Louisville Presbyterian Theological Seminary DM324-3 – Therapy with Adolescents Summer 2015

Instructor: Michelle Finley, Ph.D., LMFT

Office Hours: Please schedule an appointment via email

Phone: 502-387-5233

Email: michelleannfinley@gmail.com

Class Times: Monday-Friday, June 1-5, 2015, 8:30 am - 4:30 pm

Note: The following course may change at the Instructors' discretion

Course Description

This course will present principles of healthy adolescent development and techniques used in establishing effective parent-child relationships from the perspective of relational and family systems. Research, theory, and practice regarding adolescent diagnostic categories of the DSM-5 will also be studied. Additionally, attention will be given to the effects of abuse and complex trauma on adolescents and young adults and treatment considerations. Special issues regarding therapy with minors and creative approaches for building mutually desired outcomes including the facilitation of play therapy will be explored.

Course Objectives

This course will take a hands-on, interactive approach to learning the material in order to ensure that each student is able to fully grasp the principles and distinct factors related to working with adolescents and young adults. Students are expected to maximize their participation during class time by engaging in the interactive format.

Specifically, upon completing this course, student will be able to:

- 1. Summarize the developmental tasks for individuals and families at various stages of childhood and adolescence.
- 2. Implement a variety of therapeutic interventions for adolescents and their families.
- 3. Develop an integrative therapeutic working model for working with adolescents within the family context.
- 4. Assess and treat commonly occurring mental health disorders in adolescents.
- 5. Understand and treat complex trauma in adolescents and young adults.

Required Textbooks*

American Psychological Association. (2001). *Publication manual of the American psychological Association* (5th ed.). Washington, DC: American Psychological Association.

Briere, J. N., & Lanktree, C. B. (2012). *Treating complex trauma in adolescents and young adults*. Los Angeles: Sage Publications.

- Hughes, D. A. (2011). *Attachment-focused family therapy workbook*. New York: W. W. Norton & Company.
- Micucci, J. (2009). The adolescent in family therapy: Harnessing the power of relationships. New York: Guilford Press.

Required Journal Article Readings*

- Baldwin, S. A., Christian, S., Berkeljon, A., Shadish, W. R., & Bean, R. (2012). The effects of family therapies for adolescent delinquency and substance abuse: A meta-analysis. *Journal of Marital and Family Therapy*, *38*, 281-304. doi: 10.1111/j.1752-0606.2011.00248.x
- Bean, R., Perry, B., & Bedell, T. (2001). Developing culturally competent marriage and family therapists: Guidelines for working with Hispanic families. *Journal of Marital and Family Therapy*, 27(1), 43-54.
- Connell, C. (2010). Multicultural perspectives and considerations within structural family therapy: The premises of structure, subsystems and boundaries. *Rivier Academic Journal*, 6(2), 2-6.
- Diamond, G., Siqueland, L., & Diamond, G.M. (2003). Attachment-based family therapy for depressed adolescents: Programmatic treatment development. *Clinical Child and Family Psychology Review*, 6, 107-127. doi: 1096-4037/03/0600-0107/0
- Henggeler, S. W. & Sheidow, A. J. (2012). Empirically supported family-based treatments for conduct disorder and delinquency in adolescents. *Journal of Marital and Family Therapy*, *38*, 30-58. doi: 10.1111/j.1752-0606.2011.00244.x
- Kaslow, N. J., Broth, M. R., Smith, C. O., & Collins, M. H. (2012). Family-based interventions for child and adolescent disorders. *Journal of Marital and Family Therapy*, *38*, 82-100. doi: 10.1111/j.1752-0606.2011.00257.x
- Sanders, G., & Kroll, I. (2000). Generating stories of resilience: Helping gay and lesbian youth and their families. *Journal of Marital and Family Therapy*, 26(4), 433-442.
- Sellers, R., Copeland-Linder, N., Martin, P., & Lewis, R. (2006). Racial identity matters: The relationship between racial discrimination and psychological functioning in African American adolescents. *Journal of Research on Adolescents*, 16(2), 187-216.
- Van der Stouwe, T., Asscher, J. J., Stams, G. J., Dekovic, M., & van der Laan, P. H. (2014). The effectiveness of Multisystemic Therapy (MST): A meta-analysis. *Clinical Psychology Review*, 34, 468-481. Retrieved from http://dx.doi.org/10.1016/j.cpr.2014.06.006

