



Child Psychopathology Credits: 3
18:820:563:02, Fall 2024
Thursdays, 6:15pm-8:45pm Location: SMH 219
Instructor: Danielle Zurawiecki, Psy.D.
Email: dzurawie@gsapp.rutgers.edu Office Hours: By appointment

Rutgers University Mission: As the premier comprehensive public research university in the state's system of higher education, Rutgers, The State University of New Jersey, has the threefold mission of

- providing for the instructional needs of New Jersey's citizens through its undergraduate, graduate, and continuing education programs;
- conducting cutting-edge research that contributes to the medical, environmental, social, and cultural well-being of the state, as well as aiding the economy and the state's businesses and industries; and
- performing public service in support of the needs of the citizens of the state and its local, county, and state governments.

Each component of the university's mission reinforces and supports the other two.

As the University of New Jersey®, Rutgers is dedicated to teaching that meets the highest standards of excellence, to conducting research that breaks new ground, and to providing services, solutions, and clinical care that help individuals and the local, national, and global communities where they live.

GSAPP Mission: The mission of GSAPP is threefold: education, research/scholarship, and public service. Its goal is to prepare well-educated, qualified, and competent direct-service psychologists who have a special commitment to direct community involvement and to underserved populations--professionals who can integrate scientific knowledge with innovation in the delivery of psychological services to individuals, families, groups, and organizations. Professionals receiving a doctoral degree in psychology should be capable of extending psychological knowledge and exhibiting the high level of analytic skills and theoretical understanding needed to use existing and emerging psychological knowledge.

Core Values: We are guided by four core values that are apparent in our learning environment, centers, and clinics:

1. **Academic excellence** in preparing students for careers in clinical and school psychology.
2. Commitment to **social justice** and helping **underserved populations**.

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3. **Diversity** of students trained, approaches used, theoretical orientations followed, and populations served.
4. **Knowledge generation and dissemination** using contemporary research approaches.

Applied Psychology Statement: The Department of Applied Psychology embraces the mission of the school by offering instruction that has an emphasis on civic and global citizenship, social justice, and cultural diversity. Our programs provide students with knowledge needed to understand individual and collective behaviors; develop quantitative and qualitative statistical analysis and research design needed to analyze the corresponding physical and environmental contributors to human behavior; and a beginning understanding of the analysis and treatment of behavior problems and disorders.

Our programs prepare students with the requisite theoretical knowledge; critical thinking and problem-solving skills needed to successfully participate in employment or scholastic activities. Students will have opportunities to pursue scholarly activities that prepares them to successfully compete for admissions into doctoral level psychology and related academic programs and pursue Master level career pathways through available concentration and certificate. In general, students will acquire a knowledge base grounded in psychological theory and experiential learning (research or practicum) designed to further advance their personal and professional career development.

Course Objectives:

This course will provide an overview of the most common expressions of child and adolescent psychopathology. The learning objectives include conceptual, research, and clinical issues related to the mental health of children and adolescents. The diverse factors that influence the etiology and expression of disorders will be considered, such as genetics, family influences, social systems, psychodynamics, and culture. Students will become familiar with the DSM-5 and how to conceptualize cases. Students will also be taught how to communicate professionally through written assignments and presentations. Students will acquire knowledge of basic mechanisms and processes that provide a foundation for advanced specialty courses. At times, interventions may be mentioned in presentations and course readings, but treatment will not be a primary emphasis in this course. This course is designed to advance students' understanding of the current state of knowledge with regard to etiological factors and the diagnostic issues related to the expression of various childhood disorders. The format of this course will be lecture and discussion.

Required Text:

You may purchase the DSM-5 Text-Revision (preferred). The DSM-5-TR is available to be downloaded for free from the Rutgers library. American Psychiatric Association. (2022). Diagnostic and statistical manual of mental disorders (5th ed., text rev.).

<https://doi/book/10.1176/appi.books.9780890425787>

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Weekly readings will be available on Canvas or linked in the “Schedule” below.

