RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY SCHOOL OF SOCIAL WORK COURSE SYLLABUS

Working with Survivors of Abuse & Trauma 100 % Online Program

19:910:523:

Summer 2023 Class Dates: Online Room: Online Index #: Instructor:
Office: Virtual
Phone: On request

E–mail:

Office Hours: Please ask course related questions via email or virtual office on Canvas. All other hours scheduled upon request (via email)

I. Catalog Course Description

This course examines social work practice theories and intervention approaches and skills as they apply to practice with childhood and adult survivors of physical, sexual and other forms of abuse and trauma. Particular attention will be made to the use of engagement, assessment, planning, intervention, evaluation and follow up on the micro, mezzo, and macro levels of practice. An emphasis will also be placed on diversity and use of social work ethics and values when working with survivors of abuse and trauma.

II. Course Overview

This course addresses theories, skills and interventions utilized in the direct practice with survivors of physical, sexual and other forms of interpersonal abuse and trauma. It builds upon foundational social work practice knowledge, values and skills by focusing on direct practice interventions with childhood and adult survivors of abuse and trauma. Specific theoretical frameworks such as empowerment, strengths, feminist perspective, and trauma's effects on brain and body will be used to discuss strategies for providing services to individuals who experienced trauma or physical, emotional, sexual abuse in childhood or adulthood. All steps in the social work intervention process will be addressed including, engagement, assessment, planning, intervention, evaluation and follow up, to identify specific skills and knowledge utilized to serve this population.

III. Place of Course in Program

This course is offered as an Advanced Practice Distribution Requirement. It is of particular interest to students the Violence Against Women Certificate Program. However, this course may be of use to all students intending to do any direct practice in multiple fields (e.g. mental health,

substance abuse, child welfare, family counseling) as interpersonal abuse and trauma impacts many clients. Satisfactory completion of the Professional Foundation year is required.

IV. Program Level Learning Goals and the Council of Social Work Education's Social Work Competencies

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). Students are welcome to review CSWE's accreditation standards at www.cswe.org

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the CSWE competencies within its curriculum. These competences serve as program level Learning Goals for the MSW Program and include the following. Upon completion of their MSW education students will be able to: demonstrate ethical and professional behavior; engage in diversity and difference in practice; advance human rights and social, economic and environmental justice; engage in practice-informed research and research-informed practice; engage with individuals, families, groups organizations and communities; intervene with individual, families, groups organizations and communities; and evaluate practice with individuals, families, groups, organizations, and communities.

Successful completion of this course will strengthen the student's Core Competencies and Practice Behaviors as outlined in the following passage from the <u>Educational Policy and Accreditation Standards</u> issued by the <u>Council on Social Work Education</u> (CSWE). This course will focus on the following four competencies:

 ${\bf Competency~6: Engage~with~Individuals, Families, Groups, Organizations, and}$

Communities. Clinical social work practitioners recognize the importance of the engagement process and understand the importance of differential use of self in initial encounters. Practitioners in clinical social work rely on the ecological perspective to inform the therapeutic relationship; are aware of how interpersonal dynamics and cultural factors shape the therapeutic relationship; and use relational techniques to develop a therapeutic relationship. Clinical social workers recognize how engagement with couples, families and groups may differ from individual approaches, and they develop differential engagement skills accordingly. Clinical social workers value collaboration and thus recognize the importance of clients' input in the development of their treatment goals. Clinical social workers use the engagement process to help clients convey their thoughts and concerns within the therapeutic relationship as well as to other providers/stakeholders.

Competency 7: Assess Individuals, Families, Groups, Organizations, and

Communities. Clinical social workers understand the importance of the assessment process and recognize that it is ongoing and that it directly informs their interventions. Clinical social workers value holistic assessment and therefore use the bio—psycho—social—spiritual assessment process as well as analysis of clients' strengths and resiliencies, their coping skills, and their adaptation to traumatic and stressful life events in a full assessment. Practitioners of clinical social work understand how their personal experiences may impact the assessment process. Clinical social workers recognize the power of intergenerational family patterns on individuals and explain these to clients while avoiding deterministic approaches to identifying such patterns.

When applicable, clinical social workers rely on the *Diagnostic and Statistical Manual of Mental Disorders* to enhance their assessment, to conduct differential diagnosis, and to communicate with other healthcare providers about clients' presenting problems and symptomatology. Clinical social workers elicit client feedback about their experience of the assessment process, reflect upon varied meanings of the assessment, and share these assessment outcomes with clients.

Computered 8: Intervene with Individuals, Families, Groups, Organizations, and Communities. Clinical social workers select effective modalities for intervention based on the extant research as well as the client's cultural background. Clinical social work practitioners integrate their knowledge of various individual, family, and group psychotherapeutic modalities, as well as crisis intervention techniques and community—wide referrals, to intervene effectively; demonstrate flexibility by tailoring interventions to suit the needs of multiple client populations; and understand the effects of the social environment on client well—being. Clinical social workers therefore recognize the need to intervene on mezzo and macro levels. Practitioners in clinical social work critically select, apply, and evaluate best practices and evidence—informed interventions; they value collaboration with the client and other professionals to coordinate treatment plans. Clinical social workers maintain knowledge of the communities they serve in order to ensure that clients are connected with relevant services and resources in an effective manner, while eliciting client feedback about how the interventions are impacting the client.

Competency 9: Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities. Clinical social workers value empirically derived evaluation of practice and assure that it is an ongoing component of advanced practice with diverse individuals, families, groups, organizations and communities. Clinical social workers recognize the critical need to use client feedback to evaluate clinical processes and outcomes with diverse populations. Clinical social workers understand theories of human behavior and the social environment, the systematic effects of oppression and marginalization on the well—being of clients, and critically apply this knowledge in evaluating outcomes. Clinical social workers understand qualitative and quantitative methods for evaluating outcomes and practice effectiveness, use appropriate methods for evaluating practice, and rely upon the scholarly literature to guide their evaluation processes. Clinical social workers also recognize that evaluating practice means examining barriers to effective treatment including but not limited to countertransference, systems—and community—knowledge, and client satisfaction.

V. Course Level Learning Goals

At the conclusion of this course, students will:

- 1. Develop an understanding of the theoretical frameworks that explain the occurrence of interpersonal violence and abuse, define various forms of violence and examine its scope globally.
- 2. Demonstrate an understanding of trauma and its impact on the neurobiology of the brain, identify trauma responses and its impact on human functioning.
- 3. Examine the impact of culture on an individual's experience of trauma and explore frameworks for trauma informed and culturally competent practice.

- 4. Apply and integrate issues of client diversity (including ethnicity, culture, gender, age, sexual orientation, disability, spiritual beliefs) at each stage of the clinical process from engagement through to termination.
- 5. Identify, develop and conduct culturally competent risk assessment and safety planning, implement varied evidence-based trauma informed interventions and evaluate treatment outcomes.
- 6. Apply all steps in the social work intervention process including, engagement, assessment, treatment planning, intervention, evaluation and follow up with childhood and adult survivors of abuse and trauma on the micro, mezzo, and macro levels of practice.
- 7. Identify values and ethics of clinical practice with survivors of abuse and trauma including the ability to develop self-awareness of personal attitudes, beliefs and values that impact their ability to provide services and effectively practice self-care.

VI. School of Social Work Mission Statement and School-Wide Learning Goals

The mission of the School of Social Work is to develop and disseminate knowledge through social work research, education, and training that promotes social and economic justice and strengths individual, family, and community well-being, in this diverse and increasingly global environment of New Jersey and beyond.

School Wide Learning Goals: Upon graduation all students will be able to:

- 1. Demonstrate Ethical and Professional Behavior;
- 2. Engage Diversity and Difference in Practice; and
- 3. Engage, Assess, and Intervene with Individuals, Families, Groups, Organizations, and Communities

VII. Required Texts

There is no one textbook that is adequate for our purposes, given the breadth of our work on policies and programs affecting survivors of violence in this class. For this reason, we are going to be reading from a wide range of interdisciplinary books and journals. For each Module, you are required to select and read THREE articles or book chapters of your choice unless noted.

However, we will be covering most, if not all, of the chapters from the following inexpensive books:

- Herman, J. (1997) or (2015). *Trauma and Recovery*. New York: Basic Books. [Both editions of this book are acceptable]
- Van der Kolk, B. (2015). The Body Keeps the Score: Brain, Mind, and the Body in the Healing of Trauma. New York: Viking.

Other required readings (separate from textbook) are available through the Rutgers University Library "Reading List" that is integrated into your Canvas course. To find your readings:

Click on the "Reading List" tab in the Canvas navigation bar to the left hand side of the course. Please note: this list contains links to articles and other required readings separate from the textbook (if applicable). Please follow the syllabus and/or Canvas Readings and Resources page in each module for more specific required readings and resources for each week (including textbook/media).

For further instructions please click here for a video tutorial

VIII. Course Requirements

Course Format. While this course is founded upon student participation – a critical aspect of your grade – it will utilize lectures, videos, and class discussions. As professional practitioners and advocates, it is essential for social workers to articulate ideas clearly and persuasively. It is important that everyone feel free to participate in classroom activities, discussion, and assignments. Learning involves dialogue and exchange, taking chances, sharing new ideas with others. Whether you recognize it or not, all of you are experts in some arenas of social work practice. All students are encouraged to participate through discussions in class, both small and large groups, and with the instructor.