Recommended Texts

- Alexander, J. F., Waldron, H. B., Robbins, M. S., & Neeb, A. A. (2013). Functional family therapy for adolescent behavior problems. APA.
- Hardy, K. V., & Laszloffy, T. A. (2005). *Teens who hurt: Clinical interventions to break the cycle of adolescent violence*. New York: The Guildford Press.
- Sexton, T. L. (2011). Functional family therapy in clinical practice: An evidence-based treatment model for working with troubled adolescents. New York: Routledge.

Course Requirements

1) Readings and Class Participation (10%)

You are expected to purchase and read the required textbook identified above and other readings as scheduled. Readings should be completed prior to the class period identified.

Assignments will be given in-class that focus on applying the reading and/or lecture materials to real-world scenarios. Additional details regarding these assignments will be given as the semester progresses. In-class assignments cannot be made-up

2) Therapy Technique Demonstration (30%)

Students will develop their own age- and culturally-appropriate therapy technique designed for adolescents. Students will then demonstrate the technique for the class with a partner playing the role of an adolescent. They will also demonstrate systemic interviewing skills with the intent of developing rapport with the adolescent, gaining a clear picture of the symptoms/diagnosis, and evaluating interactions within the family system. The demonstration should last between 10-15 minutes.

In introducing the demonstration (3-5 minutes), students must answer the following questions:

- What model informs the intervention and how does the intervention fit the model theoretically?
- What is the goal of the intervention?
- What is the child/adolescent's diagnosis? How do you justify the diagnosis?
- What is a description of "the problem" from the perspective of the parent, client, and teacher?
- What, if any, biopsychosocial issues, including the family's mental health history and relevant medical issues might impact the problem and/or treatment?
- Are there any indications of abuse or trauma (past or present)?

Students must also distribute a 1-page handout to the class based on the following headings:

Heading #1- Name of intervention

Heading #2- Objectives of intervention (at least 3)

Heading #3- Description of how intervention fits a particular theory

Heading #3- Intervention instructions

3) Interview with an Adolescent (30%)

Students will interview an adolescent in order to gain a better sense of the unique developmental challenges adolescents face. Following the interview, students must write a <u>3-5-page (double-spaced)</u> overview of the interview, which addresses the following questions:

- 1. What does the adolescent like about being a teenager and why?
- 2. What does the adolescent dislike about being a teenager why?
- 3. How have relationships with parents, teachers, and siblings changed as the adolescent has gotten older?
- 4. What are the most important things in the adolescent's life and why?
- 5. What does the adolescent wish adults understood about being a teenager?
- 6. What does the adolescent view as the most significant challenges facing teenagers in general?

4) Research Paper (30%)

Students will write a 7-10 page double-spaced scholarly paper in APA format (including 8-10 professional references) on a commonly occurring mental disorder of adolescents. Topics might include ADD/ADHD, disruptive/defiant behavioral disorders, or a mood disorder.

The paper must include the following headings:

Section #1- Introduction (please do not write-out this heading in keeping with APA format)

Heading #1- Defining the Problem

- What is the prevalence of the disorder?
- What are the criteria used to diagnose the problem? Are the criteria generally accepted by researchers or is there some controversy?
- What are the problems/special considerations in diagnosing the disorder in children/adolescents?

Heading #2- Treatment

- What evidenced-based approaches are available in treating the disorder? If no evidenced-based approaches exist, what are treatment approaches are suggested in the literature?
- Describe the evidenced-based approaches and summarize related research.
- What are the strengths/limitations of each approach?

