

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

**19:910:518:XX Clinical Social Work with Children**

**Time:**

**Location:**

**Instructor:**

**Office:**

**Telephone:**

**E-mail:**

**Office hours:**

**I. Catalog Course Description**

This course focuses on therapeutic interventions for children (approximately infancy to middle school age), with a particular emphasis on how their developmental needs are addressed within various system structures (e.g., family/household, school, community settings). As children generally reside in families, various family forms and risk status will be examined with a focus on anti-oppressive social work practice.

**II. Course Overview**

This course provides assessment, engagement, and intervention strategies for children involved with various child-serving systems. Emphasis is on assessment of developmental aspects of child and family well-being (with a broad and diverse definition of family), identification of risks, strengths and resiliency factors, and sociological and psychological knowledge of how family and community contexts affect children. Focus is on advanced direct practice with children who are at risk because of systemic stressors and/or mental health challenges. The importance of attachments and stability to children's resilience and well-being are emphasized. Crisis intervention skills are addressed as well as case management, and work with other community service systems.

**As students read through this syllabus, they should also remember to closely review the School-Wide Syllabus in Canvas or the Student Handbook to find information on the School of Social Work mission statement and learning goals, school-wide policies (including academic integrity policies and the standardized attendance policy), and student resources and supports.**

**III. Place of Course in Program**

This course is particularly appropriate for those who intend to work with families and children. It is a Clinical Social Work elective. Prerequisite is the satisfactory completion of the Professional Foundation. Co- or prerequisite is CSW-I and a clinical level Field Placement.

Students should discuss any issues that arise in their practicum placement with their practicum instructor and the office of Practicum Learning.

#### **IV. Council of Social Work Education's Social Work Competencies**

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). CSWE's accreditation standards can be reviewed at <https://www.cswe.org/>

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the 2022 CSWE competencies within its curriculum. The competencies assessed in this course include:

##### **Competency 1: Demonstrate Ethical and Professional Behavior**

Practitioners in clinical social work recognize the importance of the therapeutic relationship, person-in-environment and strengths perspectives, professional use of self, and adherence to ethical-and value-guidelines for professional practice. Clinical social workers differentially utilize theories, research, and their clinical skills to enhance the well-being of individuals, families and communities in an ethical manner. Clinical social work practitioners acknowledge the complexities involved in their practice, including the need to navigate ethical issues in an organizational context, and they use clinical supervision to ensure that their practices are congruent with social work values and ethics. Extending and enhancing ethical and professional practice from the foundation level requires that clinical social workers reflect on their own family of origin to assess how it impacts their clinical work. Advanced-level practitioners must manage complex systems while understanding how cultural and developmental aspects of self and their clients influence their work. Clinical social workers recognize their own strengths and weaknesses in developing, managing and maintaining therapeutic relationships. Practitioners of clinical social work must continually adapt to rapidly changing technology in an ethical and professional manner. Practitioners in clinical social work:

- Use clinical supervision and consultation to continuously examine professional roles and boundaries, engage in ongoing self-correction, and ensure that practice is congruent with social work ethics and values.
- Apply ethical decision-making skills and frameworks to clinical material, while complying with the NASW Code of Ethics and local, state, and federal regulations.
- Utilize clinical theories, practice models, and research findings appropriate to client systems and circumstances.
- Demonstrate knowledge of one's family of origin's cultural, psychodynamic and behavioral patterns and reflect on how that history impacts one's ability to differentially use one's professional self in service for clients.

- Exhibit an anti-oppressive stance incorporating social work values of social justice, the dignity and worth of the person, confidentiality, the value of human relationships and integrity in all discussions of clinical case material.

## **Competency 2: Advance Human Rights and Social, Economic, and Environmental Justice**

Clinical social workers are fully grounded in the ethics of the profession, recognizing the dignity and worth of all individuals and the need to advocate for social, racial, economic, reproductive, and environmental justice. Clinical social workers recognize the need to assess clients' physical environment for the availability of safe shelter, food, water, and air. Clinical social workers are adept at recognizing how human rights violations, racism, and other social-structural forces marginalize people and thus work to advocate for policies that promote social, racial, reproductive, and economic justice, advance human rights, and promote environments in which all individuals can thrive. Practitioners in clinical social work:

- Contextualize all client conceptualizations (assessments) utilizing the lenses of human rights and social, racial, reproductive, and economic justice, including aspects of identity and social location that may marginalize clients and/or contribute to inadequate access to healthcare and the inequitable distribution of social and economic resources.
- Assess the availability of clean and safe shelter, water, food, air, and other health-sustaining environmental resources and help individuals, families, groups, and communities to develop mechanisms to advocate for and maintain these environmental resources.
- Advocate for equitable distribution of all social, economic, and practical resources, including the availability of a competent clinical social worker with commitments to human rights as well as anti-racist, anti-oppressive, and justice-oriented clinical practices.