This course requires graduate level reading, writing, and analytical skills. The papers will be graded both on substance and on the ability of the student to write succinctly and in terms understandable to a wide audience.

<u>Respect for others in this course</u>. Social work courses are often messy and ambiguous, with room for multiple and diverse perspectives. We all must attempt to treat each other with respect when opinions are shared. Language should be used which recognizes diversity and is respectful of others. It is also imperative, as we struggle with complex political, personal and social issues, that we not silence others by assuming that there are "politically correct" lines of thought that cannot be challenged. Let us attempt to struggle for intellectual growth and mutual respect as we endeavor in this process!

Furthermore, please remember that communicating online should not be any different from when you communicate in a face-to-face class. Please refrain from using internet slang, abbreviations and acronyms as not everyone will know them. During this course, it may be difficult to disguise references to specific organizations and people, so such information must stay in the online classroom. Confidentiality is vital. Lastly, all communication should be courteous and professional. Here are the 10 Best rules of netiquette.

Contacting the Instructor. Your instructor can be contacted via Virtual Office, or email.

Virtual office: Please use the Virtual Office for all course questions that you feel comfortable asking publicly. I check my Virtual Office messages every 24 to 48 hours. For confidential correspondence, please send an email.

Email: When sending email to me and/or other members of our class, you still must identify yourself fully by **name**. I will respond to course related questions within 24–48 hours.

<u>Attendance</u>. This is an asynchronous online course. You are expected to log on to the course on a daily basis. You will need to log on several times throughout the Module in order to complete assignments and participate in threaded discussions. Failure to complete threaded discussions will be considered an equivalent of an absence. I will keep track of participation based on how individual student access reports as well as interactions with course activities. A lack of frequent activity in three Modules or more will result in a failing final course grade. <u>Late threaded discussion posts will not be accepted and will result in a zero</u>.

<u>Participation</u>. Your active participation in this course is vital to the course and your learning. Your classmates and your professor depend on you to share your responsibility reading the articles, participating in fully in the online discussions, and giving feedback to your peers. You are expected to participate in a variety of ways and you will be graded as such.

You are expected to do the following:

- 1. Log into the Canvas website starting at the beginning of each Module (every 4 days) to review the lecture, watch the multi–media, and assess the threaded discussion question(s).
- 2. Log into Canvas website at least three times a Module to complete the work for this class as outlined.
- 3. Use the lectures, videos, and articles to help you engage with and understand the content presented
- 4. Meet deadlines for all assignments
- 5. Create & post an introductory video for your classmates

<u>Canvas.</u> Canvas is a course management program designed to aid in the communication and dissemination of course information and materials. These materials include the syllabus, assignments, and PowerPoint handouts. Additionally, there are links to websites, an online gradebook, and opportunities to e-mail the instructor and your classmates (without knowing their e-mail address).

All correspondence, including submission of assignments and e-mail communications, will be conducted through Canvas. **Please ensure that the e-mail registered with the University is the e-mail you want to use for your correspondence.** For technical help 24 hours a day / 7 days a Module, please contact help@oit.rutgers.edu or call 877-778-8437.

Academic Integrity

As per Rutgers University Academic Integrity Policy, "Students are responsible for understanding the principles of academic integrity and abiding by them in all aspects of their work at the University. Students are also encouraged to help educate fellow students about academic integrity and to bring all alleged violations of academic integrity they encounter to the attention of the appropriate authorities." All SSW students are expected to review and familiarize themselves with the RU Academic Integrity Policy in its' entirety. As per Rutgers University Academic Integrity Policy, "The principles of academic integrity require that a student: make sure that all work submitted in a course, academic research, or other activity is the student's own and created without the aid of impermissible technologies, materials, or collaborations; properly

acknowledge and cite all use of the ideas, results, images, or words of others; properly acknowledge all contributors to a given piece of work; obtain all data or results by ethical means and report them accurately without suppressing any results inconsistent with the student's interpretation or conclusions; treat all other students ethically, respecting their integrity and right to pursue their educational goals without interference. This principle requires that a student neither facilitate academic standards by others nor obstruct their academic progress; uphold the ethical standards and professional code of conduct in the field for which the student is preparing." Students should review all types of Academic Integrity Violations per the RU Academic Integrity Policy.

Below are some of the more common violations, as articulated in Rutgers University Academic Integrity Policy:

"Plagiarism: Plagiarism is the use of another person's words, ideas, images, or results, no matter the form or media, without giving that person appropriate credit. To avoid plagiarism, a student must identify every direct quotation using quotation marks or appropriate indentation and cite both direct quotation and paraphrasing properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are: Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution: Paraphrasing without proper attribution, i.e., presenting in one's own words another person's written words or ideas as if they were one's own, regardless of the nature of the assignment; Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources, regardless of format, without proper attribution."

"Cheating: Cheating is the use or possession of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results or reports, analyses, and other textual or visual material and media as one's own work when others prepared them. Some common examples are: Prohibited collaboration: receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted; Copying another student's work or answers on a quiz or examination; Using or having access to books, notes, calculators, cell phones, technology, or other prohibited devices or materials during a quiz or examination; Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved; Preprogramming a calculator or other device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.; Acquiring a copy of an examination from an unauthorized source before the examination; Having a substitute take an examination in one's place; Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement; Submitting as one's own work a term paper or other assignment prepared, in whole or in part, by someone else."

Use of artificial intelligence (AI) such as ChatGPT is only permitted to help you brainstorm ideas and see examples, unless otherwise directed by your instructor. All material submitted in the course must be your own as per the Academic Integrity policy.

Any faculty member or academic administrator who becomes aware of a possible academic integrity violation must initiate a formal complaint with the Office of Student Conduct and the SSW's Academic Integrity Facilitator (Patricia Findley at pfindley@ssw.rutgers.edu). The AIF deciding the case (the "adjudicator") shall notify the accused student of the allegation in writing or by electronic communication within fifteen working days of the time the faculty member becomes aware of the alleged violation.

Once the student has been notified of the allegation, the student may not drop the course or withdraw from the school until the adjudication process is complete. A TZ or incomplete grade shall be assigned until the case is resolved. For more information, see RU Academic Integrity Policy and Procedures for Adjudicating Academic Integrity Violations

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and major course assignments submitted for grading: On my honor, I have neither received nor given any unauthorized assistance on this examination/assignment.

Receiving Course Messages through Email Students are expected to regularly check their Rutgers email account for course messages. If students prefer to use a non-University email account, they are responsible for setting up account preferences such that mail sent to their Rutgers account is automatically forwarded to their other account.

IX. Disability Accommodation

Rutgers welcomes students with disabilities into all of its 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 provide documentation (learn more at https://ods.rutgers.edu/students/documentation-guidelines). If the documentation supports your request for reasonable accommodations, your campus' 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://ods.rutgers.edu/students/registration-form

Writing Assistance

Success in graduate school and within the larger profession of social work depends on strong writing skills. Several resources are available to help students strengthen their professional and academic writing skills. Writing assistance is available to all MSW students as described below.

All MSW Students

All MSW SSW students: New Brunswick, Camden, Newark, Intensive Weekend, online and blended are eligible to access writing assistance at the New Brunswick Learning Center. Online tutoring is available.

https://rlc.rutgers.edu/student-services/writing-tutoring

Newark Students Only

The Newark writing center is available for MSW students on the Newark campus by appointment. Online tutoring may be available. http://www.ncas.rutgers.edu/writingcenter

100% online students

Fully online degree program students now have access to Smarthinking, a service sponsored by Rutgers Teaching and Learning with Technology (TLT). Fully online degree students are provided **TEN hours of service per semester**, after which you may purchase additional time. Please see the link under "Course Essentials" for access to the writing center.

Additional Online Resources

APA Style

All students are expected to adhere to the citation style of the *Publication Manual of the American Psychological Association*, 7th edition (2020). It can be purchased at <u>APA Manual 7th Edition</u>. The Purdue OWL website also provide assistance with APA style https://owl.english.purdue.edu/owl/resource/560/01/

Email Etiquette for Students

https://owl.english.purdue.edu/owl/resource/694/01/

Office for Violence Prevention and Victim Assistance

Our school is committed to fostering a safe, productive learning environment. Title IX and our school policy prohibit discrimination on the basis of sex, which regards sexual misconduct — including harassment, domestic and dating violence, sexual assault, and stalking. We understand that sexual violence can undermine students' academic success and we encourage students who have experienced some form of sexual misconduct to talk to someone about their experience, so they can get the support they need.

Confidential support and academic advocacy are available through the Rutgers Office for Violence Prevention and Victim Assistance, **848.932.1181**, http://vpva.rutgers.edu. Services are free and confidential and available 24 hrs./day, 7 days a week.

Active Shooter Resources

Over the years, there has been an increase in the number of active shootings on campus. It is important that you know what to do in cases there is an active shooter on campus. Please go to this site to retrieve information that will reduce your personal risk in case of an active shooting on campus-http://rupd.rutgers.edu/shooter.php.

X. Diversity Statement

The RU SSW supports an inclusive learning environment where diversity, individual differences and identities (including race, gender, class, sexuality, religion, ability, etc.) are respected and recognized as a source of strength. Students and faculty are expected to respect differences and contribute to a learning environment that allows for a diversity of thought and worldviews. Please feel free to speak with me if you experience any concerns in this area.

