
**THE UNIVERSITY OF TEXAS AT AUSTIN
SCHOOL OF SOCIAL WORK**

Course Number:	SW393R24	Instructor:	Eileen Battle-Krampitz
Unique Number:	61855	E-mail:	bbattle46@hotmail.com
Semester:	Fall 2010	Phone:	(512) 468-8234
Meeting Time:	Tuesday 5:30 – 8:30 PM	Office Room:	3.104A
Meeting Place:	SSW 2.122	Office Hours	Tuesday, 4:30-5:30 PM or by appointment.

TREATMENT OF CHILDREN AND ADOLESCENTS

I. COURSE DESCRIPTION

The course is designed as an advanced clinical selective for graduate students in the School of Social Work who wish to increase knowledge and skills for practice with children, adolescents, and their families. Students will develop a working understanding of children and adolescents from diverse backgrounds, affirming and respecting their strengths and differences. This course is grounded in the identification, analysis, and implementation of empirically-based intervention strategies for working with children, adolescents, and their families. This course will focus on using multiple perspectives in the advanced application of theories, models and skills utilized in varying treatment modalities, with emphasis placed at the micro and mezzo levels of practice. The framework of the course is based on social work values and the ethical decision-making process, as illuminated by the NASW Code of Ethics. A bio-psycho-social and cultural emphasis will be applied to the various problem areas and disorders covered.

This course serves as an Advanced Clinical Selective for MSSW students.

II. COURSE OBJECTIVES

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

1. Demonstrate the ability to integrate theories and empirical research knowledge undergirding fields of practice areas with child, adolescent, and family populations.
2. Demonstrate skill in the application of different treatment modalities, including formal and informal systems of care.
3. Demonstrate an advanced clinical knowledge of the relationship between assessment and intervention as it relates to the strengths, the processes involved in human change, and the capacities and resources of children, adolescents and families.
4. Demonstrate the ability to adapt intervention models and strategies to reflect an understanding of persons from diverse backgrounds, including (but not limited to) race, ethnicity, culture, class,

gender, sexual orientation, religion/spirituality, physical or mental ability, developmental level, age, and national origin.

5. Critically evaluate and analyze different theoretical and intervention models as to their effectiveness in given situations. This includes: (a) the adequacy of the research and knowledge base; (b) the range of applicability; (c) the value and ethical issues, including the student's own value system; and (d) the policy implications involved in delivery of services to children, adolescents, and families.
6. Demonstrate the ability to implement and evaluate the effectiveness of clinical interventions for children, adolescents, and families.
7. Demonstrate the ability to tailor and integrate clinical interventions for children, adolescents, and families based on the context in which they are delivered.
8. Demonstrate advanced knowledge of social work values and ethical decision-making processes as they relate to ethical dilemmas in clinical intervention with children, adolescents, and families.

III. TEACHING METHODS

This class provides opportunities for both theory and skill development. Various models and theories will be presented through a combination of lectures, demonstrations of the practice interventions in each model, discussions about skills, presentations by guest clinicians, as well as small group and experiential exercises.

IV. REQUIRED READINGS

Selekman, MD, (2010) *Collaborative Brief Therapy with Children*, New York, NY: The Guilford Press

Weisz, J.R., & Kazdin, A.E., (Eds), (2010) *Evidence-Based Psychotherapies for Children and Adolescents*, 2nd Edition, New York, NY. The Guilford Press,

A required Coursepacket (Battle-Krampitz) of readings will be available on Blackboard. Access information will be given at the second class period, September 7, 2010.

RECOMMENDED READINGS

Fonagy, P., Target, M., Cottrell, D., Phillips, J., & Kurtz, Z. (2002). *What works for whom? A critical review of treatments for children and adolescents*. New York, NY: The Guilford Press.

Friedberg, R.D. & McClure, J.M., (2002). *Clinical Practice of Cognitive Therapy with Children and Adolescents, The Nuts and Bolts*, New York, NY: The Guilford Press

Kazdin, A. E., & Weisz, J. R. (Eds.) (2003). *Evidence-based psychotherapies for children and adolescents*. New York, NY: The Guilford Press.

Selekman, M.D. (2005), *Pathways to Change: Brief Therapy with Difficult Adolescents*, (2nd ed.). New York, NY: The Guilford Press.