## **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. Practitioners in clinical social work:

- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems (poverty, crime, social injustice, racism, classism, sexism, homophobia, and transphobia) and incorporate this understanding into client engagement. Reflect upon the ways these aspects shape the manner in which one engages and works with the client.
- Understand how members of oppressed groups—people of color, people with varying sexual orientation and gender identities, people with different abilities, people with severe and persistent mental illness—may require different methods of engagement.
- Identify ways to enhance collaboration with clients and promote their empowerment, including seeking their input and feedback regarding the treatment process and fostering their capacity to provide feedback to other members of the treatment team.

## **Competency 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. Practitioners in clinical social work:

- Select psychotherapeutic interventions based on a critical knowledge of theory, research, and practice experience.
- Exhibit flexibility by shifting perspectives and interventions to suit the needs of clients, while recognizing that the multi-faceted assessment drives the selection of appropriate interventions.
- Demonstrate an ecological understanding of the transactional relationship between emotional/ behavioral difficulties and social problems — poverty, crime, social inequality, institutional racism, sexism, religious and/or ideological bias, homophobia, and transphobia—and incorporate this understanding into their interventions.
- Intervene effectively with individuals, families and groups, while eliciting client feedback and knowing when to modify approaches.

[Explore the entire set of 2022 CSWE competencies.](#)

## **V. Course Objectives**

Upon completion of this course, students will have beginning competence

1. To understand a family-centered model of social work practice and family preservation as part of promoting children's well-being under typical circumstances.
2. To identify children at risk, particularly those who experience societal oppression in various forms, and to learn strategies for promotion of resilience.
3. To develop cultural competence in assessing diverse family constellations in terms of their needs and their ability to protect and care for children.
4. To acquire skills in engagement, assessment and intervention in cases involving children in the context of their families and societal structures; to use these skills in a manner consonant with social work values, goals, and ethics.
5. To demonstrate understanding of reporting requirements and other legal requirements related to child abuse and neglect that is physical, sexual, or psychological.
6. To identify relevant institutions and work as part of an interdisciplinary team on behalf of children and their families and to appreciate the diverse roles of the social worker as well as the other professionals, childcare staff, foster parents and others.
7. To analyze the structure and functions of various types of programs and critically evaluate their strengths and limitations as they are applied to various client systems.

## **VI. Required Texts and Readings**

All of the Required and Recommended texts are available as ebooks from the Rutgers library.

### **Required Texts**

McConaughy, S. H. & Whitcomb, S.A. (2022). *Clinical Interviews for Children and Adolescents: assessment to intervention* (Third edition). Guilford Press.

### **Recommended Texts**

Anthony, E. K., & LeCroy, C. W. (Eds). (2015). *Case studies in child, adolescent, and family treatment*. (Second Edition). John Wiley & Sons, Inc.

Cook-Cottone, C. P., Kane, L. & Anderson, L. (2019). *The elements of counseling children and adolescents* (Second edition). Springer Publishing Company.

Gil, E. & Crenshaw, D. A. (2016). *Termination Challenges in Child Psychotherapy*. Guildford Press.

Minuchin, P. Colapinto, J. & Minuchin, S. (2007). *Working with families of the poor*, (Second edition). The Guilford Press

Prout, H. T., & Fedewa, A. L. (Eds). (2015). *Counseling and psychotherapy with children and adolescents: Theory and practice for school and clinical settings* (Fifth edition). John Wiley & Sons, Incorporated.

Smith-Adcock, S., & Tucker, C. (Eds.) (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications.

Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press.

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](#)

## **VII. Attendance and Participation**

This is a **collaborative and professional learning community**. Students are encouraged to make connections between the assigned course material and their other coursework and practicum experience. Students are expected to offer meaningful questions and comments in the class discussion and to share additional resources. Students are advised to communicate concerns, questions and requests to the Instructor early on.

### **Attendance**

Please refer to the school-wide syllabus for the standard attendance policy for classes in on-the-ground (traditional) program, intensive weekend program (IWP), and asynchronous online program. For this course in particular, students who miss more than one class are at risk of failing the course.