Recommended Text:

Youngstrom, E.A., Prinstein, M.J., Mash, E.J. and Barkely, R.A. (Eds.). (2020). Assessment of Disorders in Childhood and Adolescence. Guilford Publications.

<https://ebookcentral-proquest-com.proxy.libraries.rutgers.edu/lib/rutgers-ebooks/detail.action?docID=6235951>

Mash, E.J. and Barkely, R.A. (Eds.). (2014) Child Psychopathology: Third Edition. The Guilford Press. (Referred to as “M & B Text” in reading list)

Methods of Evaluation: (100 point system)

Assignment	Percent
Attendance and Participation (earned by weekly attendance, completion of in class assignments during class, and informative contributions to class)	30
Short Paper #1	15
Short Paper #2	15
Family Workshop Project	20
Memoir Presentation & Reflection	20

Grading:

A	90-100	Outstanding
B+	87-89	Intermediate Grade
B	80-86	Good
C	70-79	Does not count towards graduation credits
F	0-69	Does not count towards graduation credits

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Program requirement: All students in Applied Psychology courses must achieve a grade of B or better and maintain a GPA of 3.0, or academic remediation will be enforced.

Course Requirements and Assignments

Attendance, Participation, & Professionalism: Arrive on time to class (one tardy permissible). You are expected to attend class in person. If you are not physically in class, you will be considered absent, with the exception of absences due to religious holidays not observed by the university. Please notify me before class if you are unable to attend class. You will be responsible for any of the material covered during your absence. Class participation includes completion of readings. Please demonstrate your understanding of the reading and participate in discussion during every class. In addition, participation includes active responses to in-class check-ins. I will expect mindful attention during classes. Please bring a method of taking notes; however, I may limit or restrict use of electronic devices (e.g., laptops).

Case Conceptualization Papers (2): Students will write two papers during the semester. Students will be asked to read a case vignette and write a short paper including presenting problem(s), proposed diagnosis(es), case conceptualization (which should include cultural considerations), and research on the etiology of the primary diagnosis (based on assigned readings and course material). Additional details will be provided. **Due 10/24 & 11/21**

Family Workshop Project: You will lead a workshop about an adolescent mental health related topic (e.g., dealing with conflict with friends and family members, dealing with stress) designed for families. For the in-class “workshop” you will present a ~20 minute presentation on an assigned child mental health topic, facilitate an interactive activity on the topic, and lead a discussion among the families. This is not a psychological assessment or intervention; however, the goal is to provide clear, engaging, relevant and accurate information, which could help families in preventing mental health problems and/or accessing appropriate mental health services. This is a chance for you to develop teaching skills that will be directly relevant to your future work treating emotional and behavioral problems in youth. **Sign-up for a week/topic by the end of 1st class. Groups will be limited to no more than four students per topic.**

Memoir Presentation & Reflection: Students will select a memoir to read reflecting an adolescent’s lived experience with mental health challenges. Students will be grouped based on memoir selection and will provide a ~20 minute presentation in class utilizing the case conceptualization approach. Students should be prepared for questions and discussion from the class. Students will write a 2-3 page reflection essay regarding their selected memoir.

Presentations will occur in the last two classes of the semester. Reflections are due on the date of the student presentation.

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Extra Credit: Extra credit assignments will be offered to the entire class and cannot be requested by individual students. Students may propose assignments to be offered as extra credit to the entire class. Please do not request extra credit assignments in the final weeks of the semester.

Deadlines: Assignment due dates are specified on the syllabus and will be confirmed in class. If you require an extension due to an extenuating circumstance, please reach out to discuss with the instructor in advance; deadlines may be adjusted at the discretion of the instructor. Unless granted an extension in advance of the deadline, late assignments are subject to a 10% reduction per day.

Classroom Culture and Policies

Respect for Diversity: It is my intent that students from all diverse backgrounds and perspectives be well-served by this course, that students' learning needs be addressed both in and out of class, and that the diversity that the students bring to this class be viewed as a resource, strength and benefit. It is my intent to present materials and activities that are respectful of diversity: gender identity, sexuality, disability, age, socioeconomic status, ethnicity, race, nationality, religion, and culture. Your suggestions are encouraged and appreciated. Please reach out if you feel uncomfortable or unincluded at any point, so that I can foster a more inclusive learning environment.