V. COURSE REQUIREMENTS

Students are expected to attend class sessions regularly and to participate in an interactive framework between collegiate students and professor. Students are expected to complete the readings prior to class, and should be well prepared to participate in discussions and experiential learning assignments. Failure to regularly attend the class and demonstrate through discussions that one has comprehended the readings will be strongly considered in assigning the final grade.

No late assignments will be accepted, except in the case of extreme emergencies and then only with the permission of the professor. Students are expected to turn in all required assignments on the agreed upon due date **at the beginning of class**. Assignments turned in after class starts will be considered late. All late assignments will be assessed point penalties at the rate of 3 points each day late. If the due date is a problem, then the student should see the professor and negotiate another due date

Students are expected to both learn and demonstrate knowledge of clinical intervention theories and skills. This requires a search of the literature in a defined area in order to develop specialized knowledge concerning treatment of a specific problem area.

The University of Texas Honor Code

The core values of The University of Texas at Austin are learning, discovery, freedom, leadership, individual opportunity, and responsibility. Each member of the university is expected to uphold these values through integrity, honesty, trust, fairness, and respect toward peers and community.

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Professional Conduct in Class

The professor expects students to act like professionals in class. This means students should arrive on time for class, be prepared to participate in the class discussion, and show respect for one another's opinions. We will not, nor should we, always agree with one another. In this environment we should be exposed to diverse ideas and opinions, and sometime we will not agree with the ideas expressed by others. However, the professor does require that students engage one another with respect and professionalism.

Policy on Scholastic Dishonesty

Students who violate University rules on scholastic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and/or dismissal from the University. Since such dishonesty harms the individual, all students, and the integrity of the University, policies on scholastic dishonesty will be strictly enforced. For further information, the student may refer to the Web Site of the Student Judicial Services, Office of the Dean of Students (<http://www.utexas.edu/depts/dos/sjs/>).

Documented Disability Statement

Any student who requires special accommodations must obtain a letter that documents the disability from the Services for Students with Disabilities area of the Division of Diversity and Community Engagement (471-6259 voice or 471-4641 TTY for users who are deaf or hard of hearing). Present the letter to the professor at the beginning of the semester so that needed accommodations can be discussed. The student should remind the professor of any testing accommodations no later than five business days before an exam. For more information, visit <http://www.utexas.edu/diversity/ddce/ssd/>

Religious Holidays

By UT Austin policy, students must notify the professor of a pending absence at least fourteen days prior to the date of observance of a religious holy day. If the student must miss a class, an examination, a work assignment, or a project in order to observe a religious holy day, the professor will give the student an opportunity to complete the missed work within a reasonable time after the absence.

Use of E-Mail for Official Correspondence to Students

Email is recognized as an official mode of university correspondence; therefore, students are responsible for reading their email for university and course-related information and announcements. Students are responsible to keep the university informed about changes to their e-mail address. Students should check their e-mail regularly and frequently—daily, but at minimum twice a week—to stay current with university-related communications, some of which may be time-sensitive. Students can find UT Austin’s policies and instructions for updating their e-mail address at <http://www.utexas.edu/its/policies/emailnotify.php>.

Safety

As part of professional social work education, students may have assignments that involve working in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety. Students should notify the professor regarding any safety concerns.

Behavior Concerns Advice Line (BCAL)

If students are worried about someone who is acting differently, they may use the Behavior Concerns Advice Line to discuss by phone their concerns about another individual’s behavior. This service is provided through a partnership among the Office of the Dean of Students, the Counseling and Mental Health Center (CMHC), the Employee Assistance Program (EAP), and The University of Texas Police Department (UTPD). Call 512-232-5050 or visit <http://www.utexas.edu/safety/bcal>.

Emergency Evacuation Policy

Occupants of buildings on the UT Austin campus are required to evacuate and assemble outside when a fire alarm is activated or an announcement is made. Please be aware of the following policies regarding evacuation:

- Familiarize yourself with all exit doors of the classroom and the building. Remember that the nearest exit door may not be the one you used when you entered the building.
- If you require assistance to evacuate, inform the professor in writing during the first week of class.
- In the event of an evacuation, follow the professor’s instructions.
- Do not re-enter a building unless you’re given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.