Heading #3- Conclusion

Summary of Class Grading Percentages

10%	Assigned Readings, Class Participation, Attendance
30%	Play Therapy Demonstration (DUE June 3 rd , 4 th , and 5 th)
30%	Adolescent Interview (Adolescent selected by June 2 nd ; Final Paper DUE
	June 12 th)
30%	Research Paper (Topic due June 3 rd ; DUE June 19 th)
100%	Total

Grading Scale

A = 90%-100% B = 80%-89% C = 70%-79% D = 60%-69% F = 59% or lower

Academic Policies

Expected Behavior in Class

As discussions in this class may often be of a personal nature, it is crucial to respect each class member's values and views. What is revealed of individuals during class meetings is considered confidential. Since you are taking this class, the instructor assumes that each person will be mature when discussing personal issues around family of origin, ethnicity, gender, and sexuality. If there are concerns that you have about the class, please make an appointment to talk with the professor.

Use of Inclusive Language

In accordance with seminary policy, students are to use inclusive language in class discussions and in written and oral communication by using language representative of the whole human community in respect to gender, sexual orientation, ethnicity, age, and physical and intellectual capacities. For more information see:

http://lpts.libguides.com/content.php?pid=469569&sid=4083885 Direct quotations from theological texts and translations of the Bible do not have to be altered to conform to this policy. In your own writing, however, when referring to God, you are encouraged to use a variety of images and metaphors, reflecting the richness of the Bible's images for God.

Special Accommodations

Students requiring accommodations for a documented physical or learning disability should be in contact with the Director of the Academic Support Center (kmapes@lpts.edu) during the first two weeks of a semester (or before the semester begins) and should speak with the instructor as soon as possible to arrange appropriate adjustments. Students with environmental or other sensitivities that may affect their learning are also encouraged to speak with the instructor.

Expected Academic Performance

Individuals admitted to graduate study are expected to perform well consistently in academic work. This is translated into grades in the following way. Basic mastery of the body of knowledge required for a course at a level expected for graduate study results in scores in the B to B+ range. Grades of A- are granted for work which demonstrates: 1) basic mastery of the body of knowledge and 2) independent thought about the subject matter. Grades of A are granted for work which demonstrates: 1) mastery of the required body of knowledge, 2) independent thought about the subject matter, and 3) creative/integrative use of the material, exceptional writing and expression which integrates the material into a student's own system of thought, and/or exceptionally well done or articulated research.

Expectations for Class Attendance and Assignments

- 1. Assignments are due on the day they are assigned.
- 2. Given the intensive nature of this class, late assignments will be graded down one letter grade per day, beginning the day after the assignment is due.
- 3. Late assignments will not be accepted past two days overdue.
- 4. Reading and discussion are expected of all participants.
- 5. As per seminary policy, an incomplete will be granted only because of serious personal or family problems or a major illness. Procrastination and poor planning are not acceptable as illness. While these may be personal problems, they do not qualify as the kind of circumstantial disruption of life that will qualify for an incomplete. Acceptable excused absences include death of an immediate family member, an obligatory school function, or illness with a doctor's note.
- 6. In the event of an **excused** absence, the student must provide documentation of his or her absence. If you have an excused absence, you will be allowed to make-up assignments that you missed as a result of your absence. Arrangements for make-up assignments are to be coordinated with the instructors.

Academic Honesty

All work turned in to the instructors is expected to be the work of the student whose name appears on the assignment. Any borrowing of the ideas or the words of others must be acknowledged by quotation marks (where appropriate) and by citation of author and

source. Use of another's language or ideas from online resources is included in this policy, and must be attributed to author and source of the work being cited. Failure to do so constitutes plagiarism, and may result in failure of the course. Two occurrences of plagiarism may result in dismissal from the Seminary. Students unfamiliar with issues related to academic honesty can find help from the staff in the Academic Support Center. For more information, see the Policy for Academic Honesty in the Student Handbook.

