

**CUA**



**THE CATHOLIC UNIVERSITY OF AMERICA**

*National Catholic School of Social Service*

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**SSS 804**

**Clinical Social Work with Children**

**(3 credits)**

**Fall, 2009**

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**I. COURSE PURPOSE**

Building on the foundation year, this course deepens students' understanding and application of concepts, processes, and techniques of clinical social work in preparation for practice with the child as the primary unit of attention for therapeutic intervention. Against the backdrop of psychosocial, cognitive, and relational development, childhood strengths, resiliencies, and environmental and individual problems in living are examined. Psychodynamic, cognitive, and behavioral theories are applied to the assessment and treatment of various biopsychosocial challenges for the child client. The understanding of play as purposeful, meaningful communication for and with children is integrated into the clinical methodology. A continuum of directive and non-directive play and talk therapies serve as a basis for the process of therapeutic alliance, assessment, goal setting, planning, intervention, and practice evaluation with pre-school and grade school children.

**II. EDUCATIONAL OBJECTIVES**

**Upon completion of this course, students will be able:**

1. To understand the history of therapeutic work with children, including play therapy from its early roots to its present application within a continuum of directive to non-directive techniques.
2. To understand the role of developmental tasks and current relationships in the formation and termination of an appropriate therapeutic relationship with children.

3. To develop skill in interviewing child and parent clients.
4. Building on the foundation knowledge of human behavior in the social environment, to apply psychodynamic, cognitive, and behavioral theories to the process of assessment of a child's problems within a family, school, and community context.
5. To recognize the impact of human diversity on the development of children in the application of social work treatment models.
6. To apply social work values to treatment through a balance of traditional theories and models that explain and treat deficit conditions with a strengths/resilience perspective and competency-based practice.
7. To recognize the impact of one's own values, biases, and experience on the understanding and treatment of child and parent clients.
8. To translate presenting problems into co-jointly developed goals and measurable objectives for treatment.
9. To understand the differential application of a variety of modalities, including both directive and non-directive interventions, that address the unique needs of individual child clients, with particular attention paid to children at risk for problems associated with poverty, violence, and mental illness.
10. To develop skills in the differential application of non-directive and directive play and talk techniques to attachment issues, developmental problems, behavioral problems, learning difficulties, reactive disorders, and affective disorders.
11. To produce a theoretically-based, professionally written psychosocial assessment of a child client within a family, school, and community context.
12. To produce a review of current peer-reviewed professional literature in APA style that draws upon theoretical and empirical social work and related literature to explain and treat learning, behavioral, developmental, or affective problems in children and youth.

### **III. COURSE REQUIREMENTS**

#### **A. Required Texts**

Gil, E., & Drewes, A. (Eds.). (2005). *Cultural issues in play therapy*. New York: Guilford. [cited as "Gil & Drewes" in class schedule]

Greene, R. (2001). *The explosive child*. New York: Quill/Harper Collins. [cited as "Greene" in class schedule]

Kaduson, H., & Schaefer, C. (Eds.). (2000). *Short-term play therapy for children*. New York: Guilford. [cited as “Kaduson” in class schedule]

Timberlake, E., & Cutler, M. (2001). *Developmental play therapy in clinical social work*. Boston: Allyn & Bacon. [cited as “Timberlake & Cutler” in class schedule]

B. Recommended Texts

Axline, V. (1964). *Dibs in search of self*. New York: Random House.

Bromfield, Richard (1992) *Playing for real*. New York. Penguin Books.

Fraser, M. (1997). *Risk and resilience in childhood*. Washington D.C.: NASW.

Gil, E. (1991). *The healing power of play: Working with abused children*. New York: Guilford Press.

Guernsey, L. (1983). Client-centered play therapy. In C. Schaefer, & K. O’Conner (Eds.), *Handbook of play therapy*. New York: John Wiley & Sons.

Kendall, P. (1991). *Child and adolescent therapy: Cognitive-Behavioral procedures*. New York: Guilford Press.

Landreth, G. (1991). *Play therapy: The art of the relationship*. Muncie, IN: Accelerated development.

Mishne, J. (1983). *Clinical work with children*. New York: Free Press.

C. Other Recommended Resources (Journals)

*Child and Adolescent Social Work Journal*

*Child Welfare*

*International Journal of Play Therapy*

*Social Work in Schools (was Social Work in Education)*

D. Course Assignments

1. Psychosocial assessment of case given to all students. **DUE: Class 6**
2. Choose One: **DUE: Class 11**
  - a. Scholarly paper applying theory to the assessment and treatment of an issue within a particular child population that would be appropriate for clinical social work intervention.

- b. Annotated bibliography summarizing scholarly social work and related literature of an issue within a particular child population that would be appropriate for clinical social work intervention.

E. Grading Policy

Assignment 1	<b>30 %</b>
Assignment 2	<b>50%</b>
Class Attendance and Participation	<b>20%</b>

F. Attendance and Participation

Students are required to attend classes and are expected to participate meaningfully in class discussion/exercises. The class participation grade will be determined by the instructor's perception of the student's preparation for and contributions to class discussion/activities. Different students will make different kinds of contributions. Some will have an easy time with spontaneous interactions while others will be more comfortable making planned statements about key ideas from the readings or other sources. Both types of contributions are valued. Unexcused absences will lower the attendance and participation grade. More than three unexcused absences will result in a grade of F.

