**University of Florida**

**College of Public Health & Health Professions Syllabus**

**CLP 7934: Special Topics - Child and Family Treatment (3 credit hours)**

Fall 2022

Delivery Format: In-person and Canvas

**Instructor Name:** Joy Gabrielli, Ph.D.

**Office Number:** HPNP 3130

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**Office Hours:** By appointment

**Preferred Course Communications:** Email

**PURPOSE AND OUTCOME**

**Course Overview**

The purpose of this course is to introduce you to evidence-based practice in the area of child and family therapy for a variety of childhood psychological disorders and family difficulties. This course will review concepts of assessment, case conceptualization, treatment planning, measurement of treatment outcomes, intersectionality, and ethics.

**Relation to Program Outcomes**

We will discuss the evidence-based practice in psychology movement. We will also review the conceptualization and evidence-base for a number of treatment approaches used with children and families for the most common childhood psychological disorders.

**Course Objectives and/or Goals**

Upon successful completion of this course, students will be able to identify and select empirically supported treatments for a variety of childhood psychological disorders that are congruent with presenting problems. Students will also be able to appraise individual, family, environmental, social, and situation factors that impact presenting concerns, case conceptualization, treatment planning, and treatment efficacy.

Students will be able to:

1. Apply knowledge of childhood psychological disorders to case conceptualization, treatment planning, and selection of empirically supported treatment approaches.
	1. Evaluate empirically supported treatments for a variety of childhood psychological disorders
		1. Discuss establishment of empirically supported treatments
		2. Compare and contrast empirically supported treatments
		3. Identify potential difficulties in dissemination of empirically supported treatments
2. Integrate knowledge of evidence-based practice in psychology, including empirical bases of assessment, intervention, and other psychological applications, clinical expertise, and patient preferences to inform treatment for a variety of childhood psychological disorders.
	1. Differentiate between childhood psychological disorders based upon data gathered in a clinical interview, observations, and assessments
	2. Adjust data gathering, conceptualization, and treatment methods based upon presented concerns, relevant contextual and cultural information, and ongoing data received
3. Appraise individual, family, environmental, social, and situational factors that may influence the presence of childhood psychological disorders, case conceptualization, treatment planning, and treatment efficacy.
	1. Assess individual, family, environmental, cultural, social, and situational factors in a clinical interview
	2. Discuss how individual, family, environmental, cultural, social, and situational factors may impact treatment progress and efficacy.

**Instructional Methods**

I expect students to actively engage in the course throughout the semester. Students must come to class prepared by completing all out-of-class assignments. This preparation gives students the knowledge or practice needed to engage in higher levels of learning during the live class sessions. Students who are not prepared for the face-to-face sessions may struggle to keep pace with the activities occurring in class sessions, and it is unlikely that they will reach the higher learning goals of the course. Similarly, students are expected to actively participate in the class. Student participation fosters a rich course experience for all involved that facilitates overall mastery of the course objectives.