XI. Reaching Out and Student Success and Well-Being

Graduate School is challenging no matter what and this has been a particularly challenging time period for all of us. My goal is to support your success in the classroom despite these challenges. If you are struggling academically or if you have other concerns, please reach out to me and communicate your concerns. I am here to help you with course content and I can refer you to other academic support and/or resources to support your well-being as necessary. Please remember that the Office of Student Affairs and your advisor are also here to help facilitate your success in our program as well. A variety of resources can be found on including supports around behavioral health/counseling, sexual violence and misconduct diversity and inclusion and bias reporting by campus at https://socialwork.rutgers.edu/current-students/office-student-affairs.

XII. Course Assignments

There are 5 assignments for this course. More details are provided in the Course Home section on the Canvas website. All assignments are to be electronically posted in the Digital Drop Box on Canvas no later than 11:59 p.m. E.T. on the due date. Please save all of your assignments with the same document name: last_name.doc. (E.g. Khetarpal.doc.) All assignments MUST be compatible with Microsoft Word. It is the student's responsibility to ensure that assignments left in the digital dropbox can be retrieved and read by the instructor. Once graded, I will post your assignment in the Digital Drop Box and then send an e-mail indicating that your graded paper is posted.

Threaded Discussions: Students will participate in an online threaded discussion with other classmates to discuss ideas, thoughts, and beliefs about the readings and other class materials. **Students will be divided into small randomized groups of 6–7 students based on class size and participate in numerous discussions, posting at least 3 times for each question asked (one original response to the instructor's question, and responses to 2 classmates). All postings are due by 11:59 p.m. E.T. on the date assigned. Please refer to the guidelines for more information.**

1. Self-Care Plan: Students will conduct a literature review on secondary and vicarious traumatization and the various ways in which social work practitioners who work with survivors may be affected. Students will then create an individual self-care plan that includes integrated literature—based strategies <u>and</u> a creative approach to assist with self-care. This plan is due by 11:59 p.m. E.T. at the end Module 2, <u>Date:</u>

- **2. Media Activity** Students will complete a short media activity at the end of Module 5 that focuses on providing an experiential learning on engagement and assessment while working with survivors of complex trauma. The Media activity guidelines will provide you with access and completion requirements. This is due by 11.59 p.m. E.T. at the end of Module 5, Date:
- 3. Online Case Presentation (Mid-term Assignment): Students will discuss one of their cases and provide feedback to classmates using threaded discussions on Canvas. Students will outline their case that describes the work that was done, challenges faced, and lessons learned. Students will then seek feedback from their classmates on other options to use with their client. Finally, students will provide feedback to cases presented by two other classmates. Please refer to the assignment guidelines for more details. This is due by 11:59 p.m. E.T. at the end of Module 7, Date:
- 4. Intervention Paper Outline: Students will develop and submit a brief one page outline in preparation for the Final Intervention Paper. Students will identify and describe any one or a maximum of two intervention strategies covered in this course syllabus/content in responding to survivors and/or perpetrators including the reasons for choice of intervention in relation to the client's treatment goals. This can be described in a narrative or in bullet pointed style. Students will also explain an evaluation plan, including the expected outcomes from the intervention, and methods of measuring the outcomes. Please refer to the assignment guidelines for more details. This is due by 11:59 p.m. E.T. at the end of Module 11, Date:
- 5. Intervention Paper Students will complete a 13–15 page (maximum) paper identifying one or a maximum of two interventions and develop a corresponding evaluation plan to address the needs of an ascertained population (could include an individual, family, or community) in the field of trauma and abuse, using an identified theoretical framework (chosen from the class discussions). Please refer to the assignment guidelines for more details. This is due by 11:59 p.m. E.T. at the end of Module 14, Date:
- 6. **Self–Assessments** Quizzes are added to every Module. These quizzes are a tool to gauge your progress through the course and identify areas that you might like more resources and support from the instructor or from your classmates. These quizzes are not mandatory and are not graded but are encouraged as a contributing tool aimed to enhance your learning experience.

XIII. Grading

Activity:	Value:	<u>Due Date:</u>
Online threaded discussions (participation)	30%	End of Module
Self-Care Plan	15 %	
Media Activity – Complex Trauma Online Case	5%	
Presentation: Mid-Term Paper	20%	
Intervention: Final Paper Outline	5%	
Intervention: Final Paper	25%	
TOTAL:	100%	

Grading for this MSW course is as follows:

A = Exceptional or outstanding work; student demonstrates full understanding of material, displays unusual analytical and/or creative ability; extremely thorough work; must be well organized and conform to accepted standards of writing including correct grammar, accurate spelling, etc. Work is completed by due date.

 $\mathbf{B}+=$ Above average work in terms of understanding material and ability to apply material from lectures and readings to own proposed project. Work must be organized and conform to accepted standards of writing. Work is completed by the due date.

 ${\bf B}={\bf Good}$ work; demonstrates understanding of material; written materials well organized and conforms to accepted standards of grammar, spelling, punctuation, etc. Work is completed by the due date.

C = Acceptable work, similar to C+ but reveals greater problems in applying the concepts and techniques to own work, fails to cover some important point(s). Some problems in organizing and presenting written materials.

The quality of the writing as well as the content is important, so students should check spelling and grammar as well as sentence and paragraph construction. It is a very good idea to write a draft of your papers and then make an outline of your draft before preparing final versions. This helps assure that your paper is flowing in a coherent manner and that you are effectively making and supporting your main points.

Written work should meet basic standards of writing proficiency, and should conform to accepted standards of citation. The format found in the Publication Manual of the American Psychological Association (APA) should be used for all papers. If you are unsure of how to cite sources, please see the instructor. *Remember that plagiarism is a serious offense and violates the standards for academic integrity*. Written assignments are graded based on the following criteria:

- thoroughness and completeness of content;
- clarity and logic of presentation;
- evidence of critical thought;
- quality of writing.

Late Assignments: All assignments are due on time and on the date assigned. Grades will be reduced by 10 points on the first day if the assignment is late or incomplete. After the first day late, assignments will be reduced by 5 points each subsequent day. After one Module from the assignment due date, zero credit will be given for the assignment. (Exceptions will be made only in extreme circumstances and must be approved by the instructor **PRIOR** to the due date.) If a due date conflicts with a religious observance, please consult with the professor prior to the assignment's due date.

Incomplete grades: Incompletes will only be granted at the discretion of the instructor under special circumstances. It is the student's responsibility to request an Incomplete from the instructor before the end of the semester. A request signed by the student and the faculty member must be on file when grades are submitted.

XIV. Library Resources

The Rutgers University library system contains a very impressive collection of resources and materials that will be of great assistance to you as you complete assignments for this class and your other graduate courses. Many of these materials can be accessed on-line. The university librarians offer free tutorials on using the in-library services and on-line search tools; understanding how to navigate these tools is vital for ensuring timely, thorough, and proficient completion of the assignments for this course.

On Canvas, there is a course that includes instructions to using the Rutgers' libraries.

Some library tools that may be of particular relevance to this course include a course found on Canvas (Instructions for using Rutgers' Libraries). Additionally, under the main library website, check out the

following: http://www.libraries.rutgers.edu.proxy.libraries.rutgers.edu/rul/index.shtml

- 1. *The Electronic Reference Sources* under the Reference link. You can find on-line links for the APA Style Manual, assistance with grammar and writing, and many other useful connections under (see Style Manuals).
- 2. Subject Research Guides under the Research Resources link. The Social Work category contains links to Government Resources (state and federal websites relevant to policy research) and numerous other resource sites and reference collections.
- 3. RefWorks, a web-based bibliography and citation manager.

XV. Course Evaluation

Rutgers University issues a survey that evaluates both the course and the instructor. This survey is completed by students toward the end of the semester; all answers are confidential and anonymous. An additional mid semester evaluation may be distributed.

You are also encouraged to provide me with feedback on the course content and format during each class session, as well as during my office hours: Are the material and concepts presented in a clear manner? Is adequate time being given to individual topics? Are different learning styles being accommodated?

XVI. Course Content and Reading Assignments

Module One

Topics: Course Overview & Types of Abuse & Trauma

Required Readings and Resources

Please read the following selection in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY.: BasicBooks:

• Chapter 1: "A Forgotten History" (pp: 7–32)

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group.:

- Chapter 1: "Lessons from Vietnam Veterans" (pp. 7–21)
- Chapter 2: "Revolutions in Understanding Mind and Brain" (pp. 22–38)

The following selections are available on Course Reserves with the library:

Jasinski, J. L. (2001). Theoretical explanations for violence against women. In C. M. Renzetti, J. L. Edleson, & R. K. Bergen (Eds.), *Sourcebook on violence against women* (pp. 5–21). Thousand Oaks, CA: Sage Publications.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Van der Kolk, B., & McFarlane, A.C. (2007). The black hole of trauma. In B.A. van der Kolk, A.C. McFarlane, & L. Weisaeth (Eds.), *Traumatic stress: The effects of overwhelming experience on mind, body, and society* (pp.3–23). New York: The Guilford Press.
- Stewart, M. W., Dobbin, S. A., & Gatowski, S. I. (1996). "Real rapes" and "real victims": The shared reliance on common cultural definitions of rape. *Feminist Legal Studies*, 4(2), 159–177.
- Tanner, K., & Turney, D. (2003). What do we know about child neglect? A critical review of the literature and its application to social work practice. *Child and Family Social Work*, 8, 25–34.
- Tjaden, P., & Thoennes, N. (2000). Prevalence, incidence and consequences of violence against women: Findings from the national violence against women survey. Washington: National Institute of Justice.