### **Late Assignments**

Late assignments will not be accepted, unless the student has made arrangements prior to the assignment due date. The instructor reserves the right to reduce the letter grade for late assignments.

## **VIII. Assignments and Grading**

All written assignments must follow APA format. The professor reserves the right to reduce the letter grade for any assignment that does not confirm to APA format.

### **Assignment Value**

- Brief Reaction Paper: 20%
- Semester Project, Part 1: 30%
- Semester Project, Part 2: 35%
- Attendance & Participation: 15%

### **Specific Assignments for CSW with Children**

#### **Brief Reaction Papers (20% of course grade)**

During the semester, students will complete (3) three Reaction Papers (2-3 pages, double spaced, for each paper), consisting of comments and reflections on the assigned readings for that module. The three Reaction Papers will be completed in Units 1, 2, and 3 (one for each Unit). Students are to select a module in each of these three Units in which to focus their papers and should discuss all the assigned readings for that module.

This assignment is intended to create an avenue for students to explore and raise informed questions and critiques about the readings and the ideas, methods, perspectives they present, and to develop competencies pertaining to social work ethics and values, critical thinking skills, and research-informed social work practice. Students should: thoroughly describe (1) the main themes of the readings; (2) (at least) one issue or concept that was interesting or pertinent to the student's practice; and (3) one question or dilemma that came up for the student in regard to the reading.

Grading of the Reaction Papers will focus on evidence of student's understanding of the pertinent theoretical frames and strategies for engaging and intervening with children as well as in bringing information (e.g., practice intervention approaches, evidence-based research findings, social justice, and diversity issues) from the course readings together with the practice experiences from the field placement.

#### **Semester Project: Case Analysis**

This assignment is divided into two parts: Part One is intended to reflect the course materials on assessment and engagement strategies with children and their families, while the Part Two reflects the course materials on therapeutic interventions with this population along with the theoretical underpinnings of these interventions.

Students are invited to focus this assignment on a child client—from the assessment and engagement phase through the intervention stage—from their field placement or current place of employment (if appropriate). However, extreme care should be used to safeguard the identity and personal circumstances of the client and her family. The focus of the paper should be pre-approved by the Instructor. *Students should discuss with Instructors about the ethics of writing*

*about a current or recent child client and whether they should secure permission from their Field Instructors/Supervisors before proceeding.*

If students are unable to focus on a child client for this assignment, there is an alternative Semester Project assignment (see below).

### **Part 1: Assessment and Engagement (30% of course grade)**

In reflecting on a particular child client and her family and ecological environment, as well as drawing on the course readings and lectures, produce a 6–7-page, double spaced paper in response to the following:

- a. Reason for referral and client's presenting problem.
- b. Brief review of the following as they pertain to the client:
  - i. demographic information.
  - ii. psychosocial and interpersonal functioning.
  - iii. history of trauma and/or loss.
  - iv. family structure and any relevant cultural attributes.
  - v. family's economic and basic needs/challenges
  - vi. community/environment history, including exposure to social structural constraints (i.e., racism; homophobia; sexism; ableism, etc.)
- c. Reflections about challenges experienced with engagement and/or assessment of client and/or family/environmental systems.
  - i. Describe and critique the assessment tool or framework used to identify and assess the child client's presenting problem and overall functioning. If no assessment tool was used, what would you have used and why?
  - ii. Describe these challenges.
  - iii. Discuss how you identified and addressed these challenges or, upon reflection, how you wish you had addressed these challenges.
- d. Reflect on the course readings, lectures, and materials, to explore and discuss subsequent assessment and engagement strategies with future clients who have similar backgrounds and circumstances to this client.

**For this assignment, students should use at least four (4) peer-reviewed, published resources. Papers should also be in APA format. Title page and list of references do not count toward page total. For all specific grading criteria, please see the grading rubric for this assignment.**

### **Part 2: Therapeutic Intervention (35% of course grade)**

In reflecting on the SAME child client from Part One, as well as drawing on the course readings and lectures, produce a 6–7-page, double spaced paper in response to the following:

- a. Reflections on goals for treatment, including diagnostic status, if applicable.
- b. Describe the treatment plan and rationale for this intervention strategy with this client, i. How well aligned was the assessment of the client with the eventual intervention approach?
- c. Apply one of the therapeutic interventions/approaches analyzed in modules 7 through 10. Critically discuss the appropriateness of this intervention approach with this client. Or discuss why one of these approaches would be a better fit for the client than the intervention currently being used.
- d. Describe the termination plan for this client.