Citation Policy

Citations in your papers should follow Seminary standards, which are based on these guides:

American Psychological Association. *Publication Manual of the American Psychological Association*. 6th ed. Washington, DC: American Psychological Association, 2010.

Turabian, Kate L., Wayne C. Booth, Gregory G. Colomb, and Joseph M. Williams. *A Manual for Writers of Research Papers, Theses, and Dissertations: Chicago Style for Students and Researchers*. 8th ed. Chicago: University of Chicago Press, 2013.

The Chicago Manual of Style. 16th ed. Chicago: University of Chicago Press, 2010.

Copies of these guides are available at the library and in the Academic Support Center.

Attendance Policy

According to the Seminary catalog, students are expected to attend class meetings regularly. In case of illness or emergency, students are asked to notify the instructor of their planned absence from class, either prior to the session or within 24 hours of the class session. Given the intensive and short nature of this course, missing more than one class may result in a low or failing grade in the course.

Email Policy

Emails will be responded to as quickly as possible. However, emails sent on the weekend may not be responded to until Monday. It is highly recommended that you provide sufficient time before an assignment is due for receiving a response to an email asking a question.

COURSE & ASSIGNMENT SCHEDULE

(Reading assignments need to be read for that date listed)

AFT= The Adolescent in Family Therapy

TCT = Treating Complex Trauma in Adolescents and Young Adults

DATE	TOPIC	READINGS/DUE DATES
	Syllabus & Introduction	AFT – 1-2
June 1st	A Comprehensive Multicultural/Developmental/Life Cycle Framework Basic Concepts for Treating Adolescents	AFT – 3 & 11 Connell (2010)
	The Pervasiveness of Trauma & Abuse	TCT – 1-2
	Assessment:	
	Solution-Focused Narrative Trauma-Informed Interviewing Skills	AFT – 4 TCT – 3-4; Appendices IVII.
June 2 nd	Assessment Tools (interviewing, self-report, other-report)	Adolescent Selected for
	Identifying the Problem	Interview DUE
	Identifying Attempted Solutions	
	Common Factors:	AFT – 1, 3, & 4
	Therapeutic Relationship; Building Alliance with Family	TCT – 5 & 8
June 3 rd	Multiculturalism & Diversity: Low-Income Families Ethnic/Racial Diversity	Bean et al. (2001) Sanders & Kroll (2000) Sellers et al. (2006) AFT – 12 TCT – 5

	Examining Specific Disorders in Adolescents:	AFT – 5
	ADD/ADHD IFS	AFT – 10
	Eating Disorders Underachievement & Other School-Related Problems	Research Paper Topic DUE Therapy Technique Demonstrations DUE
	Examining Specific Disorders in Adolescents: Mood Disorders (Anxiety, Depression, &	AFT – 6-7
June 4 th	Suicidality) Defiant & Disruptive Behaviors	AFT-8
	EFT Oppositional Behavior Psychosis	AFT – 9
	1 5) 613515	Therapy Technique Demonstrations DUE
	Specific Evidence-based Models for Treating Adolescents:	Baldwin, Christian, Berkeljon, Shadish, & Bean (2012)
	Integrative Treatment of Complex Trauma for Adolescents (ITCT-A)	Kaslow, Broth, Smith, & Collins (2012) Henggeler & Sheidow (2012)
	Multisystemic Therapy (MST)	TCT – 5-22 (Sections II. & II.)
June 5 th	Functional Family Therapy (FFT) Multidimensional Family Therapy (MDFT)	van der Stouwe, Asscher, Stams, Dekovic, & van der Laan (2014) – MST Meta-
	Brief Strategic Family Therapy (BSFT)	Analysis Diamond, Siqueland, & Diamond (2003) – ABFT
	Attachment-Based Family Therapy (ABFT)	Therapy Technique Demonstrations DUE

June 12 th	Adolescent Interview DUE
June 19 th	Research Paper DUE