

*\*This syllabus is subject to change and will be updated as needed.*

**Graduate School of Applied and Professional Psychology**  
**Pediatric Behavioral Medicine**  
**18:826:544**  
**Spring 2025 Syllabus**

**Instructor**

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**Course Time/Location**

Tuesdays 5 pm - 7:45 pm  
 GSAPP A317

**Course Description**

This course focuses on the foundational knowledge needed to deliver effective, integrated pediatric behavioral healthcare in a variety of child-serving systems, including healthcare settings and schools. The course will examine concepts and skills related to integrated behavioral healthcare and interprofessional collaboration. Additionally, evidence-based screening, prevention, and treatment practices for commonly occurring pediatric conditions will be explored.

**Course Objectives**

Students will acquire knowledge in core areas of pediatric behavioral healthcare:

- The meaning of pediatric behavioral medicine, pediatric school psychology, integrated behavioral healthcare
- The need for integrated pediatric behavioral healthcare, including among underserved populations
- Psychologist roles in delivering integrated pediatric healthcare across diverse settings
- Foundational concepts related to integrated behavioral healthcare including models of wellness and disease, evidence-based care, population health, social determinants of health/healthcare disparities, and the patient-centered medical home
- Interprofessional ethics and collaboration
- Screening in pediatric behavioral healthcare
- Use of common factors and common elements approaches in pediatric behavioral healthcare
- Assessment and treatment of behavioral health difficulties associated with chronic pediatric medical conditions
- Basic concepts related to use of psychotropic medications with pediatric populations
- Understanding how to integrate affective and biological aspects of behavior

**Learning Objectives**

Students will be able to:

- Consider multicultural and diversity aspects as they relate to the major concepts of this course
- Identify and consider multiple contributions and concomitants to behavioral and physical health, utilize a biopsychosocial framework in case conceptualization, and demonstrate this in oral and written communications
- Describe psychosocial screening instruments commonly used in pediatric medical settings and select an instrument appropriate for a particular setting
- Synthesize research and reflections to identify strategies that benefit individual outcomes and provide integrated pediatric behavioral health care

- Critically analyze the impact that health disparities can have on individual and population health outcomes
- Integrate affective and biological aspects of behavior

## Course Requirements

### 1. Attendance and participation

Students are expected to attend class, arrive on time and prepared, stay for the duration of the class period, exhibit professional behavior, and actively participate in class discussions. Active and professional participation is defined as attentive listening, asking thought-provoking questions, responding to questions posed, completing in-class activities, and treating others in such a way as to maintain a supportive and safe classroom environment. Students are allowed two absences per semester before their course grade is lowered by a grade. There is no differentiation between excused or unexcused absences. Please let me know in advance that you will be absent, and please connect with a classmate to obtain their notes from class.

- Participation points will be assigned for completing class readings/summaries and engaging in class discussions

### 2. Screening instrument presentation

Students will co-lead a brief presentation (20 minutes) about two screening instruments that measure the same construct and are used in pediatric medical settings. Presentations will be recorded in advance and uploaded to Canvas on 2/25/25. Additional information, including a grading rubric, can be found on page 9 of the syllabus.

### 3. Pediatric Integrated Behavioral Health Intervention Presentation

Students will independently lead a presentation (20 minutes) on an intervention to address the psychosocial aspects of common pediatric health conditions. Additional information, including a grading rubric, can be found on page 11 of the syllabus. Presentation topics are due on 3/11/25. Presentation files are due on 4/22/25.

### 4. Final Paper

Students will complete a final paper on a novel topic or problem relevant to families and children utilizing pediatric behavioral medicine or integrated behavioral healthcare. The paper topic will align with and build upon the intervention presentation topic. Individual discussion of students' preliminary ideas will occur in class on 3/4/25. Papers are due on 4/22/2025. Additional information, including a grading rubric, can be found on page 13 of the syllabus.