You might also like to view the following videos:

• OJPOVC. "Through Our Eyes: Children, Violence, and Trauma-Introduction." *YouTube*. Office for Victims of Crime, 27 Feb. 2013. Web. 15 Sept. 2016.

• Brush, John. "Honor Killings: The Said Sisters Amina & Sarah." *Vimeo*. Fox, 8 Aug. 2010. Web. 15 Sept. 2016.

Module Two

Topics: Self Reflection / Secondary Trauma / Vicarious Traumatization

Required Readings and Resources

Please read the following selection in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY: BasicBooks:

• Chapter 7: "A Healing Relationship" (pp. 133–154)

The following selections are available by clicking the links provided:

• Baird, S., & Jenkins, S. R. (2003). Vicarious traumatization, secondary traumatic stress, and burnout in sexual assault and domestic violence agency staff. *Violence & Victims*, *18*(1), 71–86.

Please watch the following videos:

- Bynum, N. (2009). Dr. Siddharth Ashvin Shah describes Vicarious Trauma (Secondary Traumatic Stress). Retrieved September 20, 2016 (Links to an external site.)
- L. (2009, March 15). Trauma Stewardship. Retrieved September 20, 2016
- <u>T. (2015, April 23). Beyond the Cliff | Laura van Dernoot Lipsky | TEDxWashingtonCorrectionsCenterforWomen. Retrieved September 20, 2016</u>

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Azar, S.T. (2000). Preventing burnout in professionals and para professionals who work with child abuse and neglect cases. *Journal of Clinical Psychology*, 56(5), 643–663.
- Bell, H., Kulkarni, S., & Dalton, L. (2003). Organizational prevention of vicarious trauma. *Families in society*, 84(4), 463–470.
- Bride, B.E., Radey, M., & Figley, C.R. (2007). Measuring compassion fatigue. *Clinical Social Work Journal*, *35*, 155–163.
- Dane, B. (2002). Duty to inform: Preparing social work students to understand vicarious traumatization. *Journal of Teaching in Social Work*, 22(3/4), 3–20.
- Fahy, A. (2007). The unbearable fatigue of compassion: Notes from a substance abuse counselor who dreams of working at Starbuck's. *Journal of Clinical Social Work, 35*, 199–205.
- Geller, J., Madsen, L. & Ohrenstein, L. (2004). Secondary trauma: A team approach. *Clinical Social Work Journal*, *32*, 415–430.

- Harrison, R.L., & Westwood, M.J. (2009). Preventing vicarious traumatization of mental health therapists: Identifying protective practices. *Psychotherapy Theory, Research, Practice, Training*, 46(2), 203–219.
- <u>Iliffe, G., & Steed, L.G. (2000)</u>. Exploring the counselor's experience of working with perpetrators and survivors of domestic violence. *Journal of Interpersonal Violence*, *15*(4), 393–412.
- Jenkins, S. R., Mitchell, J. L., Baird, S., Whitfield, S. R., & Meyer, H. L. (2011). The counselor's trauma as counseling motivation: Vulnerability or stress inoculation?. *Journal of Interpersonal Violence*, 26(12), 2392–2412.
- Schauben, L.J., & Frazier, P.A. (1995). Vicarious trauma: The effects on female counselors of working with sexual violence survivors. *Psychology of Women Quarterly*, 19, 49–64.
- <u>Slattery, S. M. & Goodman, L. A. (2009). Secondary traumatic stress among domestic violence advocates: Workplace risk and protective factors. *Violence Against Women, 15*(11), 1358–1379.</u>

Module Three

Topic: What is Trauma & the Neurobiology of Trauma?

Required Readings and Resources

Required Readings:

Please read the following selections in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY: BasicBooks:

- Chapter 2: "Terror" (pp: 33–50)
- Chapter 3: "Disconnection" (pp: 51–73)
- Chapter 4: "Captivity" (pp: 74–95)

OR

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group.:

- Chapter 4: "Running for Your Life: The Anatomy of Survival" (pp. 51–73)
- Chapter 5: "Body, Brain, Connections" (pp. 74–86)

Please watch the following video (**Note:** A transcript for this video may be found to the right of the media player):

 Trauma and Attachment With Bessel van der Kolk, M.D., written by Bessel van der Kolk, fl. 1970-2014; presented by Bessel van der Kolk, fl. 1970-2014 (PESI Inc., 2012), 1 hour 27 mins

Optional Readings & Resources

The following selections are available by clicking the links provided:

- Andersen, S., Tomada, A., Vincow, E.S., Valente, E., Polcari, A., & Teicher, M.H. (2008).
 Preliminary evidence for sensitive periods in the effect of childhood sexual abuse on regional brain development. The Journal of Neuropsychiatry and Clinical Neurosciences, 20(3), 292–301.
- Carlson, E., & Dalenberg, C.J. (2000). A conceptual framework for the impact of traumatic experiences. *Trauma*, *Violence* & *Abuse*, 1, 4–28.
- Felitti, V.J., Anda, R., Nordenberg, D., Williamson, D.F., Spitz, A., Edwards, V., Koss, M.P., & Mark, J.S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults the adverse childhood experiences (ACE) study. *American Journal of Preventative Medicine*, 14(4).
- Kirmayer, L. J., Gone, J. P., & Moses, J. (2014). Rethinking Historical Trauma. *Transcultural Psychiatry*, 51(3), 299–319. https://doiorg.ezproxy.montclair.edu/10.1177/1363461514536358
- Graff, G. (2014). The intergenerational trauma of slavery and its aftermath. *The Journal of Psychohistory*, 41(3), 181–197.

The following optional selections are available on <u>Course Reserves (Links to an external site.)</u> or by clicking the link, if provided.

- Ford, J.D., Stockton, P., Kaltman, S., & Green, B.L. (2006). Disorders of extreme stress (DESNOS) symptoms are associated with type and severity of interpersonal trauma exposure in a sample of healthy young women. *Journal of Interpersonal Violence*, 21(11), 1399–1416.
- McFarlane, A.C., & de Girolamo, G. (1996). The nature of traumatic stressors and the epidemiology of posttraumatic reactions. In B.A. van der Kolk, A.C. McFarlane, & L. Weisaeth (Eds.), *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society* (pp. 129–154). New York: The Guilford Press.
- McFarlane, A.C., & Yehuda, R. (1996). Resilience, vulnerability, and the course of posttraumatic reactions. In B.A. van der Kolk, A.C. McFarlane, & L. Weisaeth (Eds.), *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society* (pp. 155–181). New York: The Guilford Press.
- Sarid, O., & Huss, E. (2010). Trauma and acute stress disorder: A comparison between cognitive behavioral intervention and art therapy. *The Arts in Psychotherapy*, *37*, 8–12.
- Solomon, E.P., & Heide, K.M. (2005). The biology of trauma: Implications for treatment. *Journal of Interpersonal Violence*, 20(1), 51–60.
- Vaitl, D., Birbaumer, N., Gruzelier, J., Jamieson, G.A., Kotchoubey, B., Kübler, A., & Weiss, J. (2005). Psychobiology of altered states of consciousness. *Psychological Bulletin*, 131(1), 98–127.
- Van der Kolk, B. (2006). Clinical implications of neuroscience research in PTSD. *Annals of the New York Academy of Sciences*, 1071(1), 277–293.

Module Four

Topics: Effects of & Responses to Abuse & Trauma

Required Readings and Resources

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group.:

- Chapter 7: "Getting on the Same Wavelength: Attachment and Attunement" (pp: 105–122)
- Chapter 8: "Trapped in Relationships: The Cost of Abuse and Neglect" (pp. 123–135)
- Chapter 9: "What's Love Got to Do With It?" (pp: 136–148)

Please watch the following video (**Note:** A transcript for this video can be found to the right of the video player):

• <u>Van der Kolk, fl. 1970–2014, B. (2013). Frontier of Trauma Treatment. Retrieved September</u> 29, 2016.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided. **You may choose from the following subject-areas based on your area of interest:**

Mental Health:

- Amar, A. F. (2006). College women's experience of stalking: Mental health symptoms and changes in routines. *Archives of Psychiatric Nursing*, 20(3), 108-116.
- Avery, L., Massat, C. R., & Lundy, M. (2000). Posttraumatic stress and mental health functioning of sexually abused children. *Child & Adolescent Social Work Journal*, 17(1), 19–34.

Trafficking and other forms of violence against people in the sex trades

- Caputo, G. (2009). <u>Early life trauma among women shoplifters and sex workers</u>. *Journal of Child & Adolescent Trauma*, 2, 5–17.
- Decker, M.R., Tomko, C., Wingo, E., Sawyer, A., Peitzmeier, S., Glass, N. & Sherman, S.G. (2018). A brief, trauma-informed intervention increases safety behavior and reduces HIV risk for drug-involved women who trade sex. *BMC Public Health*, *18*(75), 1-11. doi: 10.1186/s12889-017-4624-x
- Rekart, M.L. (2005). Sex-work harm reduction. *The Lancet*, *366*(9503), 2123-2134. doi:10.1016/S0140-6736(05)67732-X
- Wahab, Stéphanie and Panichelli, M. (2013). Ethical and human rights issues in coercive interventions with sex workers. *Affilia: Journal of Women and Social Work.* 28(4), 344-349. doi: 10.1177/0886109913505043

Running Away:

• <u>Kim, M.J., & Tajima, E.A. (2010). Early child maltreatment, runaway youths, and risk of delinquency and victimization in adolescence: A meditational model. *Social Work Research*, 33(1), 19-28.</u>

- Peled, E., & Cohavi, A. (2009). The meaning of running away for girls. *Child Abuse & Neglect*, 33(10), 739–749.
- Tyler, K.A., Johnson, K.A., & Brownridge, D.A. (2008). A longitudinal study of the effects of child maltreatment on later outcomes among high-risk adolescents. *Journal of Youth and Adolescence*, 37(5), 506–521.