Student Success: The faculty and staff at Rutgers are committed to your success. Students who are successful tend to seek out resources that enable them to excel academically, maintain their health and wellness, prepare for future careers, navigate college life and finances, and connect with the RU community. Resources that can help you succeed and connect with the Rutgers community can be found at <https://success.rutgers.edu>. (CAPS: <http://health.rutgers.edu/medical-counselingservices/counseling/>, self-identify as a GSAPP student to ensure your clinician is not affiliated with GSAPP); Learning Center: <https://learningcenters.rutgers.edu/student-services>)

Names and Pronouns: Class rosters are provided to the instructor with students' legal names. I will gladly honor your request to address you by an alternate name or gender pronoun. Please advise me at any time if your name and/or preferred pronouns differ from what is on the roster so that I can make necessary adjustments.

Statement on Disabilities: Rutgers University welcomes students with disabilities into all of the University's educational programs. In order to receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and

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provide documentation: <https://ods.rutgers.edu/students/documentation-guidelines>. If the documentation supports your request for reasonable accommodations, your campus's disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the Registration form on the ODS web site at: <https://webapps.rutgers.edu/studentods/forms/registration>.

Statement on Academic Integrity: The University's academic integrity policy, to which this class will adhere, can be reviewed at: <https://academicintegrity.rutgers.edu>. No materials used in this class, including, but not limited to, lecture handouts, videos, assessments (quizzes, exams, papers, projects, homework assignments), in class materials, review sheets, and additional problem sets, may be shared online or with anyone outside of the class unless you have the instructor's explicit, written permission. Rutgers is aware of the sites used for sharing materials, and any materials found online that are associated with you, or any suspected unauthorized sharing of materials, will be reported.

Plagiarism is taken very seriously at Rutgers. If you use words or ideas that are not your own (or that you have used in a previous class), you must cite your sources. Otherwise, you will be guilty of plagiarism and subject to academic disciplinary action, including failure of the course.

Writing: Formal writing assignments will be rigorously graded and students will be expected to write using formal/ professional language and tone. Papers should adhere to the page maximums. It is fine if papers are shorter, but if a paper does not meet the formatting and maximum length requirements, it will be returned for editing. Concise writing is an essential skill, especially for the purpose of conveying clinical material. Unless otherwise noted, please adhere to APA Style (7th Edition) and use 12-point font, 1-inch margins, and double-spaced formatting. Please be particularly attentive to APA style guidelines related to point of view, word choice, bias, citations, quotations, and editorializing. For guides, see: <http://apastyle.apa.org/> and https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html

Email communication phone access: Email is the best way to contact the instructor (dzurawie@gsapp.rutgers.edu) Typically, I will respond to your emails within 48 hours (about 2 days) during the work week. If you did not receive a response within this period, please resend your message. In cases of emergency only, students can contact me by phone (973-768-2193). Calls will be returned as soon as possible. In addition, Canvas tools will be used for communication throughout the semester.

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Schedule:

Date	Topic and Readings	Presentations & Papers
9/5	<p>Course Overview</p> <p>Introduction to Diagnosis</p> <ul style="list-style-type: none"> ● DSM-5-TR Section Introduction https://doi-org.proxy.libraries.rutgers.edu/10.1176/appi.books.9780890425787.Introduction <p>Developmental Psychopathology</p> <ul style="list-style-type: none"> ● Hinshaw, S. P. (2008). Developmental psychopathology as a scientific discipline: Relevance to behavioral and emotional disorders of childhood and adolescence. In T. P. Beauchaine & S. P. Hinshaw (Eds.), <i>Child and adolescent psychopathology</i> (pp. 3–26). John Wiley & Sons, Inc.. ● Wakefield, J. C. (1992) The concept of mental disorder: On the boundary between biological facts and social values. <i>American Psychologist</i>, 47, 373-388. <p>Recommended Reading:</p> <ul style="list-style-type: none"> ● M & B Text, p. 3-50 	
9/12	<p>Case Conceptualization & Underlying Processes - Developmental Trajectories, Emotion Regulation and Attachment</p> <ul style="list-style-type: none"> ● “Case Formulation from Five Different Perspectives”. Excerpt from Wilmshurst, L.A. (2018). <i>Child and adolescent psychopathology: A casebook</i>. Los Angeles: Safe (pages 9-30) ● Eells, T. and Lombart, K. (2011). Theoretical and Evidence-Based Approaches to Case Formulation. In <i>Forensic Case Formulation</i> ● Cole, P.M., Michel, M.K., and Teti, L.O. (1994). The development of emotion regulation and dysregulation: A clinical perspective. <i>Monographs of the Society for Research in Child Development</i> 59(2–3): 73–102. 	
9/19	<p>Asynchronous: Cultural Formulation, Vulnerability, Risk & Resilience</p> <ul style="list-style-type: none"> ● DSM-5-TR Section “Culture and Psychiatric Diagnosis” https://doi-org.proxy.libraries.rutgers.edu/10.1176/appi.books.9780890425787.Culture_and_Psychiatric_Diagnosis ● Choudhry, F.R., Mani, V., Ming, L.C., & Mehmood, T. (2016). Beliefs and perception about mental health issues: a meta-synthesis. <i>Neuropsychiatric Disease and Treatment</i>. ● Moleiro, C. (2018). Culture and Psychopathology: New Perspectives on Research, Practice, and Clinical Training in a Globalized World. <i>Frontiers in Psychology</i>, 9. ● Barry, E. (2024). Are we talking too much about mental health? <i>NY Times</i>. ● Malmdorf Anderson, M. & Clasen, M. (2024) Don’t run from fear. Embrace it. <i>The NY Times</i>. 	<p>Assignment will be posted on Canvas by 9/16 and due by 9/21</p>

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9/26	<p>Maltreatment, Abuse/Neglect, Trauma</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Trauma- and Stressor-Related Disorders” https://doi-org.proxy.libraries.rutgers.edu/10.1176/appi.books.9780890425787.x07_Trauma_and_Stressor_Related_Disorders • Patel, A. and Hall, B. (2021) Beyond the DSM-5 Diagnoses: A Cross-Cultural Approach to Assessing Trauma Reactions. • Abrams, Z. (2021, July). Improved treatment for developmental trauma. Monitor on Psychology. Retrieved from https://www.apa.org/monitor/2021/07/ce-corner-developmental-trauma • Burch, A.D. (2017). A gun to his head as a child. In prison as an adult. The New York Times. https://www.nytimes.com/2017/10/15/us/childhood-trauma-prison-addiction.html?hp&action=click&pgtype=Homepage&clickSource=story-heading&module=photo-spot-region&region=top-news&WT.nav=top-news&r=0 • Beard, J.W. (2014). Adolescents and Child Maltreatment, <i>NASN School Nurse</i>. <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 673-736 “Disorder and Risk for Disorder during Infancy and Toddlerhood” and p. 737-800 “Child Maltreatment” 	Family Workshop Presentations Begin
10/3	<p>Neurodevelopmental Disorders (Autism Spectrum Disorder)</p> <ul style="list-style-type: none"> • DSM-5-TR Section Neurodevelopmental Disorders https://doi-org.proxy.libraries.rutgers.edu/10.1176/appi.books.9780890425787.x01_Neurodevelopmental_Disorders • Aylward, B. S., Gal-Szabo, D. E., & Taraman, S. (2021). Racial, ethnic, and sociodemographic disparities in diagnosis of children with Autism Spectrum Disorder. <i>Journal of Developmental & Behavioral Pediatrics</i>, 42(8), 682–689. https://doi.org/10.1097/DBP.0000000000000996 • Podcast: 91 Neuropsych Bite: Clinical Case 7 (Pediatric, Autism) – With Dr. Kira Armstrong: https://www.navneuro.com/91/ • Dwyer, P. (2022). Stigma, incommensurability, or both? Pathology-first, person-first, and identity-first language and the challenges of discourse in divided autism communities. <i>Journal of Developmental & Behavioral Pediatrics</i>, 43(2), 111-113. <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 531-572 	
10/10	<p>Neurodevelopmental Disorders Cont. (ADHD)</p> <ul style="list-style-type: none"> • DSM-5-TR Section Neurodevelopmental Disorders https://doi-org.proxy.libraries.rutgers.edu/10.1176/appi.books.9780890425787.x01_Neurodevelopmental_Disorders • Wolraich, M. L., et al. (2019). Clinical practice guideline for the diagnosis, evaluation, and treatment of Attention-Deficit/Hyperactivity Disorder in children and 	