## Grading

Grades will be based on participation, a presentation of a screening instrument, a presentation on a pediatric medical/behavioral health condition, and a final paper, as follows:

Attendance and Participation	30 points
Screening Presentation	35 points
Medical/Behavioral Health Intervention Presentation	55 points
Final Paper	80 points
Total Available Points:	200 points

Number of Points	Grade
180-200	A
160-179	B
140-159	C
0-139	F

## Office Hours

Tuesdays, 3:45-4:45pm or by appointment. Please email me to set up a mutually convenient time to meet either in person or virtually to discuss any questions related to this course. I am also happy to discuss career options in pediatric behavioral medicine.

## Classroom Culture

**Names and Pronouns:** Class rosters are provided to the instructor with the student's legal name. I will gladly honor your request to address you by your preferred name and pronouns. Please advise me of this preference so that I may make appropriate changes to my records.

**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 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. We will aim to develop a space together where we can grow and learn from one another, given we come to these course topics with diverse viewpoints and lived experiences. If at any time you feel uncomfortable or uninvited, please reach out to me so we can problem-solve together.

**Land Acknowledgement:** We honor and respect the Indigenous peoples on whose land we meet. The Lenape are the original inhabitants of New Jersey, beginning over 12,000 years ago. This acknowledgment serves to bear witness to the Indigenous peoples who thrived on this land prior to its occupation. We take this moment to pause, acknowledge the Indigenous peoples as stewards of this land, and recognize the history we have with the land and colonialism. This is a small but essential step in moving forward with respect for all Indigenous peoples, past, present, and future. (Adapted from Morningside Center) Please also see: <https://diversity.rutgers.edu/honor-native-land>

**Statement on Disabilities:** Rutgers University welcomes students with disabilities into all 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 they are officially enrolled, participate in an intake interview, and provide documentation: <https://ods.rutgers.edu/students/documentation-guidelines>. If the documentation supports a student's request for reasonable accommodations, the campus disability services office will provide the student with a Letter of Accommodation. Students should share this letter with their instructors and discuss the accommodations with them as early in courses as possible. To begin this process, complete the Registration form on the ODS website at: <https://ods.rutgers.edu/students/registration-form>.

**Classroom Computer Use:** Students may use computers for notetaking and class activities.

**Academic Integrity:** Students will adhere to the University's academic integrity policy. The policy can be reviewed at <http://academicintegrity.rutgers.edu/academic-integrity-at-rutgers/>. *Students agree that by taking this course all required papers may be subject to submission for textual similarity review to Turnitin.com (directly or via learning management system, i.e. Sakai, Blackboard, Canvas, Moodle) for the detection of plagiarism. All submitted papers will be included as source documents in the Turnitin.com reference database solely for the purpose of detecting plagiarism of such papers. Use of the Turnitin.com service is subject to the Usage*

*Policy posted on the Turnitin.com site. Students who do not agree should contact the course instructor immediately. For students who elect to not submit directly to Turnitin, I will accept digital copies of the assignment and submit it on behalf of the student via the Turnitin website.*

**Prohibition of GenAI Use:** "In this course, the focus is on the development of independent critical thinking and the mastery of subject-specific content. To ensure that all submitted work accurately reflects personal understanding and original thought, the use of Generative AI (GenAI) tools in completing assignments or assessments is strictly prohibited. This policy supports our commitment to academic integrity and the direct measurement of each student's learning against the course's Student Learning Outcomes (SLOs). Any work found to be generated by AI will be subject to academic review."

**Public Health Policy:** We follow Rutgers University policy. See <https://coronavirus.rutgers.edu/> for updated guidance. Per update effective October 1, 2022, face coverings are not required in indoor teaching spaces but welcome. Where masks are optional, we encourage all individuals who prefer to wear them to do so, and we fully respect that personal decision. Further, as the pandemic remains fluid, the University is prepared to revisit this change in protocol should future public health conditions warrant.