**DESCRIPTION OF COURSE CONTENT**

**Topical Outline/Course Schedule**

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| **Week** | **Date** | **Topic** | **Readings** |
| 1 | 8/30 | Evidence-Based Practice | 1. APA Presidential Task Force on Evidence-Based Practice (2006). Evidence-based practice in psychology. *American Psychologist, 51*, 271-285.
2. Chambless & Hollon (1998). Defining empirically supported therapies. *Journal of Consulting and Clinical Psychology, 66,* 7-18.
3. Kazdin & Weisz (1998). Identifying and developing empirically supported child and adolescent treatments. *Journal of Consulting and Clinical Psychology, 66*, 19-36.
4. McHugh & Barlow (2010). The dissemination and implementation of evidence-based psychological treatments. *American Psychologist, 65*, 73-84.
5. Roberts & James (2008). Empirically supported treatments and evidence-based practice for children and adolescents. In Steele, Elkin, & Roberts (Eds.), *Handbook of evidence-based therapies for children and adolescents* (pp. 9-24). Springer.
 |
| 2 | 9/6 | Evaluating Treatments | 1. Chambless (2002). Beware the Dodo Bird: The dangers of overgeneralization. *Clinical Psychology: Science and Practice, 9*, 13-16.
2. Guyatt et al. (2008). GRADE: an emerging consensus on rating quality of evidence and strength of recommendations. *BMJ*, *336*, 924-926.
3. Koocher, McMann, Stout, & Norcross (2015). Discredited assessment and treatment methods used with children and adolescnets: A Delphi Poll. *Journal of Clinical Child & Adolescent Psychology, 44*, 722-729.
4. Lambert (2011). What have we learned about treatment failure in empirically supported treatments? Some suggestions for practice. *Cognitive and Behavioral Practice*, *18*, 413-420.
5. Lilienfeld (2007). Psychological treatments that cause harm. *Perspectives on Psychological Science, 2*, 53-70.
6. Luborsky et al. (2002). The Dodo Bird Verdict is alive and well – mostly. *Clinical Psychology: Science and Practice*, *9*, 2-12.
7. Tolin, McKay, Forman, Klonsky, & Thombs (2015). Empirically supported treatment: Recommendations for a new model. *Clinical Psychology: Science and Practice*, *22*, 317-338.
8. Weisz et al. (2013). Performance of evidence-based youth psychotherapies compared with usual clinical care: A multilevel meta-analysis. *JAMA Psychiatry*, *70*, 750-761.
 |
| 3 | 9/13 | Case Conceptualization & Treatment Planning | 1. Christon, McLeod, Jensen-Doess (2015). Evidence-based assessment meets evidence-based treatment: An approach to science-informed case conceptualization. *Cognitive and Behavioral Practice*, *22*, 36-48.
2. Finch, Lochman, Nelson, & Roberts (2012). Case formulation models with children, adolescents, and their families. *Specialty competencies in clinical child and adolescent psychology.* Oxford.
3. Scott & Lewis. (2015). Using measurement-based care to enhance any treatment. *Cognitive and Behavioral Practice*, *22*, 49-59.

