

## PSYC 251: Behavior Disorders of Childhood (3 credits)

Department of Psychology, University of Vermont  
 Fall 2006, Tuesdays & Thursdays 9:30-10:45  
 Dewey Hall, Room 212



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 Office hours       Tuesdays 11am-1pm (Not on: 10/3 or 11/21)  
                           and by appointment  
 Course website   <http://www.uvm.edu/webct> (login & choose psyc251)



### Course Description

This course will provide a broad survey of emotional and behavioral disorders in children and adolescents. The primary focus of the course is the description of various behaviors, symptoms, syndromes and disorders, but research and theories concerning etiology will also be covered. Concepts and ideas will be applied to case examples to illustrate the complexity of factors involved. There is an emphasis on developmental pathways and risk and protective factors that influence the course and outcomes of development; that is, on why some children continue to have problems in adolescence and adulthood and others do not.

### Goals and Objectives

1. To become familiar with the theoretical models of childhood behavior disorders.
2. To become familiar with the research methods used to study the childhood behavior disorders.
3. To become familiar with the diagnostic/classification systems for the childhood behavior disorders.
4. To become familiar with the major behavior disorders of childhood. This will involve knowledge of the characteristics of each disorder, its associated features, its etiology, and its prognosis.
5. To become familiar with the effective treatment procedures for each disorder.
6. To gain experience identifying, researching, and writing-up a research topic related to emotional and behavioral disorders in children.

### Readings

Most of the assigned reading will be contained in the text listed below. Additional readings will be made available when they are assigned. *Please keep the information card on how to access INFOTRAC that is in your textbook. Some of the additional readings are available via INFOTRAC.*

Mash, E.J. & Wolfe, D.A. (2005). *Abnormal child psychology* (3<sup>rd</sup> ed.). Belmont, CA: Thomson Wadsworth.

Text website (additional resources, study material, and practice quizzes):

<http://psychology.wadsworth.com/mashwolfe3e>

## Evaluation

Student grades will be based on the following projects (**there are no extra credit options**):

- 1. Reading response (25%):** *Responses must be submitted on WebCT prior to class each Tuesday. Post responses as "replies" to that week's thread in the Discussion section of WebCT.* Reading responses should explore 1-2 different issues from that week's reading that demonstrates reflection and critical thinking (see suggestions and examples on page 5 of syllabus). Responses will be given a grade based on focus on scientific evidence (not personal opinion or experience), thoughtfulness and effort, and clarity of writing. There are 13 responses assigned; only 10 will be counted (*each worth 2.5% of your grade*). You should use your reading responses to spark and contribute to class discussions.
- 2. Research paper (25%):** You will work through four drafts of a research paper, much the way psychologists prepare papers for publication. You must provide extra copies of your drafts for each of your Peer Revision Group members (see below).

Draft	Description	%
Draft 1 9/21	2-3 pages, without citations, explaining what you already know about the topic	5%
Draft 2 10/12	2-3 pages, limited in scope and in outline form with a specific main idea relating two variables and at least 2 citations	5%
Draft 3 11/2	Expands the outline to a 3-4 page paper in APA format, at least 3 citations	5%
Draft 4 11/28	Final version, edited for clarity and accuracy, 4-6 pages. You will read, cite, and turn in copies of 5 or more recent peer-reviewed journal articles (2000-2006) in addition to any books or your text.	10%
TOTAL =		25%

- 3. Peer revision group (25%):** Also similar to how psychologists write, you will receive and provide feedback on each others' drafts. Four in-class peer revision group meetings will be held. Group members will read and provide written and verbal feedback on each others' drafts. Each of these meetings and sets of comments is graded as pass or fail (*no written comments for first meeting*).
- 4. Take-home final (25%):** The final will tie together the ideas of differential diagnosis, assessment, and treatment in a take-home conceptualization of several clinical cases.

A+ = 97-100	B+ = 87-89	C+ = 77-79	D = 69 or less
A = 94-96	B = 84-86	C = 74-76	F = 59 or less
A- = 90-93	B- = 80-83	C- = 70-73	

## Late policy

1. Assignments must be printed out and turned in during class on the day they are due.
2. 10% is deducted for each day an assignment is late (*must be turned in to my box in Mann Hall*)
3. Only late assignments accompanied by a note from the dean will not receive a late penalty.
4. **No assignments sent by email will be accepted. No exceptions.**

## Attendance and Participation

You must complete assigned readings before class, because classroom discussion will be based on this material. You are expected to attend and participate in every class. I recommend that you use your reading responses to contribute or spark class discussion. Although I will not take attendance in this class, students who are absent from class are responsible for missed activities and information. Information needed for your assignments and final will come from **both** your text and material shared in class. You will also be held responsible for any changes or additions to the syllabus that are announced in class.