**Safety Escort:** If you need a safety escort from class, particularly in the case of night classes, consider contacting public safety: <https://ipo.rutgers.edu/publicsafety/rupd/escorts>

### **Additional Resources**

Resources for Student Success: [www.success.rutgers.edu](http://www.success.rutgers.edu)

Counseling, Alcohol and Other Drug Assistance Program & Psychiatric Services (CAPS):  
<http://health.rutgers.edu/medical-counseling-services/counseling/>

Health and Wellness: [www.recreation.rutgers.edu](http://www.recreation.rutgers.edu)

Food Pantry: <http://ruoffcampus.rutgers.edu/food/>

Learning Center: <https://rlc.rutgers.edu/node/83>

University Operating Status: <https://newbrunswick.rutgers.edu/status>

Safety/Emergency Response Services: <https://success.rutgers.edu/success-essentials/safety-urgent-needs>

## Class Session Topics, Activities, and Readings

### Course Website

We will be using the Canvas learning platform for this course. Assignments will be submitted there, and announcements will be made through that platform. Please check our course site regularly and ensure the settings are marked so you receive announcements as they occur.

### Required Text

(eBook available) Forman, S. G. & Shahidullah, J. D. (2018). *Handbook of pediatric behavioral healthcare: An interdisciplinary collaborative approach*. Springer.

(obtain your own copy) Fadiman, A. (2012). *The spirit catches you and you fall down: A Hmong child, her American doctors, and the collision of two cultures*. Farrar, Straus, & Giroux.

(a copy will be loaned to you) Durand, V. M. (2011). *Optimistic Parenting: Hope and Help for You and Your Challenging Child*. Brookes.

(copy will be loaned to you) Cline, F. W. & Greene, L. C. (2007) *Parenting Children with Health Issues*. Love & Logic Institute.

Date	Topic	Readings & Assignments Due
Week 1  1/21/2025  In person	<b>Introduction to course and pediatric behavioral medicine</b>  Readings:  Power, T. J., DuPaul, G. J., & Shapiro, E. S. (1995). Pediatric school psychology: The emergence of a subspecialty. <i>School Psychology Review</i> , 24, 244-257.  Wright, L. (1967). The pediatric psychologist. A role model. <i>American Psychologist</i> , 22, 323-325.	
Week 2  1/28/2025  In person	<b>Pediatric integrated care in practice</b>  <u>Readings:</u>  German et al. (2017). Comparing two models of integrated behavioral health programs in pediatric primary care. <i>Child &amp; Adolesc Psychiatric Clin N Am</i> , 26, 815-828.  Asarnow JR, Rozenman M, Wiblin J, Zeltzer L. Integrated medical-behavioral care compared with usual primary care for child and adolescent behavioral health: a meta-analysis [published online August 10, 2015]. <i>JAMA Pediatr</i> . doi:10.1001/jamapediatrics.2015.1141.  Schlesinger et al. (2017). From theory to action: Children's community pediatrics behavioral health system. <i>Child Adolesc Psychiatric Clin N Am</i> , 26, 677-688. doi: 10.1016/j.chc.2017.05.004	Reading & Summary Due  Select one article to read; create a list of four highlights of the article. The highlights should differ from the content in the abstract. Upload the list to Canvas by 5pm.