Tsai et al. (2019). Do treatment plans matter? Moving from recommendations to action. *Journal of Clinical Child & Adolescent Psychology*, *48*, 72-78.1. Sanchez, A. L., Jent, J., Aggarwal, N. K., Chavira, D., Coxe, S., Garcia, D., ... & Comer, J. S. (2022). Person-centered cultural assessment can improve child mental health service engagement and outcomes. *Journal of Clinical Child & Adolescent Psychology*, *51*(1), 1-22.
 |
| 4 | 9/20 | School Consultation and Accommodations | 1. Burns, Jimerson, VanDerHeyden, & Deno (2016). Toward a unified Response-to-Intervention model: Multi-tiered systems of support. In Jimerson, Burns, & VanDerHeyden (Eds.), *Handbook of response to intervention: The science and practice of multi-tiered systems of support* (2nd ed., pp. 719-732). Springer.
2. Hosp, Huddle, Ford, & Hensley (2016). Learning disabilities/special education. In Jimerson, Burns, & VanDerHeyden (Eds.), *Handbook of response to intervention: The science and practice of multi-tiered systems of support* (2nd ed., pp. 43-58). Springer.
3. Schultz, Reisweber, & Cobb (2004). Mental health consultation in secondary schools. In Robinson (Ed.), *Advances in School-Based Mental Health Interventions: Best Practices and Program Models* (pp. 10-1–10-20). Civic Research Institute.
 |
| 5 | 9/27 | Multiculturalism and Diversity | 1. Bernal, Jiménez-Chaffey, & Domenech Rodríguez (2009). Cultural adaptation of treatments: A resource for considering culture in evidence-based practice. *Professional Psychology: Research and Practice*, *40*, 361-368.
2. Ecklund (2012). Intersectionality of identity in children: A case study. *Professional Psychology: Research and Practice*, *43*, 256-264.
3. Hall et al. (2016). A meta-analysis of cultural adaptations of psychological interventions. *Behavior Therapy*, *47*, 993-1014.
4. Huey & Polo (2017). Evidence-based psychotherapies with ethnic minority children and adolescents. In Weisz & Kazdin (Eds.), *Evidence-based psychotherapies for children and adolescents* (pp. 361-378). Guilford Press.
5. Pina, Polo, & Huey (2019). Evidence-based psychosocial interventions for ethnic minority youth: The 10-year update. *Journal of Clinical Child & Adolescent Psychology*, *48*, 179-202.
 |
| 6 | 10/4 | Behavior Therapy Foundations | 1. Farmer & Chapman (2016). Behavioral interventions in cognitive behavior therapy: Practical guidance for putting theory into action (2nd edition). American Psychological Association.
2. Farmer & Chapman (2016). Principles, goals, and structure of initial assessment sessions. (2nd edition). American Psychological Association.
3. Farmer & Chapman (2016). Changing behavior by changing the environment. (2nd edition). American Psychological Association.
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| 7 | 10/11 | Disruptive Behavior DisordersStudent Presentation – Multisystemic Therapy Everyday Parenting DUE | 1. Kaminski & Claussen (2017). Evidence base update for psychosocial treatment for disruptive behaviors in children. *Journal of Clinical Child & Adolescent Psychology*, *46*, 477-499.
2. McCart & Sheidow (2016). Evidence-based psychosocial treatments for adolescents with disruptive behavior. *Journal of Clinical Child & Adolescent Psychology*, *45*, 529-563.
3. Pelham (1999). The NIMH multimodal treatment study for attention-deficit hyperactivity disorder: Just say yes to drugs alone? *Canadian Journal of Psychiatry*, *44*, 981-990.
4. Sibley et al. (2014). Pharmacological and psychosocial treatment for adolescents with ADHD: An updated systematic review of the literature. *Clinical Psychology Review*, *34*, 218-232.
 |
| 8 | 10/18 | Cognitive Behavioral Therapy Foundations | 1. Stallard (2002). *Think good-feel good: A cognitive behavior therapy workbook for children and young people* (pp. 1-26). John Wiley & Sons.
2. *Additional readings TBA*
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| 9 | 10/25 | DepressionStudent Presentation - Interpersonal Therapy for DepressionCBT Assignment DUE | 1. Brent et al. (2008). Switching to another SSRI or to Venlafaxine with or without cognitive behavioral therapy for adolescents with SSRI-resistant depression. *Journal of the American Medical Association, 299*, 901-913.
2. McCauley et al. (2016). The adolescent behavioral activation program: Adapting behavioral activation as a treatment for depression in adolescence. *Journal of Clinical Child & Adolescent Psychology*, *45*, 291-304.
3. Reinecke, Curry, & March (2009). Findings from the Treatment for Adolescents with Depression Study (TADS): What have we learned? What do we need to know? *Journal of Clinical Child & Adolescent Psychology*, *38*, 761-767.
4. Rohde (2017). Cognitive-behavioral treatment for adolescent depression. In Weisz & Kazdin (Eds.), *Evidence-based psychotherapies for children and adolescents* (pp. 49-65). Guilford Press.
5. Weersing et al. (2017). Evidence base update of psychosocial treatments for child and adolescent depression. *Journal of Clinical Child & Adolescent Psychology*, *46*, 11-43.
 |
| 10 | 11/1 | AnxietyStudent Presentation - Pediatric OCD | 1. Comer et al. (2019). Evidence base update on the treatment of early childhood anxiety and related problems. *Journal of Clinical Child & Adolescent Psychology*, *48*, 1-15.
2. Higa-McMillan, Francis, Rith-Najarian, & Chorpita (2016). Evidence base update: 50 years of research on treatment for child and adolescent anxiety. *Journal of Clinical Child & Adolescent Psychology*, *45*, 91-113.
3. Ollendick & Pincus (2008). Panic disorder in adolescents. In Steele, Elkin, & Roberts (Eds.), *Handbook of evidence-based therapies for children and adolescents* (pp. 83-102). Springer.
4. Walkup et al. (2008). Cognitive behavioral therapy, sertraline, or a combination in childhood anxiety. *The New England Journal of Medicine*, *359*, 2753-2766.
 |
| 11 | 11/8 | TraumaTF-CBT DUE  | 1. Dorsey et al. (2016). Evidence base update for psychosocial treatments for child and adolescents exposed to traumatic events. *Journal of Clinical Child & Adolescent Psychology*, *46*, 303-330.
2. Additional readings TBA
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| 12 | 11/15 |  | 1. Dean et al. (2014). The peer relationships of girls with ASD at school: Comparison to boys and girls with and without ASD. *The Journal of Child Psychology and Psychiatry*, *55*, 1218-1225.
2. Hull et al. (2019). Development and validation of the Camouflaging Autistic Traits Questionnaire. *Journal of Autism and Developmental Disorders*, *49*, 819-833.
3. Juárez et al. (2018). Early identification of ASD through telemedicine: potential value for underserved populations. *Journal of Autism and Developmental Disorders*, *48*, 2601-2610.