- e. Reflect on the professional use of self with this client and their family and/or ecological environment.
- (i) What personal feelings and/or reactions have emerged in response to this client and/or her system involvement (i.e., countertransference)?
  - ii. How have you identified and managed these feelings?
  - iii. What have you learned about yourself in working with child clients?

**For this assignment, students should use at least five (5) recent peer-reviewed, published resources (books/articles). Papers should also be in APA format. Title page and list of references do not count toward page total. For all specific grading criteria, please see the grading rubric for this assignment.**

### **Semester Project: Alternative Assignment**

For students who are unable to focus on a child client for the Semester Project, students should instead complete this alternative assignment. Similar to the case analysis, this project is also divided into two parts; both due dates are the same as those for the traditional project. Students will select and examine a problem area that affects clients in their field placements or in their place of employment (if appropriate), or select a topic from the course that interests them. Examples include child maltreatment, substance abuse, developmental disabilities, bullying, specific mental health challenge, grief and loss, intimate partner violence, etc. The focus of the paper should be pre-approved by the Instructor..

### **Part 1: Problem Identification (30% of course grade)**

In reflecting on the course readings and lectures, as well as on at least four (4) recent peer-reviewed, published materials (books/articles), produce a 5–6-page, double spaced paper in response to the following:

- a. Comprehensively describe the scope, demographics, and overall challenges associated with this problem (e.g., who is affected by this problem; how many children are affected etc.?). Are there cultural differences in the manifestation of or risk factors for this problem?
- b. Describe the effects of this problem for children and their families.
- c. Critique the assessment tools or measures used to identify and assess this problem.
- d. Describe the etiology of this problem and how the problem is affected by or manifested in different ecological systems.

**For this assignment, students should use at least four (4) recent peer-reviewed, published resources (books/articles). Papers should also be in APA format. Title page and list of references do not count toward page total. For all specific grading criteria, please see the grading rubric for this assignment.**

### **Part 2: Evidence Based Intervention (35% of course grade)**

Using the SAME problem that was described in Part 1, students should produce a 6–7-page, double spaced paper in response to the following:

- a. Critically appraise one of the therapeutic interventions/approaches analyzed in Modules 7 through 10 and critically discuss the appropriateness of this intervention approach for clients affected by this problem.
  - i. Based on recent research, what is known about this intervention specifically for this problem area for child clients?
  - ii. What are the theoretical underpinnings of this intervention?

- iii. What are the strengths and weaknesses of this approach?
- iv. How likely is this intervention method likely to be used in your field placement with this child client population? Why?
- b. Based on recent research, how effective is this intervention for different cultural groups?
- c. Describe the ethical considerations for using this intervention strategy to address this problem for child clients.

**For this assignment, students should use at least five (5) recent peer-reviewed, published resources. Papers should also be in APA format. Title page and list of references do not count toward page total. For all specific grading criteria, please see the grading rubric for this assignment.**

## IX. Course Outline

Overview of Semester		
Module	Topic	Dates/ Notes
<b>Unit 1: Contexts of Children's Lives</b>		
1	Introduction to a Child's World	
2	Developmental Features of Childhood	
3	Developmental Features of Childhood (continued)	
<b>Unit 2: Assessment of &amp; Engagement with Children and their Ecological Environments</b>		
4	The Biopsychosocial assessment of the child	
5	Principles of Assessment with Children	
6	Principles of Assessment with Children (continued)	
<b>Unit 3: Therapeutic Interventions with Children within their Ecological Environments</b>		
7	Clinical Systemic Approach: Family Therapy	
8	Use of Play Therapy as a Clinical Intervention	

9	Use of Group Work as a Clinical Intervention	
10	Other Clinical Interventions: Solution Focused, Cognitive Behavioral	
11	Professional Values, Ethics and Professional use of self in a Therapeutic Context	
12	Termination	
<b>Unit 4: Special Topics in Clinical Work with Children</b>		
13	Children who have Experienced Trauma, Grief, Loss	
14	Children living in Kinship, Foster and Adoptive Homes	
15	Review of key concepts and theories	

## Course Readings

**NOTE: Required readings** are to be read before the class in which they are assigned. These readings are either in the required textbooks or on Canvas/Library Reserves. The **suggested readings** are not required but are listed simply to provide additional resources about select topics.

### UNIT 1: Contexts of Children's Lives

#### MODULE 1: *Introduction to a Child's World*

**TOPIC:** We will explore the broad social-ecological framework for child development, including the interconnected environmental settings within which children reside.