VII. COURSE ASSIGNMENTS

I. Treatment Paper (Objectives 1 to 8)

Each student is to select a problem area of interest relating to children and/or adolescents and their families (e.g., ADHD, depression, PTSD, conduct disorder, etc.) and to conduct a scholarly literature review on treatment modalities that are used in this problem area in order to enhance their expertise on that topic. The focus of the project should be on select therapeutic approaches used to alleviate the problem. **Students should get approval of their chosen topic from the professor.** A typed, well-

written and packaged, 15 page paper (\pm 5 pages) is to be submitted. There are 3 major parts to the paper. A final (total) grade will be computed when the paper is turned in in its entirety at the end of the semester. Collectively, the paper will be worth 60% of the final grade. Be sure to proof-read your paper; 5 points of the total (60) points will be allocated for use of APA (5th ed.) format and any errors (punctuation, typographical, spelling). An outline for the paper is provided below. Students may choose to write about treatment modalities that have been covered in class, but are free (and encouraged) to review modalities and interventions that have not been covered in class. Students may work on this project alone, or in groups of up to **four (4) students**. If students collaborate on one project, all students will receive the same grade for that paper. Students are encouraged to meet with the professor regularly during the semester to discuss the development of the paper. This provides the student and professor the opportunity to engage in dialogue, and the opportunity for the professor to provide feedback throughout the process of writing, rather than waiting to receive feedback after the final copy has been turned in. It is recommended that students start on this assignment right away because the professor expects a very thorough search of the literature in social work, psychology, psychiatry, and related fields in order to demonstrate that one has mastered the up-to-date, current knowledge and methods concerning treatment of the problem area. A search of the literature should include journal articles as well as pertinent book chapters or monographs. Emphasis should be given to the most recent (within the past 10 years or so) literature and studies. Of course, seminal pieces that fall outside of this time parameter should still be included. It is assumed that most papers will have a substantial reference list to demonstrate one's mastery of the treatment method(s) under study. The number of references will vary by topic (e.g., there is simply more research available on the treatment of ADHD than oppositional defiant disorder). Although students are encouraged to utilize the Internet to search for material, they may not rely on the Internet at the expense of using refereed journal articles for the literature review. It is recommended that students set up the paper, using both headings and subheadings in their presentation, following the proposed outline below.

Treatment Paper Outline

- I. **Introduction and Overview.** This section of the paper serves three purposes. First, it describes the targeted problem or client population, placing them within some context. Second, it provides a statement of the problem or questions to be explored. Finally, it states the significance of the problem and the rationale behind examining it. (*Objectives 2, 4, 5, & 8*) – [10 Points]
 - (1) Definitions: Define all key concepts and ideas. This should include criteria for determining the existence of the problem. In other words, discuss how we know when we see this problem. Use the literature to support your definition.
 - (2) Scope of the Problem: Provide epidemiological data when available, along with a rationale for why this is a critical social problem that warrants attention.
 - (3) Cultural/Ethnic/Gender/Ethical Considerations: Address any cultural, ethnic, gender and ethical related issues that should be considered during the course of assessment and treatment, and what should be done to resolve those issues.
- II. **Intervention.** Describe your preferred intervention for treating this population. Areas that should be addressed in this section include (*Objectives 1, 2, 3, 4, 5, 6, & 7*) – [35 Points]:
 - (1) Theory. Briefly discuss what theoretical perspective(s) drive the intervention program.

(2) Description. Describe the intervention:

Components of this section might address:

- a. General overview and format of the treatment approach.
- b. Sequence and content of therapy sessions, and duration of treatment.
- c. Key techniques that one would use if implementing this therapeutic approach.
- d. Skills and accomplishments emphasized in treatment.
- e. How you would tailor this therapeutic approach, if at all, to compliment your personal style, or to integrate it with other preferred treatment approaches.
- f. What homework or handouts (if any) are given to the client system (include copies of handouts when possible).