G. Course and Instructor Evaluation

NCSSS requires electronic evaluation of this course and the instructor. At the end of the semester, the evaluation form may be accessed at <http://evaluations.cua.edu/evaluations> using your CUA username and password. Additional, informal written or verbal feedback to the instructor during the semester is encouraged and attempts will be made to respond to requests.

#### IV. CLASS EXPECTATIONS

A. Scholastic Expectations

Please refer to NCSSS Announcements or appropriate Program Handbook for Academic Requirements, including scholastic and behavioral requirements. All written work should reflect the original thinking of the writer, cite references where material is quoted or adapted from existing sources, adhere to APA format, and should be carefully proof read by the student before submission to the instructor for grading.

B. Academic Honesty

Joining the community of scholars at CUA entails accepting the standards, living by those standards, and upholding them. Please refer to University Policy and appropriate Program Handbooks.

C. Accommodations

Students with physical, learning, psychological or other disabilities wishing to request accommodations must identify with the Disability Support Services (DSS) and submit documentation of a disability. If you have documented such a disability to DSS that requires accommodations or an academic adjustment, please arrange a meeting with the instructor as soon as possible to discuss these accommodations.

## **Class Schedule**

**Class**

**Topics and Readings**

**1 Historical Context of Clinical Social Work with Children**

Historical background of therapeutic work including early roots of play therapy and current applications of assessment and treatment along a continuum of talk vs. play and directive vs. non-directive techniques.

Required Reading

Gil & Drewes, Chap. 2, Play in Selected Cultures: Diversity and Universality (pp. 26-71).

**2 Conceptual Framework for S.W. with Children and Their Caregivers**

Present a range of normative expressions and the relatedness of various developmental tasks of childhood (psychosocial, object relations, cognitive, psychosexual). Discuss methodological approaches to working with parents including psychoeducation, relationship-focused dual interventions, and confidentiality issues.

Required Reading

Gil & Drewes, Chap. 1, From Sensitivity to Competence in Working Across Cultures (pp. 3-25).

Timberlake & Cutler, Chap. 1, Developmental Play Therapy in Clinical Social Work (pp. 3-26); Chap. 5, Concurrent Parent Work (pp. 99-134).

**3 Assessment and Planning**

Assessment of child and family from a biopsychosocial perspective. View and discuss video of a first interview with a troubled child.

### Required Reading

Timberlake & Cutler, Chap. 6, Parent Interviews (pp.137-166); Chap. 7, Child Interviews (pp. 167-192).

## **4 Therapeutic Alliance and Developmental Change**

Introduce play as a child's first language, and as purposeful, meaningful method of communication. Discuss play therapy across treatment stages including alliance, narrative themes, therapeutic growth, and termination, and view video of play as symbolic expression of feeling. Goals of interventions include the restoration of appropriate developmental sequencing, self-understanding, and self-regulation.

### Required Reading

Timberlake & Cutler, Chap. 2, Therapeutic Alliance and Developmental Change Process (pp. 27-50); Chap. 3, Play Objects Symbolic Metaphor: Tools in Developmental Change (pp. 51-74).

## **5 Play Therapy Tools and Techniques**

Discussion and practice of non-directive play therapy principles and skills including structuring, boundaries, levels of reflective interventions, and cultural competence. Video of non-directive interventions.

### Required Reading

Gil & Drewes, Chap. 3, Suggestions and Research on Multicultural Play Therapy (pp. 72-95).

Timberlake & Cutler, Chap. 4, Developmental Change Process Across Treatment Stages (pp. 75-98).

Nordling, W., & Guerney, L. (1999). Typical stages in the child-centered play therapy process. *The Journal for the Professional Counselor*, 14(1), 17-23.

McDonald, L. (1984). Violent play and non-violent people. *Friends Journal*, 3, 4-6.

## **6 Advanced Play Techniques**

Discussion and practice around advanced non-directive techniques including setting limits, cultural competence, responding to questions, demands, and externalizing and internalizing play expression.

### Required Reading

Gil & Drewes, Chap. 5, Play Therapy in the African American "Village" (pp. 115-147); Chap. 6, Therapeutic Play with Hispanic Clients.

Ray, Bratton, Rhine, & Jones (2001). The Effectiveness of play therapy: Responding to the critics. *International Journal of Play Therapy*, 10(1), 85-108.

## **7 Integration of Directive and Cognitive-Behavioral Theories and Techniques**

Presentation of directive play and talk interventions, focusing on cognitive and behavioral techniques and their applicability to internalizing and externalizing behaviors. Compare and contrast non-directive and directive methods.

### Required Reading

Timberlake & Cutler, Chap. 8, Integrating Cognitive-Behavioral Theory with Play Therapy (pp. 195-214).