*Learning Objectives: By the end of this module, you will be able to:*

- Explain why an understanding of social, cultural, and historical context is crucial for Social Workers
- Recognize and apply ethical counseling practices such as informed consent and confidentiality
- Prepare for initial counseling contact with children including demonstrating respect for caregivers and family members.
- Practice how to prepare the counseling space and begin an initial session with a child

**Required readings:**

- Cook-Cottone, C. P., Kane, L. & Anderson, L. (2019). *The elements of counseling children and adolescents* (Second edition). Springer Publishing Company.  
Chap 1. Setting the stage for counseling children and adolescents.
- Smith-Adcock, S., & Tucker, C. (Eds.) (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications  
Chap 2. Legal & Ethical Issues in Counseling Children and Adolescents

**Suggested Readings**

- Crouch, E., Probst, J.C., Radcliff, E., Bennett, K., & Hunt McKinney, S. (2019). Prevalence of adverse childhood experiences (ACEs) among US children. *Child Abuse & Neglect*. 92. 209-218.
- McLaughlin, A.M. (2011). Exploring social justice for clinical social work practice. *Smith College Studies in Social Work*, 81, 234-251.

**MODULE 2: Developmental Features of Childhood**

**TOPIC:** We will explore different facets of child development and explore some of the essential tasks of this stage of human development.

*Learning Objectives: By the end of this Module, you will be able to:*

- Understand brain development in early childhood and the ways that early relational trauma can harm healthy brain development.
- Discuss how Adverse Childhood Experiences (ACE) impacts child development.
- Explain cognitive & psychosocial development in preschoolers
- Understand mental health in preschool and school-aged children
- Examine counseling implications of brain research and neurobiological underpinnings of regulation
- Analyze assessment and interventions with young children

**Required readings:**

- Smith-Adcock, S., & Tucker, C. (Eds.) (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications. Chap 3.  
Attachment, trauma, and repair from infant to adolescent development: Counseling implications from neurobiology
- Tucker, C. (Ed.). (2019). *Counseling at the beginning: interventions and issues in infancy and early childhood* (First ed.). Routledge. Chap 6. Preschool to School-Aged (48-72 months) Children

**Suggested Readings**

- Morgan-Mullane, A. (2021). COVID-19 and the Injustice System: Reshaping clinical practice for children and families impacted by hyper-incarceration. in Tosone, C. (Ed.). (2021). *Shared Trauma, Shared Resilience during a Pandemic: social work in the time of COVID-19* (First edition). Springer Publishing

**MODULE 3: Developmental Features of Childhood (continued)**

*Learning Objectives: By the end of this Module, you will be able to:*

- Understand brain development from early childhood through early middle school.
- Explain cognitive & psychosocial development in developmental mental stages from 0 -11
- Understand mental health issues affecting 0-11
- Analyze assessment and interventions with children from 0-11

**Required readings:**

- Smith-Adcock, S., & Tucker, C. (Eds.) (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications. Chap 10, 11, 12. Counseling with very young children and their families. Professor will assign one of these chapters to each student as appropriate.
- Novak, A., & De Francisco Lopes, V. (2022). Child Delinquency, ACEs, and the Juvenile Justice System: Does exposure to ACEs affect justice system experiences for children? *Youth Violence and Juvenile Justice*. Vol. 20(2) 113-138

**Suggested Readings**

- Heim, C., Meinlschmidt, G., & Nemeroff, C. (2003). Neurobiology of early-life stress. *Psychiatric Annals*, 33(1).
- Perry, B. (2009). Examining child maltreatment through neurodevelopmental lens: Clinical application of the neurosequential model of therapeutics. *Journal of Loss and Trauma*, 14, 240-255

**UNIT 2: Assessment of & Engagement with Children  
and their Ecological Environments**

**MODULE 4: *The Biopsychosocial Assessment of the Child***

**TOPIC:** We will examine different frameworks for conducting assessment with children and for understanding the myriad systemic factors and issues affecting children, with a particular focus on resiliency. We will also focus on understanding problem differentiation with diverse child populations as well as explore the concept of cultural humility.

*Learning Objectives: By the end of this module, you will be able to:*

- Explain the components of a biopsychosocial.
- Delineate who will be interviewed and what data will be obtained for this assessment.
- Describe each assessment tool.
- Summarize the relevant data.
- Analyze the difference between cultural humility and cultural competence

**Required readings:**

- Fisher-Borne, M., Cain, J. M., & Martin, S. L. (2015). From mastery to accountability: Cultural humility as an alternative to cultural competence. *Social Work Education*, 34(2), 165-181
- Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press. Chap 4. The Biopsychosocial Assessment of the Child.