<p>Week 3</p> <p>2/4/2025</p> <p>In person</p> <p>Select Screening Tool</p>	<p><b>Pediatric integrated care for early childhood</b></p> <p>Readings:</p> <p>Margolis et al. (2022). Early childhood integrated behavioral health: A promoter of equity in pediatric care. <i>Clinical Practice in Pediatric Psychology</i>, 10(3), 263-272. doi: 10.1037/cpp0000454</p> <p>Yogman et al. (2021). Integrated behavioral health for preschool children in pediatric primary care. <i>Journal of Behavioral Health Services &amp; Research</i>, 48(4), 625-633. Doi: 10.1007/s11414-021-09754-4</p> <p>Talmi et al. (2022). BHIPP: 0-5: Primary care practice transformation in early childhood behavioral health integration. <i>Clinical Practice in Pediatric Psychology</i>, 10(1), 9-19. doi: 10.1037/cpp0000380</p>	<p>Reading &amp; Summary Due</p> <p>Select one article to read; create a list of four highlights of the article. The highlights should differ from the content in the abstract. Upload the list to Canvas by 5pm.</p>
<p>Week 4</p> <p>2/11/2025</p> <p>In person</p>	<p><b>Screening within an integrated care setting</b></p> <p>Readings:</p> <p>Brodar et al. (2021). Psychological screening and consultation in a pediatric diabetes clinic: Medical providers' perspectives. <i>Clinical Practice in Pediatric Psychology</i>, 10(2), 164-179. doi:10.1037/cpp0000430</p> <p>Clifford et al. (2024). Screening and treatment of anxiety symptoms in an interdisciplinary comprehensive epilepsy center. <i>Epilepsy &amp; Behavior</i>, 156(109828). doi: 10.1016/j.yebeh.2024.109828</p> <p>Hahn et al. (2019). Utility of the Ages &amp; Stages Questionnaire Third Edition in a comprehensive Sickle Cell Disease clinic. <i>Clinical Practice in Pediatric Psychology</i>, 8(1), 56-66. doi: 10.1037/cpp0000304</p>	<p>Reading &amp; Summary Due</p> <p>Select one article to read; create a list of four highlights of the article. The highlights should differ from the content in the abstract. Upload the list to Canvas by 5pm.</p>
<p>Week 5</p> <p>2/18/2025</p> <p>Virtual</p>	<p><b>Screening – In-depth review of the MCHAT-R</b></p> <p>Guest speaker: Modified Checklist for Autism in Toddlers (M-CHAT), Dr. Diana Robins, Director, AJ Drexel Autism Institute, Professor, Drexel University</p> <p>Readings:</p> <p>Robins et al. (2013). Validation of the Modified Checklist for Autism in Toddlers, Revised With Follow-up. <i>Pediatrics</i>. doi: 10.1542/peds.2013-1813</p> <p>Wieckowski et al. (2021). Early and repeated screening detects autism spectrum disorder. <i>The Journal of Pediatrics</i>, 234. 227-235. doi:10.1016/j.jpeds.2021.03.009</p>	<p>Reading &amp; Summary Due</p> <p>Select one article to read; create a list of four highlights of the article. The highlights should differ from the content in the abstract. Upload the list to Canvas by 5pm.</p>

	Wieckowski et al. (2023). Sensitivity and specificity of the M-CHAT (original and revised). <i>JAMA Pediatrics</i> , doi: 10.1001/jamapediatrics.2022.5975	
Week 6 2/25/2025 In person	<b>Brief Interventions</b>	Due: Recorded screening presentations & PowerPoint/handouts uploaded to Canvas by 5pm  No Readings

Week 7 3/4/2025 In person Discuss final paper topic	<b>Brief Interventions/Interdisciplinary collaboration</b>  Readings:  Cox (2012). From interdisciplinary to integrated care of the child with autism: the essential role for a code of ethics. <i>Journal of Autism and Developmental Disorders</i> , 42, 2729-2738. doi: 10.1007/s10803-012-1530-z  Rodriguez et al. (2019). Interdisciplinary perspectives on an integrated behavioral health model of psychiatry in pediatric primary care: A community-based participatory research study. <i>Community Mental Health Journal</i> , 55, 569-577. doi: 10.1007/s10597-018-0330-0  Schweitzer et al. (2023). Developing an innovative pediatric integrated mental health care program: Interdisciplinary team success and challenges. <i>Frontiers in Psychiatry</i> . doi: 10.3389/fpsyt.2023.1252037	Reading & Summary Due  Select one article to read; create a list of four highlights of the article. The highlights should differ from the content in the abstract. Upload the list to Canvas by 5pm.
Week 8 3/11/2025 In person	<b>Interdisciplinary collaboration</b>	Due: Topics and rationale for final papers uploaded to Canvas by 5pm.  No Readings
3/18/2025	Spring Recess – No Class	