(3) Evidence-Base. Synthesize the practice effectiveness (outcome) research on your chosen treatment modality for that given problem area. If you have chosen a treatment approach that cannot be considered an evidence-based approach at this time, then review what credible evidence is available that supports your selection. In short, do not just rely on your practice wisdom, or on the current popularity of a certain approach. The goal here is to think critically about your choice, reviewing the available research to support the treatment approach. Cite a minimum of 5 peer-reviewed/scientific journals and/or meta-analyses in this section. Focus on sources published since 1994, with the exception of seminal pieces that fall outside of this time parameter. For web citations, use the same scientific criteria as for professional journals.

III. Critique and Summary. Provide a critique of the intervention. What do you (and others) see as its strengths and limitations? How solid is the evidence-base of this intervention? In what ways does it need further scientific support? Does your chosen intervention appear to help clients? If so, to what extent, and what evidence do you have for this? Provide suggested directions for future research and practice in this area, as well as implications for social work practice and research. *(Objectives 1, 5 & 8) – [7 Points]*

IV. References. Follow APA (5th ed.) format. **[5 Points]**

Grading of this written assignment will take into account the quality of the writing as well as the content. The American Psychological Association (APA) – 5th edition format should be used. Written material should be carefully proof-read and errors (punctuation, typographical, spelling) corrected. Good writing requires a reiterative process that must be followed if quality is to improve. I strongly encourage you to read your paper several times and, if possible, have someone else proof read it.

V. Appendices. **[3 Points]**

2. Mid-Term Essay Exam (Objectives 1, 2 & 7)

One (1) essay exam based on the readings, lectures, speakers, and discussions will be given in the course. The exam will be given as scheduled on the course outline. It will be worth 30% of the final grade. MAKE-UP EXAMS WILL NOT BE GIVEN UNLESS THERE ARE UNUSUAL EXTENUATING CIRCUMSTANCES.

VIII. COURSE GRADING CRITERIA

Attendance and Participation attendance, substantive contributions	10% (Determined by professor in terms of conscientious active involvement in class, and value of to discussion)
Mid-Term Essay Exam	30%
<u>Treatment Paper</u>	<u>60%</u>
TOTAL	100%

GRADING SCALE

- 100 - 94 = A
- 93 - 90 = A-
- 89 - 87 = B+
- 86 - 84 = B
- 83 - 80 = B-
- 79 - 77 = C+
- 76 - 74 = C
- 73 - 70 = C-
- 69 - 67 = D+
- 66 - 64 = D
- 63 - 60 = D-
- 59 and below - F

Grading of all written assignments will take into account the quality of the writing as well as the content. The American Psychological Association (APA) – 5th edition format should be used. Written material should be carefully proof-read and errors (punctuation, typographical, spelling) corrected. Good writing requires a reiterative process that must be followed if quality is to improve. I strongly encourage you to read your paper several times and, if possible, have someone else proof read it.

IX. COURSE OUTLINE:

NOTE: EXACT ORDER OF EVENTS, SUBSTANTIVE AREAS, AND ASSIGNMENTS ARE SUBJECT TO CHANGE BASED ON NEEDS OF STUDENTS, UNFOLDING LEARNING PROCESSES, AND SPEAKER AVAILABILITY.

Date **Topics, Readings and Assignments**

August 31

Topics

Introductions and Class Overview
Class Setting of Robert and Roberta’s Rules of Order
Review Syllabus

Readings

Syllabus

September 7

Topics

History of Evidence-Based Practice with Children and Adolescents
Cognitive & Solution-Focused Therapy

Readings

Prochaska & Prochaska (2002). Transtheoretical model with guidelines for families with child abuse and neglect. In *Social Workers' Desk Reference*. (Will be distributed in class as a group discussion activity)
Selekman – Chapter 1
Weisz & Kazdin – Chapters 1 & 2

September 14

Topics

Assessment with Children and Families
Developmental Factors
Ethical and Legal Issues in the Treatment of Children and Families

Readings

Barbarin et al. (2004). Ethnicity and culture. In *Intervention with Children and Adolescents* – Coursepacket.
NASW Standards for the Practice of Social Work with Adolescents – Coursepacket.
Rae & Fournier (1999). Ethical and legal issues in the treatment of children and families. In *Handbook of Psychotherapies with Children and Families* – Coursepacket.
Selekman – Chapter 2
Springer (2002). Assessment protocols and rapid assessment instruments with troubled adolescents. In *Social Workers' Desk Reference*.
Weisz & Kazdin – Chapter 3

September 21

Topics

Assessment and Intervention Strategies:
Children and Adolescents in Family Systems
Video: Bill O'Hanlon (Students Encouraged to "Google" Bill O'Hanlon and be prepared to discuss his "take" on Positive Psychology. No Grade, but participation strongly encouraged.