**Suggested Readings:**

- Brownlee, K., Rawana, J., Franks, J., Harper, J., Bajwa, J., O'Brien, E., & Clarkson, A. (2013). A systematic review of strengths and resilience outcome literature relevant to children and adolescents. *Child and Adolescent Social Work Journal*, 30, 435-459.
- Labuschagne, N., Hadridge, G., Vanderbijl, L., Jones, S. & Geater, E. (2021). Protecting children during the pandemic. in Turner, D. (Ed.). (2021). *Social Work and Covid-19: Lessons for Education and Practice*. St Albans: Critical. Publishing.
- Masten, A. S. (2011). Resilience in children threatened by extreme adversity: Frameworks for research, practice, and translational synergy. *Development and Psychopathology*, 23(2), 493-506.

**MODULE 5: Principles of Assessment & Engagement with Children**

**TOPIC:** We will comprehensively explore the different ecological systems in which children are involved: families, schools, and neighborhoods/communities. We will explore more specifically how to engage families and other adults who are instrumental in children's lives.

*Learning Objectives: By the end of this module, you will be able to:*

- Explain the purposes of clinical interviews
- Describe how interviews are used as assessment tools together with other assessment procedures
- Demonstrate different interview formats.
- Summarize and interpret clinical assessments

**Required readings:**

McConaughy, S. H. & Whitcomb, S.A. (2022). *Clinical Interviews for Children and Adolescents: assessment to intervention* (Third edition). Guilford Press. Chapter 1: Clinical Interviews in the Context of Multimethod Assessment & Chapter 2: Strategies for Child Clinical Interviews. Chapter 8: Interpreting Clinical Assessments

**MODULE 6: Principles of Assessment & Engagement with Children  
(continued)**

*Learning Objectives: By the end of this module, you will be able to:*

- Explain why an understanding of the child's activities, school, and peer relations are important in assessment and engagement with children.
- Practice different questions used in a clinical interview to elicit understanding of the child's self-awareness and feelings.
- Prepare for clinical interviews with teachers.
- Summarize and interpret clinical assessments.

**Required readings:**

McConaughy, S. H. & Whitcomb, S.A. (2022). *Clinical Interviews for Children and Adolescents: assessment to intervention* (Third edition). Guilford Press. Chapter 3: Child Clinical Interviews: Activities, School, and Peer Relations; Chapter 4: Child Clinical Interviews: Self Awareness, Feelings, and Adolescent Issues; Chapter 7: Teacher Interviews

**Suggested readings:**

Mosely M. (2018). The Black Teacher Project: How Racial Affinity Professional Development Sustains Black Teachers. *The Urban review*. 50(2):267-283.

**UNIT 3: Therapeutic Interventions with Children within their Ecological Environments****MODULE 7: Clinical Systemic Approaches: Family Therapy*****Overview of Therapeutic Interventions with Children: Working with Families***

**TOPIC:** In this module we will examine the essential elements and dynamics of diverse therapeutic strategies with children. We will also explore how social justice is intertwined with clinical social work practice. We will focus on conducting clinical work with children and their families. We will pay particular attention to interventions with families in diverse settings.

*Learning Objectives: By the end of this module, you will be able to:*

- Explain why an understanding of the child's activities, school and peer relations is important in assessment and engagement with children.
- Practice different questions used in a clinical interview to elicit understanding of the child's self-awareness and feelings.
- Prepare for clinical interviews with teachers.
- Summarize and interpret clinical assessments.

**Required readings:**

Anthony, E. K., & LeCroy, C. W. (Eds.). (2015). *Case studies in child, adolescent, and family treatment*. (Second Edition). John Wiley & Sons, Inc. Case Study 3-3 Promoting Positive Parenting: Infant mental health intervention with high-risk families. p. 219.

Smith-Adcock, S., & Tucker, C. (Eds.). (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications. Systemic Approach: Family Therapy, Chap 8 Sage Publications, Inc

**Suggested readings:**

Paul JJ, Dadar S, River LM, St. John-Larkin C. Telehealth adaptation of perinatal mental health mother–infant group programming for the COVID-19 pandemic. *Infant mental health journal*. 2022;43(1):85-99. doi:10.1002/imhj.21960

Ruffalo, M., Kuhn, M. & Evans, M. (2006). Developing a parent-professional team leadership model in group work: Work with families with children experiencing behavioral and emotional problems. *Social Work*, 51(1), 39-47.