Stainbrook et al. (2019). Measuring the service system impact of a novel telediagnostic service program for young children with autism spectrum disorder. *Autism*, *23*, 1051-1056. |
| 13 | 11/22 | Thanksgiving | **Take a break!**  |
| 14 | 11/29 | 3rd Wave TreatmentsStudent Presentation – Dialectical Behavioral TherapyFinal Papers Due | 1. Hancock et al. (2018). Acceptance and commitment therapy versus cognitive behavior therapy for children with anxiety: Outcomes of a randomized controlled trial. *Journal of Clinical Child & Adolescent Psychology*, *47*, 296-311.
2. Harris (2009). ACT in a nutshell. In Harris (Ed.), *ACT made simple: An easy-to-read primer on acceptance and commitment therapy*. New Harbinger.
3. Hayes et al. (2006). Acceptance and commitment therapy: Model, processes and outcomes. *Behaviour Research and Therapy*, *44*, 1-25.
4. Wicksell et al. (2005). Using acceptance and commitment therapy in the rehabilitation of an adolescent female with chronic pain: A case example. *Cognitive and Behavioral Practice*, *12*, 415-423.
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| 15 | 12/6 | Final Presentations |  |

**Course Materials and Technology**

**Text book (optional):**

Weisz, J. R., & Kazdin, A. E. (Eds.). (2017). *Evidence-based psychotherapies for children and adolescents*

(3rd ed.). New York, NY: The Guilford Press.

**Canvas**

Weekly course readings will be posted on Canvas, the learning management system supported by the University of Florida. Students are expected to check Canvas on a daily basis for readings, announcements, course modifications, and other relevant materials.

For issues with technical difficulties for E-learning please contact the UF Help Desk at:

* [Learning-support@ufl.ed](file:///C%3A%5C%5CC%5C%5CUsers%5C%5Chackg%5C%5CDesktop%5C%5CLearning-support%40ufl.edu)u
* (352) 392-HELP - select option 2
* [https://lss.at.ufl.edu/help.shtm](https://lss.at.ufl.edu/help.shtml)l

**ACADEMIC REQUIREMENTS AND GRADING**

1. **Reading Notes (10 points per class; 120 total points)**

Readings for each topic will be provided by the instructor on Canvas. During weeks 3-14, students will submit written responses to discussion questions over the assigned readings. The intention of this assignment is to demonstrate that you have read the articles and given them thought in advance of class. It is not expected that reading notes are well-crafted. The intention of this assignment is simply for you to demonstrate that you have read the material and thought about its application to the class and your experiences with child and family treatment. A scoring rubric will be posted on Canvas.

1. **Discussion Questions (5 points per class; 60 total points)**

Students will submit a discussion question during weeks 3-14. Discussion questions will be evaluated for depth of comprehension, integration of information with course content, and likelihood of eliciting meaningful class discussion. Please be aware that discussion questions are due on **Sundays by noon** to allow for integration into the upcoming class discussion.

1. **Everyday Parenting: The ABCs of Child Rearing (30 points)**

Students are assigned to complete Dr. Kazdin’s Everyday Parenting: The ABCs of Child Rearing [course](https://www.coursera.org/learn/everyday-parenting?utm_source=YALE&utm_medium=institutions&utm_campaign=201708-EP-AKWebsite). This course takes approximately 10-12 hours to complete, so please plan accordingly. All modules must be completed in order to receive credit for this assignment. Please provide proof that that you completed the assignment by **October 11th** via Canvas to receive credit.