Suicide:

- Segal, D.L. (2009). Self-reported history of sexual coercion and rape negatively impacts resilience to suicide among women students. *Death Studies*, *33*(9), 848–855.
- Ullman, S.E., & Najdowski, C.J. (2009). Correlates of serious suicidal ideation and attempts in female adult sexual assault survivors. *Suicide and Life-Threatening Behavior*, 39(1), 47–57.
- Yates, T.M., Carlson, E.A., & Egeland, B. (2008). A prospective study of child maltreatment and self-injurious behavior in a community sample. *Development and Psychopathology*, 20, 651–671.

Eating Disorders:

- Carter, J.C., Bewell, C., Blackmore, E., & Woodside, D.B. (2006). The impact of childhood sexual abuse in anorexia nervosa. *Child Abuse and Neglect*, *30*(3), 257–269.
- Grilo, C. M., & Masheb, R. M. (2001). Childhood psychological, physical, and sexual maltreatment in outpatients with binge eating disorder: Frequency and associations with gender, obesity, and eating-related psychopathology. *Obesity Research*, *9*, 320–325.
- Striegel-Moore, R.H., Dohm, F., Pike, K.M., Wilfley, D.E., & Fairburn, C.G. (2002). Abuse, bullying, and discrimination as risk factors for binge eating disorder. *The American Journal of Psychiatry*, *159*, 1902–1907.

STDs / HIV-AIDS / Pregnancy:

- Campbell, J.C., Baty, M.L., Ghandour, R.M., Stockman, J.K., Francisco, L., & Wagman, J. (2008). The intersection of intimate partner violence against women and HIV/AIDS: A review. *International Journal of Injury Control and Safety Promotion*, 15(4), 221–231.
- El-Bassel, N., Gilbert, L., Witte, S., Wu, E., & Vinocur, D. (2010). Countering the surge of HIV/STIs and co-occurring problems of intimate partner violence and drug abuse among African American women: Implications for HIV/STI prevention. *In African Americans and HIV/AIDS* (pp. 113–130). New York, NH: Springer.
- Fuentes, C.M.M. (2008). Pathways from interpersonal violence to sexually transmitted infections: A mixed-method study of diverse women. *Journal of Women's Health*, *17*(10), 1591–1603.
- Martin, S.L., & Macy, R.J. (2009). Sexual violence against women: Impact on high-risk health behaviors and reproductive health. *VAWnet.org: National Resource Center on Domestic Violence*.
- Noll, J.G., Shenk, C.E., & Putnam, K.T. (2009). Childhood sexual abuse and adolescent pregnancy: A meta-analytic update. *Journal of Pediatric Psychology*, *34*(4), 366–378.

Substance Abuse:

- Andrews, C.M., Cao, D., Marsh, J.C., & Shin, H.C. (2011). The impact of comprehensive services in substance abuse treatment for women with a history of intimate partner violence. *Violence Against Women*, *17*(5), 550–567.
- Bennett, L., & Bland, P. (2008). Substance abuse and intimate partner violence. *VAWnet.org:* National Resource Center on Domestic Violence.
- Brecklin, L.R., & Ullman, S.E. (2010). The roles of victim and offender substance use in sexual assault outcomes. *Journal of Interpersonal Violence*, *25*(8), 1503–1522.
- McCauley, J.L., Calhoun, K.S., & Gidycz, C.A. (2010). Binge drinking and rape: A prospective examination of college women with a history of previous sexual victimization. *Journal of Interpersonal Violence*, 25(9), 1655–1668.
- Najavits, L.M., Weiss, R.D., & Shaw, S.R. (1997). The link between substance abuse and posttraumatic stress disorder in women: A research review. *The American Journal on Addictions*, 6(4), 273–283.
- Najavits, L.M., Sonn, J., Walsh, M, & Weiss, R.D. (2004). Domestic violence in women with PTSD and substance abuse. *Addictive Behaviors*, 29, 707–715.
- Norris, J. (2008). The relationship between alcohol consumption and sexual victimization. *VAWnet.org: National Resource Center on Domestic Violence*.

Module Five

Topic: Complex Trauma

Required Readings and Resources

Please read the following selection in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY: BasicBooks:

• Chapter 6: "A New Diagnosis" (pp: 115–132)

The following selections are available on <u>Course Reserves</u> with the library or by clicking the link, if provided:

- Luxenberg, T., Spinazzola, J., & Van der Kolk, B. (2001). Lesson 25: Complex trauma and disorders of extreme stress (DESNOS) diagnosis, part one: Assessment & Lesson 26: complex trauma and disorders of extreme stress (DESNOS) diagnosis, part two: Treatment. *Directions in Psychiatry*, 21, 373–415.
- Van der Kolk, B.A., Roth, S., Pelcovitz, D., Sunday, S., & Spinazzola, J. (2005). Disorders of extreme stress: The empirical foundation of a complex adaptation to trauma. *Journal of Traumatic Stress*, 18(5), 389–399.

Optional Resources

The following optional selections are available on <u>Course Reserves (Links to an external site.)</u> or by clicking the link, if provided.

- Tummala-Narra, P., Kallivayalil, D., Singer, R., & Andreini, R. (2012). Relational experiences of complex trauma survivors in treatment: Preliminary findings from a naturalistic study. *Psychological Trauma: Theory, Research, Practice, and Policy*, 4(6), 640–648.
- Van Dijke, A., Ford, J.D., Frank, L.E., & Van der Hart, O. (2015). Association of childhood complex trauma and dissociation with complex PTSD symptoms in adulthood. *Journal of Trauma & Dissociation*, 16(4), 428–441.

Module Six

Topics: Diversity & Culturally Competent Social Work Practice

Required Readings and Resources

The following selections are available on <u>Course Reserves</u> with the library or by clicking the link, if provided:

- Bronfenbrenner, U. (1986). Ecology of the family as a context for human development: Research perspectives. *Developmental Psychology*, 22, 723–742.
- De Vries, M.W. (2007). Trauma in cultural perspective. In B.A. van der Kolk, A.C. McFarlane, & L. Weisaeth (Eds.), *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society*. New York: The Guilford Press.

Optional Readings

Please select the population of your interest and practice:

African American

- Bent-Goodley, T.B. (2005). An African centered approach to domestic violence. *Families in Society: The Journal of Contemporary Social Services*, 86(2), 477–483.
- Fontes, L.A., Cruz, M., & Tabachnick, J. (2001). Views of child sexual abuse in two cultural communities: An exploratory study among African Americans and Latinos. *Child Maltreatment*, 6(2), 103–117.
- Fowler, D.N., & Hill, H.M. (2004). Social support and spirituality as culturally relevant factors in coping among African American women survivors of partner abuse. *Violence Against Women*, 10(11), 1267–1282.
- Tanis, F., Ericka, D., Mills, L., & Richter-Montpetit, M. (2018). Sexualized violence and torture in the afterlife of slavery: an interview with Farah Tanis and Ericka Dixon of Black Women's Blueprint. *International Feminist Journal of Politics*, 20(3), 446–461. https://doiorg.proxy.libraries.rutgers.edu/10.1080/14616742.2018.1486082

- Griffin, R. (2013). Gender Violence and the Black Female Body: The Enduring Significance of "Crazy" Mike Tyson. *Howard Journal of Communications*, 24(1), 71–94. https://doiorg.proxy.libraries.rutgers.edu/10.1080/10646175.2013.748602
- Jones, S. C., & Neblett, E. W. (2016). Racial—ethnic protective factors and mechanisms in psychosocial prevention and intervention programs for Black youth. *Clinical child and family psychology review*, 19(2), 134-161.

LGBTQ

- Bishop, J., Crisp, D., & Scholz, B. (2021). <u>The real and ideal experiences of what culturally competent counselling or psychotherapy service provision means to lesbian, gay and bisexual people. Counselling and Psychotherapy Research. https://doi.org/10.1002/capr.12469</u>
- Whitfield, D. L., Coulter, R. W., Langenderfer-Magruder, L., & Jacobson, D. (2018). Experiences of intimate partner violence among lesbian, gay, bisexual, and Transgender College Students: The intersection of gender, race, and sexual orientation. *Journal of Interpersonal Violence*, 36(11-12). https://doi.org/10.1177/0886260518812071
- Hill, N. A., Woodson, K. M., Ferguson, A. D., & Parks, C. W. (2012). <u>Intimate Partner Abuse among African American Lesbians: Prevalence, Risk Factors, Theory, and Resilience</u>.
 Journal of Family Violence, 27(5), 401–413. https://doi.org/10.1007/s10896-012-9439-z

South Asia and Asian

- Gill, A. (2004). Voicing the silent fear: South Asian women's experiences of domestic violence. *The Howard Journal of Criminal Justice*, 43(5), 465–483.
- Larsen, S., Kim-Goh, M., & Nguyen, T.D. (2008). Asian American immigrant families and child abuse: Cultural considerations. *Journal of Systemic Therapies*, 27(1), 16–29.
- Lee, S. B. (2003). Working with Korean-American families: Multicultural hermeneutics in understanding and dealing with marital domestic violence. *American Journal of FamilyTherapy*, 31(3), 159–178.