Rose, W., Aldgate, J., McIntosh, M., & Hunter, H. (2009). High-risk children with challenging behaviour: Changing directions for them and their families. *Child and Family Social Work*, 14, 178-188.

Weisz, J. R., & Kazdin, A. E. (Eds.). (2017). *Evidence-based psychotherapies for children and adolescents* (Third edition). New York, NY: Guilford Press. Chapter 9: Parent Management Training and Problem-Solving Skills for Child and Adolescent Conduct Problems.

**MODULE 8: Play Therapy**

**TOPIC:** In this module we will analyze Play Therapy as a clinical, therapeutic approach

*Learning Objectives: By the end of this module, you will be able to:*

- Outline the main tenets of infant play therapy
- Explain the need for infant mental health
- Discuss multicultural considerations in infant mental health
- Identify the main theorists in infant mental health
- Discuss the need for transgender and gender-expansive affirming child-centered play therapy.
- Outline the goals and benefits of transgender and gender-expansive affirming child-centered play therapy

**Required readings:**

Byrd, R., Lorelle, S. & Donald, E. (2021). Transgender and Gender-Expansive Affirming Child-Centered Play Therapy. *International Journal of Play Therapy*, 30 (2), 146-156.

Courtney, J. A. (2020). Conceptualizing Infant Play Therapy in the Context of Infant Mental Health. In *Infant Play Therapy* (1st ed., pp. 3–17). Routledge

**Suggested Readings:**

Prout, H. T., & Fedewa, A. L. (Eds). (2015). *Counseling and psychotherapy with children and adolescents: Theory and practice for school and clinical settings* (Fifth edition). John Wiley & Sons, Incorporated. Chap 4. Play therapy.

Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press. Chap 7. Individual Play Therapy with the Child.

**MODULE 9: Clinical Approaches to Group Work with Children**

**TOPIC:** In this module we will explore the group counseling process with children.

*Learning Objectives: By the end of this module, you will be able to:*

- Explain the rationale for use of groups with children
- Describe different types of groups for children
- Outline considerations in planning a group including contraindications, open ended versus time limited, frequency, leadership, rules and confidentiality.
- Provide examples of different types of groups

**Required readings:**

Anthony, E. K., & LeCroy, C. W. (Eds). (2015). *Case studies in child, adolescent, and family treatment*. (Second Edition). John Wiley & Sons, Inc. *Case Study 2-3: Developmental Play Groups for Kindergarteners*

Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press. *Chapter 8: Group Work with Children*.

**MODULE 10: Other Clinical Interventions: Solution Focused, Cognitive Behavioral**

**TOPIC:** We examine other clinical approaches to working with children including Solution Focused and Cognitive Behavioral Therapy



**Required readings:**

- Smith-Adcock, S., & Tucker, C. (Eds.) (2017). *Counseling children and adolescents: Connecting theory, development, and diversity*. SAGE Publications. Chap 9 Solution Focused Therapy. Chap 7, Cognitive Behavioral Therapy
- Anthony, E. K., & LeCroy, C. W. (Eds). (2015). *Case studies in child, adolescent, and family treatment*. (Second Edition). John Wiley & Sons, Inc. Case Study 1-1 From Childhood to Young Adulthood with ADHD; Case Study 1-2 Solution-Focused Therapy with Child Behavioral Problems.

**MODULE 11: Professional Values, Ethics, and Professional Use of Self**

**TOPIC:** We will explore social work values that guide the assessment, engagement, and treatment/intervention with children and their families. This includes understanding more about the professional use of self, making ethically informed decisions, and initiating thoughtful and ethically sound termination strategies with child clients. We will explore the importance of understanding intersectionality as we work with clients. We will also review the regulations and guidelines for reporting child abuse in New Jersey.

*Learning Objectives: By the end of this module, you will be able to:*

- Outline the basic assumptions of the Cognitive Behavioral Therapy approach to clinical work with children.
- Identify the key theorists in the Cognitive Behavioral Approach
- Identify creative techniques for using the Cognitive Behavioral Approach with children.
- Explain the Solution Focused approach to clinical work with children.
- Outline the key techniques in the Solution Focused approach.