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	<p>adolescents. <i>Pediatrics</i>, 144(4), e20192528. https://doi.org/10.1542/peds.2019-2528</p> <ul style="list-style-type: none"> ● Evans, S.W., Owens, J.S., Wymbs, B.T., & Ray, R. (2018). Evidence-based psychosocial treatments for children and adolescents with Attention Deficit/Hyperactivity Disorder. <i>Journal of Clinical Child & Adolescent Psychology</i>, 47, 157-198. https://doi-org.proxy.libraries.rutgers.edu/10.1080/15374416.2013.850700 ● Moody, M. (2016). From Under-Diagnoses to Over-Representation: Black Children, ADHD, and the School-To-Prison Pipeline. <i>Journal of African American Studies</i> (New Brunswick, N.J.), 20(2), 152–163. https://doi.org/10.1007/s12111-016-9325-5 <p>Recommended Reading:</p> <ul style="list-style-type: none"> ● M & B Text, 75-144 	
10/17	<p>Depressive Disorders & Bipolar Disorder</p> <ul style="list-style-type: none"> ● DSM-5-TR Section “Depressive Disorders” and “Bipolar Disorders” ● Thapar, A., Eyre, O., Patel, V., & Brent, D. (2022). Depression in young people. <i>The Lancet</i>, 400(10352), 617-631. https://doi.org/10.1016/S0140-6736(22)01012-1 ● Moyer (2021). Suicide rates rise in a generation of Black youth. <i>Scientific American</i>. https://www.scientificamerican.com/article/suicide-rates-rise-in-a-generation-of-black-youth/ ● Goldstein et al. (2017). The International Society for Bipolar Disorders Task Force report on pediatric bipolar disorder: Knowledge to date and directions for future research. <i>Bipolar Disorders</i>, 1-20. https://doi-org.proxy.libraries.rutgers.edu/10.1111/bdi.12556 ● Brody, J. (2021). The Challenges of Bipolar Disorder in Young People. <i>The NY Times</i>. <p>Recommended Reading:</p> <ul style="list-style-type: none"> ● M & B Text, p. 225-263 “Child and Adolescent Depression”, 264-316 “Pediatric Bipolar Disorder”, 317-344 (Suicidal and Nonsuicidal Self-Injurious Thoughts and Behaviors) 	
10/24	<p>Anxiety Disorders</p> <ul style="list-style-type: none"> ● DSM-5-TR Section “Anxiety Disorders” ● Esbjørn, B.H., Bender, P.K., Reinholdt-Dunne, M.L., Munck, L.A., & Ollendick, T.H. (2012). The development of anxiety disorders: Considering the contributions of attachment and emotion regulation. <i>Clinical Child & Family Psychology Review</i>, 15, 129-143. ● Lewis, K. M., Byrd, D. A., & Ollendick, T. H. (2012). Anxiety symptoms in African-American and Caucasian youth: Relations to negative life events, social support, and coping. <i>Journal of Anxiety Disorders</i>, 26(1), 32–39. ● Ross, M. (2024). Anxious Parents are the ones who need help. <i>The NY Times</i> 	Paper #1 Due