Gil & Drewes, Chap. 7, Musings on Working with Native American Children in Play Therapy (pp. 168-179); Chap. 8, Play Therapy with Asian Children (pp. 180-194).

Kaduson & Schaefer, Chap. 1, Cognitive-Behavioral Play Therapy for Childhood Fears and Phobias (pp. 3-27).

Carpenter (2001). Play therapy case study: Directive or non-directive? *Association for Play Therapy*, 20(3), 11-14.

## **8 Clinical Application: Attachment**

Discussion of continuum of caregiver/child attachment, the biopsychosocial gifts of strong attachments, early assessment of Reactive Attachment Disorder and disordered attachments. Introduction of Theraplay™ and similar directive play interventions for children and parents who may struggle with attachment issues.

### Required Reading

Timberlake & Cutler, Chap. 9, Attachment Problems (pp. 217-238).

Kaduson & Schaefer, Chap. 8, Theraplay for Enhancing Attachment in Adopted Children (pp. 194-227).

Marvin, R., & Whelen, W. (2003). Disordered attachments: Toward evidence-based clinical practice. *Attachment and Human Development*, 5(3), 283-288.

## **9 Clinical Application: Challenges with Learning**

Strengths and deficits with a range of learning issues including ADHD and learning disabilities. Assessment and treatment with a focus on supporting a positive self-concept, increased awareness of strengths, and improved coping skills and social functioning.

### Required Reading

Timberlake & Cutler, Chap. 10, Learning Disabilities and Attention-Deficit Disorders, 239-263.

Kaduson & Schaefer, Chap 5, Structured Short-Term Play Therapy for Children with ADHD (pp.105-143).

Thomas, C., & Corcoran, J., (2003). Family approaches to Attention Deficit Hyperactivity Disorder: A review to guide school social work practice. *Children & Schools*, 25(1), 19-34.

Yeschin, N. (2000). A new understanding of Attention Deficit Hyperactivity Disorder: Alternate concepts and interventions. *Child and Adolescent Social Work Journal*, 17(3), 227-245.

## 10 **Clinical Application: Challenges with Childhood Anxiety**

Discussion of normative childhood fears and anxieties at various ages. Determination of when anxiety results in stalling of developmental growth and how to intervene. Introduction of art therapy for use as an assessment and intervention with those who employ internalizing behaviors as a coping strategy.

### Required Reading

Timberlake & Cutler, Chap. 11, Anxiety Disorders (pp. 264-287).

Kaduson & Schaefer, Chap. 1, Cognitive-Behavioral Play Therapy for Childhood Fears and Phobias (pp. 3-27).

Abramowitz, J., Brigidi, B., & Roche, K. (2001). Cognitive-behavioral therapy for obsessive compulsive disorder: A review of the treatment literature. *Research on Social Work Practice*, 11, 357-372.

## 11 **Clinical Application: Coping with Violence**

Directive interventions to support improved coping with violence, address issues of avoidance, increase mastery over positive coping skills, and reduce PTSD symptoms. Discussion of childhood trauma, physical abuse, sexual abuse, and community violence.

### Required Reading

Timberlake & Cutler, Chap. 12, Post-Traumatic Stress Disorders: Sexual Abuse and Community Violence (pp. 288-326).

Kaduson & Schaefer, Chap. 4, Brief Therapy with Traumatized Children: A Developmental Perspective (pp. 69-104).

## 12 **Clinical Application: Challenges with Oppositionality and Defiance**

Discussion of aggressive and antisocial behaviors as a broad risk factor for children. Non-directive and directive methods for intervention and inclusion of caregivers in supporting increased functioning.

### Required Reading

Kaduson & Schaefer, Chap. 3, Child-Centered Play Therapy with Disruptive School Students (pp. 53-68); Chap. 9, Involving and Empowering Parents in Short-Term Play Therapy for Disruptive Children (pp. 228-255).

Greene, *The Explosive Child* (pp. 1-191). (Small pages, doubled spaced, large print; Read for comprehension of his model.)

## **13 Time-Limited Treatment: Coping with Grief, Depression, and Divorce**

Identification of and intervention in childhood depression. Discussion of childhood losses and strategies to improve coping. Supportive interventions for children and their parents regarding communication and renegotiation of roles during and after divorce.

### Required Reading

Kaduson & Schaefer, Chap. 2, Short-Term Gestalt Play Therapy for Grieving Children (pp. 28-52); Chap. 6, Short-Term Solution-Oriented Play Therapy for children of Divorced Parents (pp.144-174); Chap. 7, Short-term Play Therapy for Families with Chronic Illness (pp. 175-193).

## **14 Practice Accountability and Ethical Issues in Social Work Practice with Children**

Discussion of professional social work responsibility to monitor clinical methodology and best practices, measure objectives and outcomes, and contribute to the documentation of effectiveness. Discuss ethical considerations and dilemmas in therapeutic work with children.

### Required Reading

Timberlake & Cutler, Chap. 13, Evaluating Therapeutic Change (pp. 329-359).

Childs & Timberlake, E. (1995). Assessing clinical progress: A case study of Daryl. *Child and Adolescent Social Work Journal*, 12, 289-316.