1. **CBT Homework Exercise (30 points)**

Cognitive behavioral therapy (CBT) often includes a homework component. Over the course of your training career you will ask patients to complete a variety of homework tasks including monitoring forms and behavioral exercises. A commonly used homework assignment in CBT is mood and relaxation (or pleasurable event) tracking. This assignment will entail you completing this form self-monitoring form from a stress management protocol ([Lin](http://global.oup.com/us/companion.websites/fdscontent/uscompanion/us/pdf/treatments/Daily_Self_Monitoring_Sheet.pdf)k). You can select what sort of relaxation practice you want to engage in (e.g., PMR, diaphragmatic breathing). You should make your best effort to keep as accurate of a log as possible by completing the log each day.

Please briefly answer the following questions after completing the monitoring form. This will be due to Canvas by **October 25th** to receive credit. No more than two double-spaced pages of text.

* Describe your ability to complete the self-monitoring form each day (be honest).
* What were some of the barriers you encountered to completing the log and/or engaging in relaxation practice?
* Did it make a difference when you were able to engage in a relaxation practice? Why or why not? Did you notice any patterns for times that it was effective?
* Did this assignment change your perspective on patients completing homework assignments? If so, how?
1. **Trauma Focused CBT Training (30 points)**

Each student is assigned to take the Trauma-Focused CBT continuing education course provided without cost online at  [http://tfcbt.musc.edu](http://tfcbt.musc.edu/)/. This is an extensive website; there are 11 modules that you must complete on the website for this assignment. All modules (i.e., the entire course) must be completed in order to receive credit for this assignment. A Certificate of Completion is available for printing when you submit the final evaluation. Please upload that certificate into Canvas to receive credit. Students must provide this certificate by **November 8th**. Students are encouraged to begin the training well in advance of our discussion of TF CBT to allow adequate time to complete the training.

1. **Class Presentation (150 points)**

Pairs of students will conduct an in-class presentation on a childhood psychological disorder and empirically supported treatment. Presentations should include the following components and last approximately 45 minutes. Students are required to post presentation material and their resources document (see below) the evening before class so that others can access material in advance. Students will be assigned a presentation on the first day of class.

The presentation should be based on a recent review of the literature (e.g., journal articles, treatment manuals) on the student’s chosen topic. Students are expected to provide an overview of the disorder, methods for assessment, and relevant information on empirically supported treatments (e.g., core treatment components, state of the treatment evidence). Students should compile a one-page handout of helpful resources to disseminate to the class. This can include organizational websites, links to videos explaining the disorder and/or treatment, therapy resources, and citations for key manuals, articles, or chapters.

1. **Final Paper (180 points)**

The final paper will include two components – an APA formatted case write up of cultural adaptation employed within an evidence-based treatment protocol (150 points). A rubric and additional instructions will be uploaded to Canvas. The last week of class we will also do class paper presentations to introduce one another to the specific protocol and adaptations you identified (30 points). Further details will be discussed in class.

**Grading**

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| **Requirement** | **Due date** | **% of final grade** |
| Notes | Weekly | 20% |
| Discussion Questions | Weekly | 10% |
| Everyday Parenting: The ABCs of Child Rearing Coursera | October 11 | 5% |
| CBT Homework Exercise | October 25 | 5% |
| Trauma-Focused CBT Training | November 8 | 5% |
| Class Presentation | Varies by Topic | 25% |
| Final Paper | November 29 | 30% |

Point system used (i.e., how do course points translate into letter grades).

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|  | **Points** | **558-** |  |  | **540-** |  | **522-** |  | **498-** |  | **480-** |  | **462-** |  | **438-** |  | **420-** |  | **402-** |  | **378-** |  | **360-** |  |  | **Below** |  |
|  | **earned** | **600** |  |  | **557** |  | **539** |  | **521** |  | **497** |  | **479** |  | **461** |  | **437** |  | **419** |  | **401** |  | **377** |  | **360** |  |  |
|  | **Letter** |  |  | A |  |  |  | A- |  |  | B+ |  |  | B |  |  | B- |  |  | C+ |  |  | C |  |  | C- |  |  | D+ |  |  | D |  |  | D- |  |  | E |  |  |
|  | **Grade** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Please be aware that a C- is not an acceptable grade for graduate students. A grade of C counts toward a graduate degree only if an equal number of credits in courses numbered 5000 or higher have been earned with an A.

