 4. Brumback & Coffey (2006) Neuropsychiatric contributions 5. Donohue, Romero & Devore (2006) Cognitive and behavioral contributions 6. Wade & Cairney (2006) Sociological contributions 	Begin child observation
Week 3	<p><i>Assessment and Research</i></p> <p><i>Reading:</i></p> <ol style="list-style-type: none"> 1. Greenspan (2003) Ch. 5, 7 2. Holmbeck, Greenley & Franks (2003) Developmental issues and considerations in research and practice 3. Achenbach & Rescorla (2007) Why should we do multicultural research on children's problems? Contributions of multicultural research to understanding, assessing, preventing and treating child psychopathology 4. Levine & Levine (1986) Projective techniques 5. Fox (2006) Development in family contexts 6. Lawrence (2006) Guidelines for a family assessment protocol 	

<p>Week 4</p>	<p>Personality Patterns</p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Psychodynamic Diagnostic Manual (2006) pp 175-231 	<p>Child observation due</p>
<p>Week 5</p>	<p>Symptom Patterns</p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Psychodynamic Diagnostic Manual (2006) pp 233-296 	<p>Begin reading <i>Curious Incident of the Dog in the Nighttime</i></p>
<p>Week 6</p>	<p>Infancy and Early Years</p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Psychodynamic Diagnostic Manual (2006) pp 319-379) 2. Kuperminc & Brookmeyer (2006) Developmental psychopathology 3. Gleason & Zeanah (2006) Infant mental health 4. Calkins & Degnan (2006) Temperament in early development 5. Greenspan & Wieder (2006) Assessment; A model for comprehensive prevention and early intervention services for all families 	
<p>Week 7</p>	<p>Class and Culture</p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. (2003) Gibbs & Huang Introduction and overview: a conceptual framework for the psychological assessment and treatment of minority youth 2. Camino & Spurlock (2000) History taking: the influence of culture on diagnosis 3. Suberri (1987) Children and different cultural backgrounds 4. Flanagan & Miranda (1994) Best practices in working with culturally different families. 	

<p>Week 8</p>	<p><i>Asperger's Syndrome</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Haddon (2003) Curious Incident of the Dog in the Nighttime 2. Bashe (2001) What is Asperger's Syndrome? What Asperger's Syndrome looks like. How Asperger Syndrome is diagnosed. 	
<p>Week 9</p>	<p><i>Autism</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Alvarez, A. (1992) Autism: the controversies; Rites and rituals in autism 	
<p>Week 10</p>	<p><i>ADHD and Bipolar Disorder</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Smith, Barkley & Shapiro (2006) Attention-deficit hyperactivity disorder 2. Levine (1987) Attention deficits 3. Papolos& Papolos (1999) Voices from the front' The diagnostic dilemma 	<p>Video in class</p>
<p>Week 11</p>	<p><i>Adolescent Development</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Bloch (1995) The developmental process during adolescence 	

Week 12	<p><i>Depression and Suicide</i></p> <p><i>Readings:</i></p> <ol style="list-style-type: none"> 1. Birmaher, B. (2007) Practice parameters for the assessment and treatment of children and adolescents with depressive disorders 2. Stark, Sander, Hauser, Simpson, Schnoebelen, Glenn & Molnar (2006) Depressive disorders during childhood and adolescence 	
Week 13	<p><i>Eating Disorders</i></p> <p><i>Readings:</i></p> <p>Bruch (2001) The hunger disease; The anorexic stance</p> <p>Lock (2001) Introduction and background information on anorexia nervosa; Family treatment for anorexia nervosa</p>	
Week 14	<p><i>Trauma</i></p> <p><i>Readings:</i></p> <p>Understanding and Assessing Trauma in Children and Adolescents (2008) <i>chapters to be determined</i></p>	Adolescent observation paper due
Week 15	<i>Open Topic</i>	

On-Line Resources

The Argosy Library has numerous databases you can search for full-text, peer reviewed articles.

EBSCO Database: <http://search.epnet.com> User ID: argosy Password: stanacampus

- ***Psychology & Behavioral Sciences Collection***
Over 500 full text titles (mostly peer-reviewed) covering psychiatry & psychology, mental processes, anthropology, and observational and

experimental methods. To find out if a title is peer reviewed enter the website. Click on Title List. Then click on the name of the publication you are interested in. Then click on Publication Detail.

- [Academic Search Elite](#)

This multi-disciplinary database offers full text for more than 1,850 scholarly journals, including nearly 1,300 peer-reviewed titles. Covering virtually every area of academic study, Academic Search Elite offers full text information dating as far back as 1985. This database is updated on a daily basis via EBSCOhost. To find out if a title is peer reviewed, enter the website. Click on Title List. Then click on the name of the publication you are interested in. Then click on Publication Detail.

LIRN Databases: <http://www.lirn.net/services.html> User ID: 54145

- [Gale's Searchbank](#): Expanded Academic Index ASAP 1980 to present. Scholarly journals with full text articles for topics from the arts and humanities to science and technology.
- PA General Research, 1986 to present. 1800 full-text articles in arts, business, education and social sciences.
- ProQuest: Search the full collection of journals, magazines and newspapers for information on a broad range of general reference subjects.

Academic Policies

Academic Dishonesty/Plagiarism: In an effort to foster a spirit of honesty and integrity during the learning process, Argosy University requires that the submission of all course assignments represent the original work produced by that student. All sources must be documented through normal scholarly references/citations and all work must be submitted using the *Publication Manual of the American Psychological Association, 5th Edition (2001)*. Washington DC: American Psychological Association (APA) format. Please refer to Appendix A in the *Publication Manual of the American Psychological Association, 5th Edition* for thesis and paper format. Students are encouraged to purchase this manual (required in some courses) and become familiar with its content as well as consult the Argosy University catalog for further information regarding academic dishonesty and plagiarism.

Scholarly writing: The faculty at Argosy University is dedicated to providing a learning environment that supports scholarly and ethical writing, free from academic

dishonesty and plagiarism. This includes the proper and appropriate referencing of all sources. You may be asked to submit your course assignments through “Turnitin,” (www.turnitin.com), an online resource established to help educators develop writing/research skills and detect potential cases of academic dishonesty. Turnitin compares submitted papers to billions of pages of content and provides a comparison report to your instructor. This comparison detects papers that share common information and duplicative language.

Americans with Disabilities Act Policy

It is the policy of Argosy University to make reasonable accommodations for qualified students with disabilities, in accordance with the Americans with Disabilities Act (ADA). If a student with disabilities needs accommodations, the student must notify the Director of Student Services. Procedures for documenting student disability and the development of reasonable accommodations will be provided to the student upon request.

Students will be notified by the Director of Student Services when each request for accommodation is approved or denied in writing via a designated form. To receive accommodation in class, it is the student’s responsibility to present the form (at his or her discretion) to the instructor. In an effort to protect student privacy, the Department of Student Services will not discuss the accommodation needs of any student with instructors. Faculty may not make accommodations for individuals who have not been approved in this manner.

The Argosy University Statement Regarding Diversity

Argosy University prepares students to serve populations with diverse social, ethnic, economic, and educational experiences. Both the academic and training curricula are designed to provide an environment in which students can develop the skills and attitudes essential to working with people from a wide range of backgrounds.