Differently Abled

- Hassouneh-Phillips, D., & Curry, M.A. (2002). Abuse of women with disabilities: State of the science. *Rehabilitation Counseling Bulletin*, 45(2), 96–104.
- Hatcher, S.S., Maschi, T., Morgen, K., & Toldson, I.A. (2009). Exploring the impact of racial and ethnic differences in the emotional and behavioral responses of maltreated youth: Implications for culturally competent services. *Children & Youth Services Review*, 31(9), 1042–1048.

Latino

- <u>Kasturirangan, A., & Williams, E.N. (2003). Counseling Latina battered women: A qualitative study of the Latina perspective. *Journal of Multicultural Counseling and Development*, 31(3), 162–179.</u>
- Lowe Jr, W., Pavkov, T.W., Casanova, G.M., & Wetchler, J.L. (2005). Do American ethnic cultures differ in their definitions of child sexual abuse? *The American Journal of Family Therapy*, 33(2), 147–116.

Immigrants

- Raj, A., & Silverman, J. (2002). Violence against immigrant women: The roles of culture, context, and legal immigrant status on intimate partner violence. *Violence Against Women*, 8(3), 367-398.
- Sharma, A. (2001). Healing the wounds of domestic abuse: Improving the effectiveness of feminist therapeutic interventions with immigrant and racially visible women who have been abused. *Violence Against Women*, 7(12), 1405–1428.

Additional Resources

- UNWomen. "Cambodia: Reclaiming Life after Acid Attacks." *YouTube*. UN Women, 16 Nov. 2011. Web. 15 Sept. 2016.
- Downloadable PDF transcript of "Cambodia: Reclaiming Life after Acid Attacks"

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Sokoloff, N. J., & Dupont, I. (2005). Domestic violence at the intersections of race, class, and gender. *Violence Against Women*, 11(1), 38–64.
- Wahab, S., & Olson, L. (2004). Intimate partner violence and sexual assault in Native American communities. *Trauma*, *Violence*, & *Abuse*, 5(4), 353–366.
- Washington, P.A. (2001). Disclosure patterns of Black female sexual assault survivors. *Violence Against Women*, 7(11), 1254–1283.

Module Seven

Topic: Intervention - Engagement & Assessment

Required Readings and Resources

Please read the following selections in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY: BasicBooks:

- Chapter 8: "Safety" (pp: 155–174)
- Chapter 9: "Remembrance and Mourning" (pp. 175–195)
- Chapter 10: "Reconnection" (pp: 196–213)

OR

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group:

• Chapter 9: "What's Love Got to Do With It?" (pp: 136–148)

- Chapter 10: "Developmental Trauma: The Hidden Epidemic" (pp. 149–170)
- Chapter 11: "Uncovering Secrets: The Problem of Traumatic Memory" (pp. 171–183)

Optional Resources

The following optional selections are available by clicking the links provided.

- Berk, R.A., He, Y., & Sorenson, S.B. (2005). Developing a practical forecasting screener for domestic violence incidents. *Evaluation Review*, 29(4), 358–383.
- Burman, S. (2003). Battered women: Stages of changes and other treatment models that instigate and sustain leaving. *Brief Treatment and Crisis Intervention*, *3*(1), 83–98.
- DeVoe, E.R., & Faller, K.C. (2002). Questioning strategies in interviews with children who may have been sexually abused. *Child Welfare*, 81(1), 5–31.
- Stenius, V.M.K., & Veysey, B.M. (2005). "It's the little things": Women, trauma, and strategies for healing. *Journal of Interpersonal Violence*, 20(10), 1155–1174.
- Thompson, M.P., Basile, K.C., Hertz, M.F., & Sitterle, D. (2006). Measuring intimate partner violence victimization and perpetration: A compendium of assessment tools.
- Thorsen, S., & Overlien, C. (2009). Trauma victim: Yes or no? Why it may be difficult to answer questions regarding violence, sexual abuse, and other traumatic events. *Violence Against Women*, 15(6), 699–719.
- Watts-Jones, T. D. (2010). Location of self: Opening the door to dialogue on intersectionality in the therapy process. *Family Process*, 49(3), 405-420.

You might also like to view the following video (**Note:** A transcript for this video can be found to the right of the video player):

• Networker, P., & Meichenbaum, D. (2012). Reshaping the Trauma Narrative. Retrieved October 05, 2016.

Module Eight

Topic: Interventions – Safety Planning

Required Readings and Resources

Please read the following selection in your required text, Herman, J. L. (1997). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. New York, NY: BasicBooks.:

• Chapter 8: "Safety" (pp: 155–174)

The following readings can be found in the **Reading List** or use the link provided:

• Sabri, Tharmarajah, S., Njie-Carr, V. P. S., Messing, J. T., Loerzel, E., Arscott, J., & Campbell, J. C. (2021). Safety Planning With Marginalized Survivors of Intimate Partner Violence: Challenges of Conducting Safety Planning Intervention Research With

- Marginalized Women. Trauma, Violence & Abuse, 15248380211013136–15248380211013136. https://doi.org/10.1177/15248380211013136
- Schrag, Leat, S., & Wood, L. (2021). "Everyone is Living in the Same Storm, but our Boats are all Different": Safety and Safety Planning for Survivors of Intimate Partner and Sexual Violence During the COVID-19 Pandemic. Journal of Interpersonal Violence, 8862605211062998–8862605211062998. https://doi.org/10.1177/08862605211062998
- Johnson, Cusano, J. L., Nikolova, K., Steiner, J. J., & Postmus, J. L. (2022). Do You Believe Your Partner is Capable of Killing You? An Examination of Female IPV Survivors' Perceptions of Fatality Risk Indicators. Journal of Interpersonal Violence, 37(1-2), NP594– NP619. https://doi.org/10.1177/0886260520916273

Optional Resources

The following readings can be found in the **Reading List** or use the link provided:.

- Anderson, Renner, L. M., & Bloom, T. S. (2014). Rural Women's Strategic Responses to Intimate Partner Violence. Health Care for Women International, 35(4), 423–441. https://doi.org/10.1080/07399332.2013.815757
- Sabri, Glass, N., Murray, S., Perrin, N., Case, J. R., & Campbell, J. C. (2021). A technology-based intervention to improve safety, mental health and empowerment outcomes for immigrant women with intimate partner violence experiences: it's we Women plus sequential multiple assignment randomized trial (SMART) protocol. BMC Public Health, 21(1), 1–1956. https://doi.org/10.1186/s12889-021-11930-2
- Wood, Baumler, E., Schrag, R. V., Guillot-Wright, S., Hairston, D., Temple, J., & Torres, E. (2021). "Don't Know where to Go for Help": Safety and Economic Needs among Violence Survivors during the COVID-19 Pandemic. Journal of Family Violence, 1–9. https://doi.org/10.1177/0886260520916273

Module Nine

Topic: Interventions –Trauma Focused Cognitive Behavioral Theory (TF-CBT)

Required Readings and Resources

There are no required readings from your textbook in this module.

Read any three articles from the listed ones below. The following readings can be found in the **Reading List** or use the link provided:

- Child Welfare Information Gateway. (2012). Information Brief: Trauma-Focused Cognitive Behavioral Therapy for Children Affected by Sexual Abuse or Trauma.
- Cisler, J.M., Sigel, B.A., Kramer, T.L., Smitherman, S., Vanderzee, K., Pemberton, J., & Kilts, C.D. (2015). Amygdala response predicts trajectory of symptom reduction during Trauma-Focused Cognitive-Behavioral Therapy among adolescent girls with PTSD. *Journal of Psychiatric Research*, 71, 33–40.

• Cohen, J.A., Mannarino, A.P., Kleithermes, M., Murray, L.A. (2012). <u>Trauma-focused CBT for youth with complex trauma</u>. *Child Abuse & Neglect*, 36, 528–541.