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|  | **Letter** | **A** |  | **A-** | **B+** | **B** |  | **B-** | **C+** | **C** | **C-** |  | **D+** | **D** |  | **D-** | **E** |  | **WF** | **I** | **NG** |  | **S-** |  |
|  | **Grade** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **U** |  |
|  | **Grade** |  | 4.0 |  | 3.67 |  | 3.33 |  | 3.0 |  | 2.67 |  | 2.33 |  | 2.0 |  | 1.67 |  | 1.33 |  | 1.0 |  | 0.67 |  | 0.0 |  | 0.0 |  | 0.0 |  | 0.0 |  | 0.0 |  |
|  | **Points** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

More information on UF grading policy may be found at:

<http://gradcatalog.ufl.edu/content.php?catoid=10&navoid=2020#grades>

**Exam Policy**

Make-up exams and work will only be allowed in the event of an excused absence. Please schedule make-up work with the instructor. Late submissions of work will be assigned a grade of zero.

**Policy Related to Make up Exams or Other Work**

Students who must miss an assignment or exam deadline because of conflicting professional or personal commitment must make prior arrangements with the instructor. If an assignment is missed because of illness, please contact the instructor to discuss.

Please note: Any requests for make-ups due to technical issues MUST be accompanied by the UF Computing help desk (<http://helpdesk.ufl.edu/>) correspondence. You MUST e-mail me within 24 hours of the technical difficulty if you wish to request a make-up.

**Policy Related to Required Class Attendance**

Attendance is expected as a part of the student’s professional training. Students are expected to arrive for class on time and to remain for the full class period. Students needing to miss class should make prior arrangements with the instructor.

Please note all faculty are bound by the UF policy for excused absences. Excused absences must be consistent with university policies in the Graduate Catalog (<http://gradcatalog.ufl.edu/content.php?catoid=10&navoid=2020#attendance>). Additional information can be found here: <https://catalog.ufl.edu/ugrad/current/regulations/info/attendance.aspx>

**STUDENT EXPECTATIONS, ROLES, AND OPPORTUNITIES FOR INPUT**

**Expectations Regarding Course Behavior**

Please refrain from using cell phones or any other electronic devices during class as it is distracting and inconsiderate of other students and the instructor. Laptop use is acceptable for note taking or presenting. However, do not browse other websites during class time. It is expected that students will be engaged and actively participate during class. Do not arrive late to class or disrupt the class as it is distracting and inconsiderate of other students and the instructor.

To the extent permitted by facility rules and restrictions, you may bring food and/or beverages to class as long as it does not interfere with your ability to work and/or participate in class and as long as it does not interfere with or your classmates’ ability to work and participate in class. You will be expected to clean-up after yourself and dispose of all trash before leaving the classroom.

**Communication Guidelines**

As a blended learning class, it is imperative that students check email and the Canvas website often (i.e., once daily). Students are expected to participate in graded online discussions on various topics throughout the course. Please reference the applicable assignment rubrics for online discussions for a clear outline of what is expected with regard to posts and replies. In addition, please see the following resource for guidelines on online course etiquette:

<http://teach.ufl.edu/wp-content/uploads/2012/08/NetiquetteGuideforOnlineCourses.pdf>.

Our class sessions may be audio visually recorded for students in the class to refer back and for enrolled students who are unable to attend live. Students who participate with their camera engaged or utilize a profile image are agreeing to have their video or image recorded.  If you are unwilling to consent to have your profile or video image recorded, be sure to keep your camera off and do not use a profile image. Likewise, students who un-mute during class and participate orally are agreeing to have their voices recorded.  If you are not willing to consent to have your voice recorded during class, you will need to keep your mute button activated and communicate exclusively using the "chat" feature, which allows students to type questions and comments live. The chat will not be recorded or shared. As in all courses, unauthorized recording and unauthorized sharing of recorded materials is prohibited.