## Respect & Dignity of All Persons

People with disabilities (especially those with severe and multiple disabilities) have historically been subjected to segregation and discrimination in virtually all aspects of community life (e.g., education, housing, work, recreation). Like many other minority groups of people, many stereotypes and unwarranted assumptions exist about individuals with disabilities that are reflected in terminology and other language that often serves to perpetuate these unhelpful stereotypes and limit opportunities for these individuals. Therefore, students are expected to be especially mindful that all class interactions and homework assignments should reflect respectful and dignified language when referring to people with disabilities.

## Confidentiality

Some members of this class may personally acquainted with people who have disabilities, their families, and service providers. Undoubtedly, in the course of class discussions, homework, or other intra-class communication, students will share their personal experiences related to class content. Therefore, it is vital that all such communications respect the confidentiality of those individuals with disabilities, their families, and service providers. This means that in sharing with the instructor or class members **do not use the names** of individuals or other identifying information. If such identifying information is inadvertently disclosed, you are obliged to keep that information confidential.

## Supports and Accommodations for UVM Students with Disabilities

If you are a person with a disability and require accommodations in order to access class information and/or activities, it is your responsibility to notify the instructor in writing of your accommodation or support needs **prior to the second class** so that appropriate actions can be taken. You may also wish to consider exploring supports through UVM ACCESS Office (656-7753) and online at: [www.uvm.edu/~access/](http://www.uvm.edu/~access/) The ACCESS Office also coordinates with the UVM Libraries to offer *Services for Users with Special Needs*. This information is online at: [library.uvm.edu/services/specialneeds/index.html](http://library.uvm.edu/services/specialneeds/index.html)

## Extra Help

If you are concerned about your performance in the class, see the instructor and develop a plan to improve. Coming to me after the course is over will not result in a grade change. Grades will be changed only if a mistake was made in the recording of grades. If you need help writing your paper you may want to access UVM's Writing Center: <http://www.uvm.edu/~wrtngctr/>

## Code of Academic Integrity

You are responsible for knowing and observing UVM's Code of Academic Integrity, so if you are unfamiliar with it you can review it on UVM's website <http://www.uvm.edu/~uvmppg/ppg/student/acadintegrity.html>. In brief: *Do not plagiarize, do not fabricate, do not cheat, and do not copy*. The principal objective of the policy on academic honesty is to promote an intellectual climate and support the academic integrity of the University of Vermont. Academic dishonesty includes knowingly permitting or assisting any person in the committing of an act of academic dishonesty.

## Assignment Tips

### Presentation

Spelling, grammar, and professional presentation matter! Remember to put your name, date, and PSYC 251, on all homework submissions. All assignments must be computer generated (please, no handwritten submissions). Unless otherwise noted in the directions for a specific assignment, all written work should be double-spaced in an easily-readable, 12-point font (e.g., Times, Palatino, Helvetica).

### Searching for Journal Articles

PsycINFO – Psychology's database of journal articles

<http://library.uvm.edu/articles/psychology.html> and click on PsycINFO (or uvm.edu, Libraries, Find Articles & More, Subject List, Psychology, PsycINFO).

Results come up with most recent first. Try combining 2 or 3 terms, limit to 2000-06, peer-reviewed, human, English, local holdings.

Google Scholar – Popular search engine of all journal articles

<http://scholar.google.com>

Use only to supplement PsycINFO. Results come up in order of how often they're been cited, which means they're likely to be older articles. Useful to find out big names in field, though, and then use PsycINFO to search for recent stuff by those authors.

### APA Format

APA format based on the *Publication Manual of the American Psychological Association, 5th edition* (2001). All citations should be presented in this format. Refer to the following web sites for guidance.

<http://owl.english.purdue.edu/owl/resource/560/01/>

[http://www.uvm.edu/~psych/?Page=APA\\_citation\\_guide.html&SM=course\\_menu.html](http://www.uvm.edu/~psych/?Page=APA_citation_guide.html&SM=course_menu.html)

There are also free, online, applications that will put information you supply into APA format. When using such tools, it should be noted that they often do not account for the full range of citation variations (e.g., chapters from edited books), may not account for nuances (e.g., whether a journal is seriated or not), and may not exactly match APA (e.g., use of full names rather than initials). Nonetheless, they can be a good starting point to help you -- then you need to check the details.