Please watch any one of the following videos:

- <u>Kauffman, J., Dr. (2013, October 23). Dr. Joan Kaufman on Trauma-Focused Cognitive</u> <u>Behavior Therapy (TF-CBT). Retrieved October 05, 2016, from</u> <u>https://www.youtube.com/watch?v=hKAzsf-VqdQ</u>
- Downloadable PDF transcript of "Dr. Joan Kaufman on Trauma-Focused Cognitive Behavior Therapy (TF-CBT)"
- <u>C. (2014, November 23). What is Trauma-Focused Cognitive Behavioral Therapy? Retrieved October 06, 2016, from https://www.youtube.com/watch?v=axsButKQYCY</u>
- Downloadable PDF transcript of "What is Trauma-Focused Cognitive Behavioral Therapy?"
- <u>K., Dr. (2007, February 09). Trauma Focused Cognitive Behavioral Therapy for Children/Ado. Retrieved October 06, 2016, from https://www.youtube.com/watch?v=FQlfc-cz5yk</u>
- Downloadable <u>PDF transcript of "Trauma-Focused Cognitive Behavioral Therapy for Children"</u>

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Cohen, J.A., Mannarion, A.P., Beliner, L., & Denlinger, E. (2000). Trauma focused cognitive behavioral therapy for children and adolescents: An empirical update. *Journal of Interpersonal Violence*, 15(11), 1202–1223.
- Foa, E. B., & Rothbaum, B. (1998). Theoretical bases for PTSD and its treatment. In E.B. Foa & B. Rothbaum (Eds.) *Treating the trauma of rape: Cognitive-behavioral therapy for PTSD* (pp. 68–88). New York, NY: Guildford Press.
- Nollett, C., Lewis, C., Kitchiner, N., Roberts, N., Addison, K., Brookes-Howell, L., Cosgrove, S., Cullen, K., Ehlers, A., Heke, S., Kelson, M., Lovell, K., Madden, K., McEwan, K., McNamara, R., Phillips, C., Pickles, T., Simon, N., & Bisson, J. (2018). Pragmatic Randomised controlled trial of a trauma-focused guided self-help Programme versus Individual trauma-focused cognitive Behavioural therapy for post-traumatic stress disorder (RAPID): trial protocol. BMC Psychiatry, 18(1), 77–77. https://doi.org/10.1186/s12888-018-1665-3
- Miller, A.K., Handley, I.M., Markman, K.D., & Miller, J.H. (2010). Deconstructing self-blame following sexual assault: The critical roles of cognitive content and process. *Violence Against Women*, *16*(10), 1120–1137.

• Wright, C.V., Collinsworth, L.L., & Fitzgerald, L.F. (2010). Why did this happen to me? Cognitive schema disruption and post-traumatic stress disorder in victims of sexual trauma. *Journal of Interpersonal Violence*, 25(10), 1801–1814.

Module Ten

Topics: Dialectical Behavioral Theory (DBT) and Play Therapy

Required Readings and Resources

There are no required readings from your textbooks.

Please read any three articles from those listed below. The following readings can be found in the **Reading List** or use the link provided:

- Bohus, Kleindienst, N., Hahn, C., Müller-Engelmann, M., Ludäscher, P., Steil, R., Fydrich, T., Kuehner, C., Resick, P. A., Stiglmayr, C., Schmahl, C., & Priebe, K. (2020). Dialectical Behavior Therapy for Posttraumatic Stress Disorder (DBT-PTSD) Compared With Cognitive Processing Therapy (CPT) in Complex Presentations of PTSD in Women Survivors of Childhood Abuse: A Randomized Clinical Trial. JAMA Psychiatry (Chicago, Ill.), 77(12), 1235–1245. https://doi.org/10.1001/jamapsychiatry.2020.2148
- Cloitre, M., Koenen, K.C., Cohen, L.R., & Han, H. (2002). Skills training in affective and interpersonal regulation followed by exposure: A phase-based treatment for PTSD related to child abuse. *Journal of Consulting and Clinical Psychology*, 70(5), 1067–1074.
- Linehan, M.M., Bohus, M., & Lynch, T.R. (2007). Dialectical behavior therapy for pervasive emotion dysregulation: Theoretical and practical underpinnings. In Gross, J. (Ed.), *Handbook of emotion regulation* (pp. 581–605). New York: Guilford Press.
- Lynch, T.R., Chapman, A.L., Rosenthal, M.Z., Kuo, J.R., & Linehan, M.M. (2006).
 Mechanisms of change in dialectical behavior therapy: Theoretical and empirical observations. *Journal of Clinical Psychology*, 62(4), 459–480.
- Steil, Dittmann, C., Müller-Engelmann, M., Dyer, A., Maasch, A.-M., & Priebe, K. (2018). Dialectical behaviour therapy for posttraumatic stress disorder related to childhood sexual abuse: a pilot study in an outpatient treatment setting. European Journal of Psychotraumatology, 9(1), 1423832–1423839. https://doi.org/10.1080/20008198.2018.1423832

Please watch the following videos. (**Note**: A transcript for this video can be found to the right of the video player):

- Moonshine, C. (2011). Advanced Dialectical Behavior Therapy. Retrieved October 20, 2016.
- Baggerly, J. (2013). Trauma Informed Child Centered Play Therapy. Retrieved October 20, 2016.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Lynch, T.R., Trost, W.T., Salsman, N., & Linehan, M.M. (2007). Dialectical behavior therapy for borderline personality disorder. *Annual Review of Clinical Psychology*, 3, 181–205.
- Robins, C.J., & Chapman, A.L. (2004). Dialectical behavior therapy: Current status, recent developments, and future directions. *Journal of Personality Disorders*, 18(1), 73–89.
- Snoek, A., Beekman, A. T. F., Dekker, J., Aarts, I., van Grootheest, G., Blankers, M., Vriend, C., van den Heuvel, O., & Thomaes, K. (2020). A randomized controlled trial comparing the clinical efficacy and cost-effectiveness of eye movement desensitization and reprocessing (EMDR) and integrated EMDR-Dialectical Behavioral Therapy (DBT) in the treatment of patients with post-traumatic stress disorder and comorbid (Sub)clinical borderline personality disorder: study design. BMC Psychiatry, 20(1), 396–396. https://doi.org/10.1186/s12888-020-02713-x

Play Therapy

Please read any three articles from those listed below.

- Barrett M.J., & Trepper, T.S. (2005). Treatment of denial where there is child sexual abuse. In C.W. LeCroy & J.M. Daley (Eds.) *Case studies in child, adolescent and family treatment* (pp. 229–241). Boston, MA: Cengage Learning.
- Haas, & Ray, D. C. (2020). Child-Centered Play Therapy With Children Affected by Adverse Childhood Experiences: A Single-Case Design. International Journal of Play Therapy, 29(4), 223–236. https://doi.org/10.1037/pla0000135
- Parish-Plass, N. (2008). Animal-assisted therapy with children suffering from insecure attachment due to abuse and neglect: A method to lower the risk of intergenerational transmission of abuse? Clinical Child Psychology and Psychiatry, 13(1), 7–30.
- Reichert, E. (1998). Individual counseling for sexually abused children: A role for animals and storytelling. *Child and Adolescent Social Work Journal*, *15*(3), 177–186.
- Porter, M.L., Hernandez-Reif, M., & Jessee, P. (2009). Play therapy: A review. *Early Child Development and Care*, 179(8), 1025–1040.
- Kennedy, & Prock, K. A. (2018). I Still Feel Like I Am Not Normal: A Review of the Role of Stigma and Stigmatization Among Female Survivors of Child Sexual Abuse, Sexual Assault, and Intimate Partner Violence. Trauma, Violence, & Abuse, 19(5), 512–527. https://doi.org/10.1177/1524838016673601
- Tapia-Fuselier, & Ray, D. C. (2019). Culturally and Linguistically Responsive Play Therapy: Adapting Child-Centered Play Therapy for Deaf Children. International Journal of Play Therapy, 28(2), 79–87. https://doi.org/10.1037/pla0000091

Non-Topic Related

- Rasmussen, L.A. (2001). Integrating cognitive-behavioral and expressive therapy interventions: Applying the trauma outcome process in treating children with sexually abusive behavior problems. *Journal of Child Sexual Abuse*, 10(4), 1–29.
- Schultz, P.N., Remick-Barlow, G.A., & Robbins, L. (2007). Equine-assisted psychotherapy: A mental health promotion/intervention modality for children who have experienced intrafamily violence. *Health and Social Care in the Community*, 15(3), 265–271.

You might also like to view the following video. (**Note:** A transcript for this video can be found to the right of the video player):

• <u>Linehan, M. M. (1995). Treating Borderline Personality Disorder. Retrieved October 20, 2016.</u>

Module Eleven

Topics: Interventions – Somatic Experiencing, Sensory Motor Psychotherapy, and EMDR

Required Readings and Resources

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group.:

- Chapter 13: "Healing from Trauma: Owning Yourself" (pp: 203–229)
- Chapter 14: "Language: Miracle and Tyranny" (pp. 230–247)

Please read at least one article from each modality listed below. The following readings can be found in the **Reading List** or use the link provided:

Somatic Experiencing:

- Gericke, C., & Kriegler, S. (2012) Healing trauma by using Peter Levine's somatic experiencing approach. *International Journal of Psychology*, 47, 769–787.
- Payne, P., Levine, P.A., & Crane-Godreau, M.A. (2015). Somatic experiencing: using interoception and proprioception as core elements of trauma therapy. Frontiers in Psychology, 6, 93.

Sensorimotor Psychotherapy:

- Ogden P., Pain C., & Fisher J. (2006). A sensorimotor approach to the treatment of trauma and dissociation. *Psychiatric Clinics of North America*, 29(1), 263–279.
- Lohrasbe, & Ogden, P. (2017). Somatic Resources: Sensorimotor Psychotherapy Approach to Stabilising Arousal in Child and Family Treatment. Australian and New Zealand Journal of Family Therapy, 38(4), 573–581. https://doi.org/10.1002/anzf.1270

You might also like to view the following videos:

• Body- oriented trauma therapy Part 2:

https://stream.libraries.rutgers.edu/commercial/Body Oriented Trauma Therapy Volume 2.mp 4/

• Levine, P. (2013). Transforming Trauma: Awakening the Ordinary Miracle of Healing. Retrieved October 27, 2016.