**Academic Integrity**

Students are expected to act in accordance with the University of Florida policy on academic integrity. As a student at the University of Florida, you have committed yourself to uphold the Honor Code, which includes the following pledge:

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“**We, the members of the University of Florida community, pledge to hold ourselves and our peers to** **the highest standards of honesty and integrity**.“

You are expected to exhibit behavior consistent with this commitment to the UF academic community, and on all work submitted for credit at the University of Florida, the following pledge is either required or implied:

**“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”**

It is your individual responsibility to know and comply with all university policies and procedures regarding academic integrity and the Student Honor Code. Violations of the Honor Code at the University of Florida will not be tolerated. Violations will be reported to the Dean of Students Office for consideration of disciplinary action. For additional information regarding Academic Integrity, please see Student Conduct and Honor Code or the Graduate Student Website for additional details:

<https://www.dso.ufl.edu/sccr/process/student-conduct-honor-code/>

<http://gradschool.ufl.edu/students/introduction.html>

Please remember cheating, lying, misrepresentation, or plagiarism in any form is unacceptable and inexcusable behavior.

**Recording Within the Course:**

Students are allowed to record video or audio of class lectures. However, the purposes for which these recordings may be used are strictly controlled.  The only allowable purposes are (1) for personal educational use, (2) in connection with a complaint to the university, or (3) as evidence in, or in preparation for, a criminal or civil proceeding.  All other purposes are prohibited.  Specifically, students may not publish recorded lectures without the written consent of the instructor.

A “class lecture” is an educational presentation intended to inform or teach enrolled students about a particular subject, including any instructor-led discussions that form part of the presentation, and delivered by any instructor hired or appointed by the University, or by a guest instructor, as part of a University of Florida course. A class lecture does not include lab sessions, student presentations, clinical presentations such as patient history, academic exercises involving solely student participation, assessments (quizzes, tests, exams), field trips, private conversations between students in the class or between a student and the faculty or lecturer during a class session.

Publication without permission of the instructor is prohibited. To “publish” means to share, transmit, circulate, distribute, or provide access to a recording, regardless of format or medium, to another person (or persons), including but not limited to another student within the same class section. Additionally, a recording, or transcript of a recording, is considered published if it is posted on or uploaded to, in whole or in part, any media platform, including but not limited to social media, book, magazine, newspaper, leaflet, or third party note/tutoring services. A student who publishes a recording without written consent may be subject to a civil cause of action instituted by a person injured by the publication and/or discipline under UF Regulation 4.040 Student Honor Code and Student Conduct Code.

**Online Faculty Course Evaluation Process**

Students are expected to provide professional and respectful feedback on the quality of instruction in this course by completing course evaluations online via GatorEvals. Guidance on how to give feedback in a professional and respectful manner is available at <https://gatorevals.aa.ufl.edu/students/>. Students will be notified when the evaluation period opens, and can complete evaluations through the email they receive from GatorEvals, in their Canvas course menu under GatorEvals, or via [https://ufl.bluera.com/ufl/](https://urldefense.proofpoint.com/v2/url?u=https-3A__ufl.bluera.com_ufl_&d=DwMFAg&c=sJ6xIWYx-zLMB3EPkvcnVg&r=y2HjEMjRMHJhfdvLrqJZlYczRsfp5e4TfQjHuc5rVHg&m=WXko6OK_Ha6T00ZVAsEaSh99qRXHOgMNFRywCoehRho&s=itVU46DDJjnIg4CW6efJOOLgPjdzsPvCghyfzJoFONs&e=). Summaries of course evaluation results are available to students at <https://gatorevals.aa.ufl.edu/public-results/>.

**Online Synchronous Sessions:**

Our class sessions may be audio visually recorded for students in the class to refer back and for enrolled students who are unable to attend live. Students who participate with their camera engaged or utilize a profile image are agreeing to have their video or image recorded. If you are unwilling to consent to have your profile or video image recorded, be sure to keep your camera off and do not use a profile image. Likewise, students who un-mute during class and participate orally are agreeing to have their voices recorded. If you are not willing to consent to have your voice recorded during class, you will need to keep your mute button activated and communicate exclusively using the "chat" feature, which allows students to type questions and comments live. The chat will not be recorded or shared. As in all courses, unauthorized recording and unauthorized sharing of recorded materials is prohibited.