**Required readings:**

- Gil, E. & Crenshaw, D. A. (2016). *Termination Challenges in Child Psychotherapy*. Guilford Press. Chap 6. Countertransference Issues
- Watts-Jones, D. T (2010). Location of Self: Opening the door to dialogue on Intersectionality in the therapy process. *Family Process*, Vol. 49(3) 405-420
- Cook-Cottone, C. P., Kane, L. & Anderson, L. (2019). *The elements of counseling children and adolescents* (Second edition). Springer Publishing Company. Chap 7. Knowing and caring for yourself as a counselor

Child Abuse Reporting in New Jersey: <https://www.nj.gov/dcf/reporting/links/>  
<https://www.preventchildabuse.nj.org/resources/report-abuse/>  
<https://www.nj.gov/dcf/news/publications/HotlinesHelplines.pdf>

**MODULE 12: Termination**

**TOPIC:** The aspects of termination in child and family work will be examined.

*Learning Objectives: By the end of this module, you will be able to:*

- Define open-door termination with children
- Discuss attachment theory and its relationship to termination with children

- Explain psychoanalytic and psychodynamic views on termination with children
- Discuss critical goals for termination with children
- Identify common termination reactions when terminating clinical work with children
- Outline special considerations with student interns and termination with children.

Gil, E. & Crenshaw, D. A. (2016). *Termination Challenges in Child Psychotherapy*. Guilford Press. Chapter 1: Termination as a Necessary and Useful Closure of the Formal Therapy Relationship; Chapter 2: Open-door Terminations: Developmentally Sensitive Approach. Chapter 7: Critical Goals and Specific Strategies for Successful Termination; Chapter 8: Case Studies of Failures and Successes in the Termination Process.

## **UNIT 4: Special Topics in Clinical Work with Children**

### **MODULE 13: *Working with children who have experienced trauma, grief, loss.***

**TOPIC:** We will examine strategies for addressing traumatic reactions in children and/or experiences of grief and loss.

*Learning Objectives: By the end of this module, you will be able to:*

- Define open-door termination with children
- Discuss attachment theory and its relationship to termination with children
- Explain psychoanalytic and psychodynamic views on termination with children
- Discuss critical goals for termination with children
- Identify common termination reactions when terminating clinical work with children
- Outline special considerations with student interns and termination with children.

#### **Required readings:**

O'Donoghue, M. (2023). Responding to Students after the Homicide of a Classmate.

*International Journal on Social and Education Sciences*, 5(2), 225–242.

<https://doi.org/10.46328/ijonses.504>

Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press. Chapter 12: Children in Families Affected by Illness and Death. Chapter 14: Child Victims and Witnesses of Family and Community Violence.

#### **Suggested Readings:**

Lieberman, A., Knorr, K. (2007). The impact of trauma: A development

framework for infancy and early childhood. *Psychiatric Annals*, 37(6), 416-422

Turner HA, Mitchell KJ, Jones LM, Hamby S, Wade R, Beseler CL. Gun Violence Exposure and Posttraumatic Symptoms Among Children and Youth. (2019). *Journal of traumatic stress*. 32(6):881-889. doi:10.1002/jts.22466

### **MODULE 14: *Children living in kinship and foster care.***

**TOPIC:** This module delves into the role of social workers in the child welfare field and the specialized topic of children in foster care and adoption.

*Learning Objectives: By the end of this module, you will be able to:*

- Identify factors which determine the need for placement of a child in foster or kinship care
- Define beliefs about the best interests of the child
- Discuss the tripartite assessment in placement of a child
- Outline the continuum of services for children who need out of home placement
- Explain the psychological and social effects of placing children in foster homes including issues related to disenfranchised grief.
- Identify intervention strategies for children and foster families
- Outline the role of the Social Worker in the Child Welfare System

**Required readings:**

- Webb, N.B. (2019). *Social Work Practice with Children* (Fourth edition). Guilford Press  
Chap.10, Children living in kinship and foster home placements.
- Anthony, E. K., & LeCroy, C. W. (Eds). (2015). *Case studies in child, adolescent, and family treatment*. (Second Edition). John Wiley & Sons, Inc. Case Study 4-3 Nothing Left to Lose: Growing up in Foster Care. P 277. Case Study 4-4: Deciding what is Best for Savannah: The Grief and Joy in a Successful Adoption. P. 289.

**Suggested readings:**

- Hanlon R, Kim J, Woo C, Day A, Vanderwill L, Dallimore E. (2022). An exploratory study of the impact of COVID-19 on foster parenting. *Child & family social work*. 2022;27(3):371-380. doi:10.1111/cfs.12863
- Dore, M., Feldman, N. & Gelles, W. (2006). Family of friends: Creating a supportive day care community to prevent child abuse and neglect. In A. Lightburn & P. Sessions (Eds.), *Handbook for community-based clinical practice*. New York: Oxford Press.

**MODULE 15: Review of major concepts and theories from each module**