Week 9 3/25/2025 In person	<b>Family-centered Care – Siblings</b>  Guest speaker: Siblings of Youth with Chronic Health Conditions Christina Amaro, PhD, Division of Pediatric Hematology/Oncology, Rutgers Cancer Institute of New Jersey  Readings:	Reading & Summary Due  Select one article to read; create a list of four highlights of the article. The highlights
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	<p>Leimanis &amp; Zuiderveen (2018). Chapter 7 – Psychosocial considerations for patients in a pediatric intensive care unit at a large, freestanding children’s hospital. <i>Quality of Life Among Cancer Survivors</i>.</p> <p>Le &amp; Fitzpatrick (2018). Chapter 8 – The impact of childhood cancer on the quality of life among healthy siblings. <i>Quality of Life Among Cancer Survivors</i>.</p> <p>Huot &amp; Fitzpatrick (2018). Chapter 9 – The effect of physical activity on post-traumatic stress disorder among parents of pediatric cancer survivors. <i>Quality of Life Among Cancer Survivors</i>.</p>	<p>should differ from the content in the abstract. Upload the list to Canvas by 5pm.</p>
<p>Week 10</p> <p>4/1/2025</p> <p>Virtual</p>	<p><b>Family-centered Care – Models of Parent Education</b></p>	<p>Reading Due:</p> <p>Read select sections from either <i>Optimistic Parenting</i> or <i>Parenting with Love &amp; Logic</i></p> <p>Be prepared to lead in-class activities that build on the readings.</p> <p>More guidance will be shared in class.</p>
<p>Week 11</p> <p>4/8/2025</p> <p>In person</p>	<p><b>Family-centered Care – Parents</b></p> <p>Guest Speaker: Pediatric hematology/oncology with a focus on direct clinical intervention and impact on kids/families  Karen Long-Traynor, PhD, Division of Pediatric Hematology/Oncology, Rutgers Cancer Institute of New Jersey</p>	<p>Begin reading Fadiman book for 4/15/25 discussion</p>
<p>Week 12</p> <p>4/15/2025</p> <p>Virtual</p>	<p><b>Ethical issues</b></p>	<p>Reading Due:</p> <p>Fadiman, A. (2012). <i>The spirit catches you and you fall down: A Hmong child, her American doctors, and the collision of two cultures</i>. Farrar, Straus, &amp; Giroux.</p> <p>Be prepared to lead in-class activities that</p>



		build on the readings.  More guidance will be shared in class.
Week 13 4/22/2025  In person	<b>Pediatric Integrated Behavioral Health Intervention Presentations</b>	Due: Final papers and presentations due in Canvas by 5pm
Week 14 4/29/2025  In person	<b>Pediatric Integrated Behavioral Health Intervention Presentations</b>	
Week 15 5/6/2025  In person	<b>Pediatric Integrated Behavioral Health Intervention Presentations</b>	

### Screening Tool Presentation

#### Assignment Due Date: 2/25/25

Recorded presentations and the PowerPoint/handouts should be submitted to Canvas by 5pm on 2/25/25.

#### Assignment Expectations

Co-lead presentation (20 minutes) on two psychosocial screening instruments that measure the same construct. The presentation should include a PowerPoint or handouts and should provide information on the following for the two screening instruments. Your presentation should be organized as a comparison between the two instruments. Presentations should be recorded via Zoom (or a similar platform) and submitted as a recording. The PowerPoint/handouts used in the presentation should also be submitted.