**Policy Related to Guests Attending Class:**

Only registered students are permitted to attend class. However, we recognize that students who are caretakers may face occasional unexpected challenges creating attendance barriers.  Therefore, by exception, a department chair or his or her designee (e.g., instructors) may grant a student permission to bring a guest(s) for a total of two class sessions per semester.  This is two sessions total across all courses.  No further extensions will be granted.  Please note that guests are **not** permitted to attend either cadaver or wet labs.  Students are responsible for course material regardless of attendance. For additional information, please review the Classroom Guests of Students policy in its entirety.  Link to full policy: <http://facstaff.phhp.ufl.edu/services/resourceguide/getstarted.htm>

**SUPPORT SERVICES**

**Accommodations for Students with Disabilities**

If you require classroom accommodation because of a disability, you must register with the Dean of Students Office  [http://www.dso.ufl.edu](http://www.dso.ufl.edu/) within the first week of class. The Dean of Students Office will provide documentation to you, which you then give to the instructor when requesting accommodation. The College is committed to providing reasonable accommodations to assist students in their coursework.

**Counseling and Student Health**

Students sometimes experience stress from academic expectations and/or personal and interpersonal issues that may interfere with their academic performance. If you find yourself facing issues that have the potential to or are already negatively affecting your coursework, you are encouraged to talk with an instructor and/or seek help through University resources available to you.

* The Counseling and Wellness Center 352-392-1575 offers a variety of support services such as psychological assessment and intervention and assistance for math and test anxiety. Visit their web site for more information: <http://www.counseling.ufl.edu>. On line and in person assistance is available.
* You Matter We Care website: <http://www.umatter.ufl.edu/>. If you are feeling overwhelmed or stressed, you can reach out for help through the You Matter We Care website, which is staffed by Dean of Students and Counseling Center personnel.
* The Student Health Care Center at Shands is a satellite clinic of the main Student Health Care Center located on Fletcher Drive on campus. Student Health at Shands offers a variety of clinical services. The clinic is located on the second floor of the Dental Tower in the Health Science Center. For more information, contact the clinic at 392-0627 or check out the web site at: <https://shcc.ufl.edu/>
* Crisis intervention is always available 24/7 from:

Alachua County Crisis Center:
(352) 264-6789
<http://www.alachuacounty.us/DEPTS/CSS/CRISISCENTER/Pages/CrisisCenter.aspx>

Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone so do not be afraid to ask for assistance.

**Professor Commitment to Equity, Diversity, and Inclusion**

Within the field of clinical psychology, recognition and celebration of individual differences and the impact of culture on personal development is a core professional value. As such, I intend to promote learning about the topics within this course through a lens of cultural humility. I am also committed to providing an inclusive training environment within this course that enables all students to feel comfortable to discuss ideas or ask questions that provide a diversity of perspectives while maintaining respect for others. I welcome direct one-on-one feedback on my approach to establishing this type of inclusive environment within this class at any time throughout the course.

**Inclusive Learning Environment**

Public health and health professions are based on the belief in human dignity and on respect for the individual. As we share our personal beliefs inside or outside of the classroom, it is always with the understanding that we value and respect diversity of background, experience, and opinion, where every individual feels valued. We believe in, and promote, openness and tolerance of differences in ethnicity and culture, and we respect differing personal, spiritual, religious and political values. We further believe that celebrating such diversity enriches the quality of the educational experiences we provide our students and enhances our own personal and professional relationships. We embrace The University of Florida’s Non-Discrimination Policy, which reads, “The University shall actively promote equal opportunity policies and practices conforming to laws against discrimination. The University is committed to non-discrimination with respect to race, creed, color, religion, age, disability, sex, sexual orientation, gender identity and expression, marital status, national origin, political opinions or affiliations, genetic information and veteran status as protected under the Vietnam Era Veterans’ Readjustment Assistance Act.” If you have questions or concerns about your rights and responsibilities for inclusive learning environment, please see your instructor or refer to the Office of Multicultural & Diversity Affairs website:  [www.multicultural.ufl.ed](http://www.multicultural.ufl.edu/)u