APA Citation Maker (OSLI), <http://www.oslis.org/apacitations/>

Landmarks Citation Machine, <http://citationmachine.net/>

**IDEAS FOR READING RESPONSES:**

- questioning how a disorder develops (e.g., etiology and risk factors)
- exploring similarities and differences between disorders
- considering environmental / contextual factors related to disorders
- difficulties in diagnosing a disorder
- proposing a research study
- highlighting a gap in our knowledge of a disorder
- questioning the effectiveness of a treatment

**Sample Response 1**

August 31, 2006

Chapter 1

**RISK VS. RESILIENCE**

Children are strongly influenced and shaped by the events that happen to them, such as poverty or parents' divorce or an illness. However, the examples of Raoul, Jesse, and Oprah demonstrate that resilience factors can help children overcome risk factors. Which resilience factors are needed to overcome a single risk factor? An interesting study would be to study an incoming kindergarten class, recording the internal and external risk and resilience factors throughout the children's early lives, and follow the children throughout childhood and adolescence to study the relationships between stressors and resilience factors. It is likely that the children with more supportive, stable families would be better able to overcome risk factors such as financial problems or illness or a violent event. It is also possible that different resilience factors are needed for different stressors.

**Sample Response 2****CHILDREN IN THERAPY**

- Children don't refer themselves for treatment, which is different from adults.
- So the parents and teachers and doctors are the ones who are distressed about the children.
- Do children get distressed about their own behavior or family situations?
- How does that make therapy different than when the clients are adults?
- To be effective, treatment seems to need to include parents and/or siblings. How is that done?
- Possible study: Children treated for a disorder such as the example of Georgia with obsessive compulsive symptoms. Half of treatments involve parents in therapy, learning some of the skills along with their kids, and half don't to test whether parent involvement in treatment is more effective.

## Schedule of Topics, Readings, and Assignments

*\*Note: Topics and readings may be updated during semester. Changes will be announced in class.*

Week	Date	Topic / Assignment	Reading * = Reading Response
1	8/29 8/31	Overview Introduction to Child Psychopathology	<i>Snow (2005)</i>
2	9/5 9/7	Theories & Causes of Child Psychopathology <b>Form Groups</b> Family, Social, and Cultural Influences	Chapter 1 & 2*
3	9/12 9/14	Research Review <b>Peer Revision Group 1</b> Assessment & Classification	Chapter 3* ( <i>skim</i> ) Chapter 4 (73-97)
4	9/19 9/21	Conduct Problems Conduct Problems <b>DRAFT 1 DUE (3 COPIES)</b>	Chapter 6* <i>Dishion (1999)</i>
5	9/26 9/28	Attention-Deficit/Hyperactivity Disorder <b>Peer Revision Group 2</b> <i>Guest speaker Betsy Hoza, ADHD Research</i>	Chapter 5* <i>Hoza (2005)</i>
6	10/3 10/5	Anxiety Disorders Anxiety Disorders	Chapter 7*
7	10/10 10/12	Mood Disorders Mood Disorders <b>DRAFT 2 DUE (3 COPIES)</b>	Chapter 8*
8	10/17 10/19	Intellectual Disabilities <b>Peer Revision Group 3</b> <i>Guest speaker Michael Giangreco, Student perspectives / Your Qs</i>	Chapter 9* <i>Broer (2005), 2 handouts</i>
9	10/24 10/26	Autism Pervasive Developmental Disorders	Chapter 10*
10	10/31 11/2	Sleep & Elimination Disorders Substance Use Disorders <b>DRAFT 3 DUE (3 COPIES)</b>	Chapter 12(348-356)* Chapter 12(370-374)
11	11/7 11/9	<b>Peer Revision Group 4 &amp; Paper Discussion</b> Learning & Communication Disorders	Chapter 11*
12	11/14 11/16	Eating Disorders <b>No Class - Work on Draft 4</b>	Chapter 13*
13	11/21 11/23	<b>No Class - Thanksgiving Recess</b> <b>No Class - Thanksgiving Recess</b>	
14	11/28 11/30	Child Maltreatment and Trauma Prevention <b>DRAFT 4 DUE (1 COPY + STUDIES) &amp; TAKE HOME FINAL ASSIGNED</b>	Chapter 14* <i>Greenberg et al. (2003)</i>
15	12/5 12/7	Treatment & Systems of Care Future Directions and Wrap-up	Chapter 4(98-107)* <i>Tolan (2005)</i>
	<b>12/8 11am</b>	<b>TAKE HOME FINAL DUE BY 11AM</b>	