- Validity and reliability overall
- Validity and reliability with the following subgroups
  - Black, Asian, Hispanic, and White children
  - English Learner children
  - Children with developmental disabilities
  - Children with emotional and behavioral disorders
- Content, structure (format, what is it purporting to measure, how is it structured)
- Uses of the instrument
- How is the instrument used in combination with other instruments to assess biological and affective aspects of conditions and lead to effective diagnosis and treatment
- Best setting(s) to use it in
- Cost of acquiring and implementing
- Administration time
- Training required to use instrument
- Data gathered from instrument (i.e., what do results tell you)
- Discuss how this tool could be used in a real-world setting (e.g., provide a case example)

- Critiques of the tool from the peer-reviewed literature
- Limitations of the tool
- In your video, provide a brief demonstration of the administration of the two measures. Here is an example of a brief demonstration of administration:  
<https://www.youtube.com/watch?v=YDzS3puQobE>

### Screener Selection

Screeners will be selected/assigned in class on 2/4/2025. Students will choose from the following:

Parents' Evaluation of Developmental Status	Pediatric Symptom Checklist (PSC)
Survey of Well-being of Young Children	Strengths and Difficulties Questionnaire (SDQ)
Penn State Worry Questionnaire for Children (PSWQ-C)	PHQ-9 Modified for Adolescents
Accountable Health Communities Health-Related Screening Tool	Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences
Brief Screener for Alcohol, Tobacco, and other Drugs	Ages & Stages Questionnaire (ASQ)
Revised Children's Anxiety and Depression Scale (RCADS)	Center for Epidemiological Studies Depression Scale for Children (CES-DC)
Screen for Child Anxiety Related Emotion Disorders (SCARED)	Spence Children's Anxiety Scale (SCAS)
Depression Self Rating Scale for Children (DSRSC)	Kutcher Adolescent Depression Scale (KADS-6 and KADS-11)
General Anxiety Disorder – 7 (GAD-7)	Columbia Suicide Severity Rating Scale (C-SSRS)
Ask Suicide Screening Questions (ASQ)	Substance Abuse Subtle Screening Inventory (SASSI) – A3

With instructor approval, students may select a different screener from the following resources:

- <https://publications.aap.org/toolkits/resources/15625/>
- [https://downloads.aap.org/AAP/PDF/Mental\\_Health\\_Tools\\_for\\_Pediatrics.pdf](https://downloads.aap.org/AAP/PDF/Mental_Health_Tools_for_Pediatrics.pdf)
- <https://publications.aap.org/toolkits>

### Screening Tool Presentation Grading Rubric

Category and Scoring Criteria	Points
Content	/25
Presentation contains accurate information and addresses all required areas listed in assignment expectations.	
Presentation includes psychometric data from subgroups across race, ethnicity, language, and disability	
Presentation	/10
Information is presented in a logical sequence and clear manner.	
Delivery is clear and audible.	
Speaker is not reading the presentation content	
Visual aids are well prepared, informative, effective, and not distracting.	
Length of presentation is within assigned time limits.	
<b>Total</b>	<b>/35</b>

## **Pediatric Integrated Behavioral Health Intervention Presentation**

### **Assignment Due Date – See Class Session Topics**

Presentations are due on 4/22/25 and should be submitted electronically via Canvas by the beginning of class.

### **Assignment Expectations**

Lead a presentation (20 minutes) on an intervention to address the psychosocial aspects of common pediatric health conditions. The presentation should include a PowerPoint and modeling or a class activity related to practicing the intervention. Some examples of common conditions/relevant topics are below. This is not an exhaustive list of conditions/topics that may be the focus of your presentation and paper.