Readings

Schroeder & Gordon (2002). Divorce. In *Assessment and Treatment of Childhood Problems* (2nd ed.) – Coursepacket.
Selekman – Chapters 3, 4, 5 & 6
Weisz & Kazdin – Chapters 11&12

September 28

Topics

Assessment and Intervention Strategies: Externalizing Behavioral Disorders (Oppositional Defiant Disorder, Conduct Disorder, and ADHD)

Readings

Corcoran & Springer (2005). Adolescent conduct problems. In *Strengths and Skills Building* – Coursepacket.
Springer (2002). Treatment planning with adolescents: ADHD case application. In *Social Workers' Desk Reference* – Coursepacket.
Weisz & Kazdin – Chapters 13, 14, 15, 18

October 5

PART I OF PAPER DUE FOR FEEDBACK (OPTIONAL)

Topics

Assessment and Intervention Strategies:
Substance-Related Disorders and Eating Disorders
Readings:
Austin, Macgowan, & Wagner (2005). Effective family-based interventions for adolescents with substance use problems. In *Research on Social Work Practice* – Coursepacket.
Monti et al. (2001). Motivational enhancement for alcohol-involved adolescents. In *Adolescent, Alcohol, and Substance Abuse* – Coursepacket.
Sheff (2005). My addicted son. In *New York Times* – Coursepacket.
Weisz & Kazdin – Chapters 22, 26, 27

October 12

Topics

Assessment and Intervention Strategies:
Mood Disorders and Suicide

Readings

Mahler (2004). The antidepressant dilemma. In *New York Times*; Coursepacket
Selekman, - Chapter 7
Simon (2004). Adolescents, sunny side up. In *New York Times* – Coursepacket.
Singer (2005). Child and adolescent psychiatric emergencies.
In *Crisis Intervention Handbook* (2nd ed.) – Coursepacket.
Weisz & Kazdin – Chapters 7, 8, 9, & 10

October 19

MID-TERM EXAM

October 26

Topics

Assessment and Intervention Strategies:
Anxiety Disorders and Autism Spectrum Disorders

Readings:

*****Additional Reading Will Be Added*****

Weisz & Kazdin – Chapters 4, 5, & 6 and 20 & 21

November 2

PART II OF PAPER DUE FOR FEEDBACK (OPTIONAL)

Topics

Assessment and Intervention Strategies:
PTSD; Effects of Trauma on Children and Adolescents
Crisis Intervention
Guest Speaker

Readings

*****Additional Reading Will Be Added*****

Selekman – Chapter 8
Weisz & Kazdin - Chapter 19

November 9

Topics

Assessment and Intervention Strategies:
Treating Diverse Populations and “Tough Cases”
Teen Parents
Guest Speaker(s)

Readings

Selekman – Chapters 9, 10, 11

November 16

Topics

Assessment and Intervention Strategies:
School and Community Based Programs
Guest Lecture

Readings

Weisz & Kazdin – Chapter 30, 31, 33

November 23

NO CLASS – LIBRARY DAY

November 30

LAST CLASS MEETING

Topics

TREATMENT PAPER DUE BY MIDNIGHT 11/30/2010.

COURSE WRAP-UP AND EVALUATIONS

Future of Evidence-Based Practice with Children and Adolescents

Readings

Selekman – Chapter 12

Weisz & Kazdin – Chapter 35

Required Readings

** Prochaska, J. M., & Prochaska, J. O. (2002). Transtheoretical model with guidelines for families with child abuse and neglect. In A. R. Roberts & G. J. Greene (Eds.), *Social Workers' Desk Reference* (pp. 379-384). New York, NY: Oxford University Press.

Rae, W. A., & Fournier, C. J. (1999). Ethical and legal issues in the treatment of children and families. In S. W. Russ & T. H. Ollendick (Eds.), *Handbook of Psychotherapies with Children and Families* (pp. 67-83). New York: Kluwer Academic/Plenum Publishers.