• Ogden, P. (2012). The Body in Trauma Work. Retrieved October 27, 2016.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

Somatic Experiencing:

- Payne, P., & Crane-Godreau, M.A. (2015). The preparatory set: a novel approach to understanding stress, trauma, and the bodymind therapies. *Frontiers in Human Neuroscience*, 9, 178.
- Phillips, M. (2007). Giving the body its due: The use of somatic experiencing in body focused psychotherapy with trauma. *Psychotherapy in Australia*, 13(2), 12.
- Brom, D., Stokar, Y., Lawi, C., Nuriel-Porat, V., Ziv, Y., Lerner, K., & Ross, G. (2017). Somatic Experiencing for Posttraumatic Stress Disorder: A Randomized Controlled Outcome Study. Journal of Traumatic Stress, 30(3), 304–312. https://doi.org/10.1002/jts.22189

Sensorimotor Psychotherapy:

- Von Bülow, G. (2005). The role of therapeutic relationship in trauma therapy. *Dynamische Psychiatrie*, 38(2), 274–284.
- Warner, E., Spinazzola, J., Westcott, A., Gunn, C., & Hodgdon, H. (2014). The body can change the score: Empirical support for somatic regulation in the treatment of traumatized adolescents. *Journal of Child & Adolescent Trauma*, 7(4), 237–246.
- Warner, E., Koomar, J., Lary, B., & Cook, A. (2013). Can the body change the score?
 Application of sensory modulation principles in the treatment of traumatized adolescents in residential settings. *Journal of Family Violence*, 28(7), 729–738.

You might also like to view the following video:

Body- oriented trauma therapy Part 2: https://catalog.libraries.rutgers.edu/vufind/Record/5722131

Module Twelve

Topics: Interventions – Eye Movement Desensitization Reprocessing (EMDR)

Required Readings and Resources

Please read the following selections in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group:

• Chapter 15: "Letting Go of the Past: EMDR" (pp: 248–262)

Please read any one article from the ones listed below. The following readings can be found in the **Reading List** or use the link provided:

- Parnell, L. (1999). EMDR in the Treatment of Adults Abused as Children.
- Sack, M., Lempa, W., Steinmetz, A., Lamprecht, F., Hofmann, A. (2008). <u>Alterations in Autonomic Tone During Trauma Exposure Using Eye Movement Desensitization and Reprocessing (EMDR)—Results of a Preliminary Investigation</u>. *Journal of Anxiety Disorders*, 22(7), 1264–1271.
- Shapiro, F. (1989). <u>Eye movement desensitization: a new treatment for post-traumatic stress disorder</u>. *Journal of Behavior Therapy and Experimental Psychiatry*, 20(3), 211–217.

Please watch the following video (**Note:** A transcript for this video can be found to the right of the video player):

• Shapiro, F. (2013). Fundamentals of EMDR Therapy as an Integrative Trauma Treatment. Retrieved November 4, 2016.

You might also like to view the following video:

• Parnell, L., Ph.D. (2012, November 6). "Resource Tapping for Trauma" Seminar with Laurel Parnell, Ph.D. Retrieved November 5, 2016.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Cartwright, R., Baehr, E., Kirkby, J., Pandi-Perumal, S. R., & Kabat, J. (2003). REM sleep reduction, mood regulation and remission in untreated depression. *Psychiatry Research*, 121(2), 159-167.
- Edmond, T., Sloane, L., & McCarty, D. (2004). Sexual abuse survivors' perception of the effectiveness of EMDR and eclectic therapy. *Research on Social Work Practice*, 14(4), 249–258.
- Gelinas, D. (2003). Integrating EMDR into phase-oriented treatment for trauma. *Journal of Trauma & Dissociation*, 4(3), 91–135.
- Inoue, N. (2009). Evaluation of an EMDR Treatment Outcome Using the Rorschach, the TAT, and the IES-R: A Case Study of a Human-Caused Trauma Survivor. Rorschachiana, 30(2), 180–218. https://doi.org/10.1027/1192-5604.30.2.180
- Rothbaum, B.O., Astin, M.C., & Marsteller, F. (2005). Prolonged exposure versus eye movement desensitization and reprocessing (EMDR) for PTSD rape victims. *Journal of Traumatic Stress*, 18(6), 60–616.

Module Thirteen

Topics: Interventions – Mindfulness Based Stress Reduction Therapies

Required Readings and Resources

Please read the following selection in your required text, A., V. D. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. New York, NY: Penguin Group.:

• Chapter 16: "Learning to Inhabit Your Body: Yoga" (pp. 263–276)

Please select **any two articles** from the articles listed below. The following selections are available by clicking the links provided:

- Davidson, R.J., Kabat-Zinn, J., Schumacher, J., Rosenkranz, M., Muller, D., Santorelli, S.F., & Sheridan, J.F. (2003). Alterations in brain and immune function produced by mindfulness meditation. *Psychosomatic Medicine*, 65(4), 564–570.
- Coelho, H.F., Canter, P.H., & Ernst, E. (2007). Mindfulness-based cognitive therapy: Evaluating current evidence and informing future research. *Journal of Consulting and Clinical Psychology*, 75, 1000–1005.
- Lutz, A., Slagter, H.A., Dunne, J.D., & Davidson, R.J. (2008). Attention regulation and monitoring in meditation. *Trends in Cognitive Sciences*, 12(4), 163–169.

Optional Resources

The following optional selections are available on <u>Course Reserves</u> or by clicking the link, if provided.

- Jha, A.P., Krompinger, J., & Baime, M.J. (2007). Mindfulness training modifies subsystems of attention. *Cognitive, Affective, Behavioral Neuroscience*, 7(2), 109–119.
- Kelly, A., & Garland, E. L. (2016). Trauma-Informed Mindfulness-Based Stress Reduction for Female Survivors of Interpersonal Violence: Results From a Stage I RCT. Journal of Clinical Psychology, 72(4), 311–328. https://doi.org/10.1002/jclp.22273
- Ortiz, R., & Sibinga, E. M. (2017). The Role of Mindfulness in Reducing the Adverse Effects of Childhood Stress and Trauma. Children (Basel), 4(3), 16—. https://doi.org/10.3390/children4030016
- Reese, E.D., Zielenski, M.J., & Veilleux, J.C. (2015). Facets of mindfulness mediate behavioral inhibition systems and emotion dysregulation. *Personality and Individual Difference*, 72, 41–46.
- Smith, J. (2004). Alterations in brain and immune function produced by mindfulness meditation: Three caveats. *Psychosomatic Medicine*, 66(1), 148–152.
- Tang, Y.Y., Ma, Y., Wang, J., Fan, Y., Feng, S., Lu, Q., & Posner, M.I. (2007). Short-term meditation training improves attention and self-regulation. *Proceedings of the National Academy of Sciences of the United States of America*, 104(43), 17152–17156.
- Williams, J.M.G., Russell, D., & Russell, I. (2008). Mindfulness-based cognitive therapy: Further issues in current evidence and future research. *Journal of Consulting and Clinical Psychology*, 76(3), 524–529.

Please watch the following videos (**Note:** A transcript for this video can be found to the right of the video player):

Hopper, J. (2016). Panel discussion. Retrieved November 5, 2016.

Module Fourteen

Topic: Interventions; Group

Required Readings and Resources

The following selections are available on <u>Course Reserves</u> with the library or by clicking the link, if provided:

- Bradley, R.G., & Follingstad, D.R. (2003). Group therapy for incarcerated women who experienced interpersonal violence: A pilot study. *Journal of Traumatic Stress*, 16(4), 337–340.
- Clark, Lewis-Dmello, A., Anders, D., Parsons, A., Nguyen-Feng, V., Henn, L., & Emerson, D. (2014). Trauma-sensitive yoga as an adjunct mental health treatment in group therapy for survivors of domestic violence: A feasibility study. Complementary Therapies in Clinical Practice, 20(3), 152–158. https://doi.org/10.1016/j.ctcp.2014.04.003
- Heard, & Walsh, D. (2021). Group Therapy for Survivors of Adult Sexual Assault: A Scoping Review. Trauma, Violence & Abuse, 152483802110438–15248380211043828. https://doi.org/10.1177/15248380211043828
- Huth-Bocks, A., Schettini, A., & Shebroe, V. (2001). Group play therapy for preschoolers exposed to domestic violence. *Journal of Child and Adolescent Group Therapy*, 11(1), 19–34.
- Yalch, Moreland, M. L., & Burkman, K. M. (2022). Integrating process and structure in group therapy for survivors of trauma. European Journal of Trauma & Dissociation = Revue Europâeenne Du Trauma et de La Dissociation, 6(3). https://doi.org/10.1016/j.ejtd.2022.100272

Optional Resources

The following optional selections are available on Course Reserves with the library.

- Saulnier, C.F. (2000). Incorporating feminist theory into social work practice: Group work examples. *Social Work with Groups*, 23(1), 5–29.
- Sirles, E.A, Walsma, J., Lytle-Barnaby, R., & Lander, L.C. (1988). Group techniques for work with child sexual abuse victims. *Social Work with Groups*, 11(3), 67–78.
- Wood, G.G., & Roche, S.E. (2001). Representing selves, reconstructing lives: Feminist group work with women survivors of male violence. *Social Work with Groups*, 23(4), 5–23.

Module Fifteen

Topic: Course Summary **Readings: None required**