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	<p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 345-428 	
10/31	<p>Disruptive, Impulse-Control, and Conduct Disorders</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Disruptive, Impulse-Control, and Conduct Disorders” • Burke, J.D., Rowe, R., & Boylan, K. (2014). Functional outcomes of child and adolescent oppositional defiant disorder symptoms in young adult men. <i>Journal of Child Psychology and Psychiatry</i>, 55, 264-272. • Frick, P.J. (2016). Current research on conduct disorder in children and adolescents. <i>South African Journal of Psychology</i>, 46, 160-174. • Kahn, J. (2012, May 11). Can you call a 9-year-old a psychopath? <i>The New York Times Magazine</i>. <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 145-179 	
11/7	<p>Asynchronous (Neurodevelopmental Disorders finished. Intellectual Disability & Learning Disabilities)</p> <ul style="list-style-type: none"> • DSM-5-TR Appropriate Sections • Kamphaus, R.W. & Walden, E. (2020). Intellectual Disability. In E.A. Youngstrom, M.J. Prinstein, E.J. Mash, & R.A. Barkley (Eds.) <i>Assessment of Disorders in Childhood and Adolescence</i> (pp. 358-373) New York: Guilford Press. • Kamphaus, R.W. & Walden, E. (2020). Learning Disability. In E.A. Youngstrom, M.J. Prinstein, E.J. Mash, & R.A. Barkley (Eds.) <i>Assessment of Disorders in Childhood and Adolescence</i> (pp. 374-409) New York: Guilford Press. • Pinals, D.A., Hovernale, M.D., Mauch, D., & Anacker, L. (2022). Persons with intellectual and developmental disabilities in the mental health system: Part 1. Clinical Considerations. <i>Psychiatric Services</i> 73:3. 313-320 <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 593-624 “Intellectual Disability” and p. 625-672 “Learning Disabilities” 	Assignment will be posted on Canvas by 11/2 and due by 11/9
11/14	<p>Feeding and Eating Disorders</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Feeding and Eating Disorders” • Burke, N.L., Shaefer, L.M. Hazzard, V.M., Rodgers, R.F. (2020). Where identities converge: The importance of intersectionality in eating disorders research. <i>International Journal of Eating Disorders</i>, 53, 1605-1609. • Datta, N., Matheson, B.E., Citron, K., Van Wye, E.M. & Lock, J.D. (2022). Evidence Based Update on Psychosocial Treatments for Eating Disorders in Children and Adolescents. <i>Journal of Clinical Child & Adolescent Psychology</i>, 52 (2). <p>Gender Dysphoria</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Gender Dysphoria” • McNamara, M., Lepore, C., Alstott, A., Kamody, R., Kuper, 	

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	<p>L., Szilagy, N., ... & Oleski, C. (2022). Scientific misinformation and gender affirming care: Tools for providers on the front lines. <i>Journal of Adolescent Health, 71(3)</i>, 251-253.</p> <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 801-846 	
11/21	<p>OCD & Related Disorders & Tic Disorders</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Obsessive-Compulsive and Related Disorders” and “Tic Disorders” section under “Neurodevelopmental Disorders” • McGuire, J.F., Piacentini, J., Brennan, E. A., Lewin, A.B., Murphy, T.K., Small, B.J., & Storch, E.A. (2014). A meta-analysis of behavior therapy for Tourette Syndrome. <i>Journal of Psychiatric Research, 50</i>, 106-112. <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 429-475 <p>Review for final presentations</p>	Paper #2 Due
12/5	<p>Substance-Related Disorders</p> <ul style="list-style-type: none"> • DSM-5-TR Section “Substance-Related and Addictive Disorders” • Harrop, E. & Catalano, R.F. (2016). Evidence-based prevention for adolescent substance use. <i>Child and Adolescent Psychiatric Clinics of North America, 25</i>, 387-410. • Passetti, L. L. Godley, M. D. & Kaminer, Y. (2016). Continuing care for adolescents in treatment for substance use disorders. <i>Child and Adolescent Psychiatric Clinics of North America, 25</i>, 669-684. <p>Recommended Reading:</p> <ul style="list-style-type: none"> • M & B Text, p. 180-224 <p>Review for final presentations</p>	
12/12	<p>Memoir Presentations Misc. Disorders</p>	
12/19	<p>Memoir Presentations TBD, based on student interest</p>	

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