NASW Standards for the Practice of Social Work with Adolescents.

Barbarin, O., McCandies, T., Coleman, C., & Atkinson, T. (2004). Ethnicity and culture. In P. Allen-Meares & M. W. Fraser (Eds.), *Intervention with children and adolescents: An interdisciplinary perspective* (pp. 27-53). Boston, MA: Allyn & Bacon.

** Springer, D. W. (2002). Assessment protocols and rapid assessment instruments with troubled adolescents. In A. R. Roberts & G. J. Greene (Eds.), *Social Workers' Desk Reference* (pp. 217-221). New York, NY: Oxford University Press.

Austin, A.M., Macgowan, M.J., & Wagner, E.F. (2005). Effective family-based interventions for adolescents with substance use problems: A systematic review. *Research on Social Work Practice*, 15(2), 67-83.

Schroeder, C. S., & Gordon, B. N. (2002). Divorce. In *Assessment and Treatment of Childhood Problems* (2nd ed.) (pp. 440-465). New York, NY: The Guilford Press.

Corcoran, J., & Springer, D. W. (2005). Treatment of adolescents with disruptive behavior disorders. In J. Corcoran (Ed.), *Building Strengths and Skills: A Collaborative Approach to Working with Clients* (pp. 131-162). New York, NY: Oxford University Press.

** Springer, D. W. (2002). Treatment planning with adolescents: ADHD case application. In A. R. Roberts & G. J. Greene (Eds.), *Social Workers' Desk Reference* (pp. 324-327). New York, NY: Oxford University Press.

Sheff, D. (2005, February). My addicted son. *The New York Times Magazine*. 42-47.

Monti, P.M., Barnett, N.P., O'Leary, T.A., & Colby, S.M., (2001). Motivational enhancement for alcohol-involved adolescents. In P.M. Monti, S. M. Colby, & T. A. O'Leary (Eds.), *Adolescent, Alcohol, and Substance Abuse: Reaching Teens through Brief Interventions* (pp. 145-182). New York, NY: The Guilford Press.

Mahler, J. (2004, November). The antidepressant dilemma. *The New York Times Magazine*. 59-118.

Simon, C. C. (2004). Adolescents, sunny side up. *The New York Times. Education Life* (Section 4A, August 1, 2004).

Singer, J. (2005). Child and adolescent psychiatric emergencies: Mobile crisis response. In A. R. Roberts (Ed.), *Crisis Intervention Handbook* (3rd ed.) (pp. 319-361). New York, NY: Oxford University Press.

** COPY NOT INCLUDED IN COURSE PACKET – Will be distributed one week prior to discussion.

ADDITIONAL REFERENCES

Adams, J. (1991). Effects of solution focused therapy's "formula first session task" on compliance and outcome in family therapy. *Journal of Marital and Family Therapy*, 17, 277-290.

Alexander, J.F., & Parsons, B.V. (1973). Short-term behavioral intervention with delinquent families: Impact on family process and recidivism. *Journal of Abnormal Psychology*, 81(3), 219-225.

American Academy of Child and Adolescent Psychiatry. (1998). Practice parameters for the assessment and treatment of children and adolescents with depressive disorders. *Journal of the American Academy of Child and Adolescent Psychiatry*, 37(10, Suppl.).