- School re-entry/reintegration for children with long-term and/or chronic illness
- Treatment of Elimination Disorders
- Eating Disorders
- Gastrointestinal disorders
- Diabetes Obesity
- Traumatic brain injury/Concussion
- Childhood cancer
- Treatment Adherence
- Sickle Cell Disease
- Sleep Disorders
- Autism Spectrum Disorder
- Chronic/recurrent pain
- Coping with chronic illness and medical stress
- Attention-Deficit/Hyperactivity Disorder (AD/HD)
- Learning Disabilities
- Asthma
- Epilepsy

### **The presentation should provide the following:**

- biological and affective aspects of the condition(s)
  - a brief background on a physical health condition or set of conditions
  - common psychosocial issues
- implications for care
  - how to provide the best behavioral healthcare for youth with the condition in non-medical and school settings
- research on evidence-based treatments
  - describe one or two evidence-based treatments
  - describe the race, ethnicity, language, and disability status of the participants in the studies that established the evidence base – note which populations are missing from the evidence base
  - describe the role of families in treatment
  - briefly model the implementation of the intervention for the class during your presentation

### **Topic Selection**

Students will discuss their topic in class on 3/4/25. They will submit a one-page description of their presentation and paper topics to Canvas by 5pm on 3/11/25.

## Pediatric Medical/Behavioral Health Intervention Presentation

### Grading Rubric

Category and Scoring Criteria	Points
Content	/45
Presentation contains accurate information and addresses all required areas listed in assignment expectations.	
Presentation includes a description of the sociodemographics of the populations in related clinical trials	
Class activity/discussion is relevant, extends student learning, and engages students.	
Presentation	/10
Information is presented in a logical sequence and clear manner.	
<i>Speaker does not read from their notes or the slide. Speaker makes eye contact with the class throughout their presentation.</i>	
Speaker uses strengths-based language when discussing children and families	
Speaker responds to questions effectively.	
Visual aids are well prepared, informative, effective, and not distracting.	
Length of presentation is within assigned time limits.	
<b>Total</b>	<b>/55</b>

## Pediatric Integrated Behavioral Health Intervention/Innovative Topic

### – Final Paper

#### Assignment Due Date

Draft topics and rationale are due on 3/11/25 at 5pm. Prepare a one-page description of your paper and presentation topics and upload it into Canvas by 5pm on 3/11/25. Paper/presentation topics will be discussed in class on 3/4/25.

Final papers/presentations are due on 4/22/2025 and are to be submitted electronically via Canvas by the beginning of class. Presentations begin this day.

#### Assignment Expectations

Students will complete a final paper on a novel topic or problem relevant to pediatric behavioral medicine or integrated behavioral healthcare. The paper topic should overlap with and be an extension of the intervention presentation.

#### The paper should include the following:

- a rationale for examining the topic
- biological and affective aspects of conditions relevant to the paper topic
- a comprehensive review and critical analysis of the relevant pediatric behavioral medicine literature, conclusions, implications for clinical practice, and implications for future research.
  - o Describe the race, ethnicity, language, and disability status of the participants in the studies that established the evidence base
  - o Describe the relationship between the condition and social determinants of health
- Papers should demonstrate students' advanced knowledge of clinical and family-centered care considerations within pediatric behavioral medicine.
- Papers should be in APA 7<sup>th</sup> style and be between 14-15 double-spaced pages (not including references).

### Final Project Grading Rubric

Category and Scoring Criteria	Points
Content	/70
Topic or problem is clearly stated.	
Rationale for the need for examining the topic is clear, with evidence to support rationale.	
Literature is comprehensively reviewed and critically analyzed. Writing reflects synthesis across studies and integration of course material.	
Describe the race, ethnicity, language, and disability status of the participants in the studies that established the evidence base	
Implications for professional practice and future research are detailed and reflect critical review of the existing literature, including strengths and limitations.	
Include strengths-based language to describe children and families	
Writing Style/Mechanics	/10
Paper is free of errors in grammar, spelling, mechanics, and structure. Paper formatting and references follow APA 7 <sup>th</sup> style.	
<b>Total</b>	<b>/80</b>