- Anastopoulos, A. D., & Barkley, R. A. (1990). Counseling and training parents. In R. A. Barkley, Attention-Deficit Hyperactivity Disorder: A handbook for Diagnosis and Treatment (pp. 397-431). New York: Guilford Press.
- Anderson, E. I. (Producer), & Aller, R. (Director). (1998). Behavioral treatment of young autistic children [Vidiotape] (Available from Cambridge Center for Behavioral Studies, <http://store.ccbstore.com>).
- Anderson, S. R., DiPietro, E. k., Edwards, G. L., & Christian, W. P. (1987). Intensive home-based early intervention with autistic children. *Education and Treatment of Children, 10*, 352-366.
- Arnold, E. M., Smith, T. E., Harrison, D. F., & Springer, D. W. (2001). Adolescents' knowledge and beliefs about pregnancy: The impact of ENABL. *Adolescence, 35*(139), 485-498.
- Asarnow, J. R., Goldstein, M. J., Tompson, M., & Guthrie, D. (1993). One-year outcomes of depressive disorders in child psychiatric in-patients: Evaluation of the prognostic power of brief measure of expressed emotion. *Journal of Child Psychology and Psychiatry, 34*, 129-137.
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- Aseltine, R. (1996). Pathways linking parental divorce with adolescent depression. *Journal of Health and Social Behavior, 37*, 133-148.
- Attkisson, C. C., Rosenblatt, A., & Hoagwood, K. (1996). Research ethics and human subjects protection in child mental health services research and community studies. In K. Hoagwood, P. S. Jensen, & C. b. Fisher (Eds.), *Ethical Issues in Mental Health Research with Children and Adolescents* (pp. 43-58). Mahwah, NJ: Erlbaum.
- Atwood, J. D. (1995). A social constructionist approach to counseling the single parent family. *Journal of Family Psychotherapy, 6*, 1-33.
- Bandura, A., Grusec, J.E., & Menlove, F.L. (1967). Vicarious extinction of avoidance behavior. *Journal of Personality and Social Psychology, 5*, 16-23.
- Barabasz, A.F. (1973). Group desensitization of test anxiety in elementary school. *Journal of Psychology, 83*, 295-301.
- Barkley, R. A. (1997). *Defiant Children: A Clinician's Manual for Parent Training* (2nd ed.). New York: Guilford Press.
- Barrett, P.M. (1998). Evaluation of cognitive-behavioral group treatments for childhood anxiety disorders. *Journal of Clinical Child Psychology, 27*, 459-468.
- Barrett, P. M., Dadds, M. R., & Rapee, R. M. (1996). Family treatment of childhood anxiety: A controlled trial. *Journal of Consulting and Clinical Psychology, 64*, 333-342.
- Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *Journal of Early Adolescence, 11*, 56-95.

Beck, A. T., Steer, R. A., & Garbin, M. G. (1988). Psychometric properties of the Beck Depression Inventory: Twenty-five years of evaluation. *Clinical Psychology Review, 8*, 77-100.

Berg, I. K., & De Jong, P. (1996). Solution-building conversations: Co-constructing a sense of competence with clients. *Families in Society: The Journal of Contemporary Human Services, 77*, 376-391.

Bernal, M.E. & Castro, F. (1994). Are clinical psychologist prepared for service and research with ethnic minorities? Report of a decade of progress. *American Psychologist, 49*, 797-805.

Bernal, M.E., Klinnert, M.D., & Schultz, L.A. (1980). Outcome evaluation of behavioral parent training and client-centered parent counseling for children with conduct problems. *Journal of Applied Behavior Analysis, 13*(4), 677-691.

Birmaher, B., Ryan, N. D., Williamson, D. E., Brent, D. A., Kaufman, J., Dahl, R. E., Perel, J., & Nelson, B. (1996). Childhood and adolescent depression: A review of the past 10 years: Part I. *Journal of the American Academy of Child and Adolescent Psychiatry, 35*, 1427-1439.

Bjorkqvist, K., Lagerspetz, K. M. J., & Kaukiainen, A. (1992). Do girls manipulate and boys fight? *Aggressive Behavior, 18*, 117-127.

Block, J. (1978). Effects of a rational-emotive mental health program on poorly achieving disruptive high school students. *Journal of Counseling Psychology, 25*, 61-65.

Borduin, C.M., Mann, B.J., Cone, L.T., Henggeler, S.W., Fucci, B.R., Blaske, D.M., & Williams, R.A. (1995). Multisystemic treatment of serious juvenile offenders: Long-term prevention of criminality and violence. *Journal of Consulting and Clinical Psychology, 63*, 569-578.

Botvin, G. J., Baker, E., Dusnebury, L., Tortu, S., & Botvin, E. (1990). Preventing adolescent drug abuse through a multimodal cognitive-behavioral approach: Results of a 3-year study. *Journal of Consulting and Clinical Psychology, 58*, 437-446.

Brent, D. A., Perper, J. A., Moritz, G., Allman, C., Roth, C., Schweers, J., Balach, L., & Baugher, M. (1993). Psychiatric risk factors of adolescent suicide: A case control study. *Journal of the American Academy of Child and Adolescent Psychiatry, 32*, 521-529.

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